

GSM Medical Center
Muaded Almazrouei Bdlg -
1st floor - Al Satwa Rd - near
Satwa Roundabout - Al Satwa
- Dubai
Tel: 04-8831002,04-8831003
Fax: 048831004



PRESCRIPTION

Patient Name	:	Gladys Nolasco	AGE	:	38 YEARS
Address	:	discovery gardens street 9 building 179 apartment 508	Mobile	:	+971 55 148 5510
Medical Record #	:		Allergies	:	-
Principal Diagnosis	:	DEHYDRATION (E86.0)			
Secondary Diagnosis	:	HEADACHE (R51)			
Additional Remarks	:	HYDRATE WELL, MONITOR BLOOD PRESSURE			

GENERIC/DOSE/FORM	STRENGTH	INSTRUCTIONS	QUANTITY	ROUTE OF ADMIN
ORS SOLUTION (ORANGE)		1 SACHET, 2 TIMES/DAY FOR 5 DAYS	10	PO
K-FLAM/TABLETS	50MG	1 TABLET, 3 TIMES/DAY FOR 3 DAYS	9	PO

Doctor Name

License Number

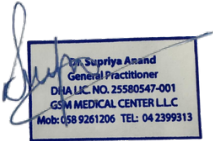
Date

Signature & Stamp

Dr. Supriya Anand

25580547-001

24-JUNE-2023



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Date: 24-JUNE-2023

SICK LEAVE CERTIFICATE

Name: **Gladys Nolasco**

Age: **38 Years**

Telephone: **+971 55 148 5510**

Insurance: **Cash**

This is to certify that **Gladys Nolasco** is suffering from **Dehydration with Headache and Elevated Blood Pressure**. She is not fit to attend work yet, advised to take rest for **02** DAYS with effect from **24-JUNE-2023**.

Sincerely Yours,

Dr. Supriya Anand

