



St. Luke's
Medical Center
Global City

Rizal Drive corner 32nd Street and 5th
Avenue, Taguig City, Philippines
Tel. No.: (632)8789-7700

Prescriptions

Rx Printed: 10/06/2024 21:27

Patient: VILLARUEL, RICHSEL S

Age: 37y

Birthdate: 03-Oct-1986

Sex: Female

Generic Name: metoclopramide 10 mg oral tablet

Brand Name:

Dose: 10 mg

Directions: 1 tab(s) orally every 8 hours as needed for nausea/
vomiting

Start Date: 6/10/2024 9:27:16 PM

Days:

Quantity: 10 Tablet (ten)

Refills: 0

Physician: Gaudencio Abel Diaz Garcia (MD)

PRC Lic: 98436

S2 Lic:

PTR No:

Signature Rx:



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Prescriptions

Rx Printed: 10/06/2024 21:27

Patient: VILLARUEL, RICHSEL S

Age: 37y

Birthdate: 03-Oct-1986

Sex: Female

Generic Name: betahistine 24mg/ tablet

Brand Name:

Dose:

Directions: 1 tablet every 12 hours as needed for dizziness

Start Date: 6/10/2024 9:27:16 PM

Days:

Quantity: 10 Tablet (ten)

Refills: 0

Physician: Gaudencio Abel Diaz Garcia (MD)

PRC Lic: 98436

S2 Lic:

PTR No:

Signature Rx:



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Prescriptions

Rx Printed: 10/06/2024 21:27

Patient: VILLARUEL, RICHSEL S

Age: 37y

Birthdate: 03-Oct-1986

Sex: Female

Generic Name: celecoxib 200 mg oral capsule

Brand Name:

Dose: 200 mg

Directions: 1 cap(s) orally every 12 hours as needed for pain/
headache

Start Date: 6/10/2024 9:27:16 PM

Days:

Quantity: 6 Capsule (six)

Refills: 0

Physician: Gaudencio Abel Diaz Garcia (MD)

PRC Lic: 98436

S2 Lic:

PTR No:

Signature Rx:



St. Luke's
Medical Center
Global City

Rizal Drive corner 32nd Street and 5th Avenue,
Bonifacio Global City, Taguig City
Tel. No: (632) 8789-7700

Patient Name: RICHSEL VILLARUEL

Attending Caregiver: Palma, Vincent Anthony Asilom

Dizziness

Dizziness is a common problem. It is a feeling of unsteadiness or light-headedness. You may feel like you are about to faint. Dizziness can lead to injury if you stumble or fall. Anyone can become dizzy, but dizziness is more common in older adults. This condition can be caused by a number of things, including medicines, dehydration, or illness.

FOLLOW THESE INSTRUCTIONS AT HOME:

Eating and drinking

- Drink enough fluid to keep your urine clear or pale yellow. This helps to keep you from becoming dehydrated. Try to drink more clear fluids, such as water.
- **Do not** drink alcohol.
- Limit your caffeine intake if told to do so by your health care provider. Check ingredients and nutrition facts to see if a food or beverage contains caffeine.
- Limit your salt (*sodium*) intake if told to do so by your health care provider. Check ingredients and nutrition facts to see if a food or beverage contains sodium.

Activity

- Avoid making quick movements.
 - Rise slowly from chairs and steady yourself until you feel okay.
 - In the morning, first sit up on the side of the bed. When you feel okay, stand slowly while you hold onto something until you know that your balance is fine.
- If you need to stand in one place for a long time, move your legs often. Tighten and relax the muscles in your legs while you are standing.
- **Do not** drive or use heavy machinery if you feel dizzy.
- Avoid bending down if you feel dizzy. Place items in your home so that they are easy for you to reach without leaning over.

Lifestyle

- **Do not** use any products that contain nicotine or tobacco, such as cigarettes and e-cigarettes. If you need help quitting, ask your health care provider.
- Try to reduce your stress level by using methods such as yoga or meditation. Talk with your health care provider if you need help to manage your stress.

General instructions

- Watch your dizziness for any changes.
- Take over-the-counter and prescription medicines only as told by your health care provider. Talk with your health care provider if you think that your dizziness is caused by a medicine that you are taking.
- Tell a friend or a family member that you are feeling dizzy. If he or she notices any changes in your

behavior, have this person call your health care provider.

- Keep all follow-up visits as told by your health care provider. This is important.

CONTACT A HEALTH CARE PROVIDER IF:

- Your dizziness does not go away.
- Your dizziness or light-headedness gets worse.
- You feel nauseous.
- You have reduced hearing.
- You have new symptoms.
- You are unsteady on your feet or you feel like the room is spinning.

GET HELP RIGHT AWAY IF:

- You vomit or have diarrhea and are unable to eat or drink anything.
- You have problems talking, walking, swallowing, or using your arms, hands, or legs.
- You feel generally weak.
- You are not thinking clearly or you have trouble forming sentences. It may take a friend or family member to notice this.
- You have chest pain, abdominal pain, shortness of breath, or sweating.
- Your vision changes.
- You have any bleeding.
- You have a severe headache.
- You have neck pain or a stiff neck.
- You have a fever.

These symptoms may represent a serious problem that is an emergency. Do not wait to see if the symptoms will go away. Get medical help right away. Call your local emergency services (911 in the U.S.). Do not drive yourself to the hospital.

SUMMARY

- Dizziness is a feeling of unsteadiness or light-headedness. This condition can be caused by a number of things, including medicines, dehydration, or illness.
- Anyone can become dizzy, but dizziness is more common in older adults.
- Drink enough fluid to keep your urine clear or pale yellow. **Do not** drink alcohol.
- Avoid making quick movements if you feel dizzy. Monitor your dizziness for any changes.

Document Released: 13/06/2002 Document Revised: 20/01/2018 Document Reviewed: 20/01/2018
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PATIENT'S NAME (Last, First Middle Name)

ADMISSION DATE/TIME

VILLARUEL, Richsel Salazar

Jun-10-2024 07:20 PM

PIN	BIRTHDATE	AGE/GENDER	ROOM/BED	VISIT NUMBER
1604050152	Oct-03-1986	37Y/F	GC-ED-RHWAY-BHW04	1001393550

ED DIAGNOSIS:

ED Diagnosis:

Vertigo (R42): Status: Active

LAB RESULTS:

General Hematology:

10-Jun-2024 20:38, Complete Blood Count

- Hemoglobin: 14.1, [11.6 - 15.5 g/dl]
- Hematocrit: 41.9, [36.0 - 47.0 %]
- Red Blood Cell Count: 4.79, [4.20 - 5.40 mil/mm3]
- White Blood Cell Count: 7660, [4,800 - 10,800 mm3]
- Platelet Count: 328000, [150,000 - 400,000 /mm3]

General Chemistry:

- Differential Count :: -
- Neutrophil(s) :: 61, [40 - 74 %]
- Lymphocyte(s) :: 32, [19 - 48 %]
- Eosinophil(s) :: 1, [0 - 7 %]
- Monocyte(s) :: 5, [3 - 9 %]
- Basophil(s) :: 1, [0 - 2 %]
- MCV :: 88, [82 - 98 fL]
- MCH :: 29, [28 - 33 pg]
- MCHC :: 34, [33 - 38 %]
- RDW :: 12, [11 - 14 %]

10-Jun-2024 20:58, Sodium and Potassium

- Sodium Level: 140.7, [136.0 - 145.0 mEq/L]
- Potassium Level: ↓ 3.4, [3.5 - 5.1 mEq/L]

DISPOSITION:

- Disposition discharged
- Condition on Disposition stable

HOME/NEW MEDICATIONS:

* No Current Medications as of 10-Jun-2024 20:06 documented in Structured Notes

Discharge Confirmation Sheet

DISCHARGE CONFIRMATION SHEET

This report has been electronically validated. No signature is required.

PRINTED BY: Garcia, Gaudencio Abel Diaz (MD)

PRINT DATE/TIME: Jun-10-2024 09:27 PM

Page: 1 of 3



PATIENT'S NAME (Last, First Middle Name)

ADMISSION DATE/TIME

VILLARUEL, Richsel Salazar

Jun-10-2024 07:20 PM

PIN

BIRTHDATE

AGE/GENDER

ROOM/BED

VISIT NUMBER

1604050152

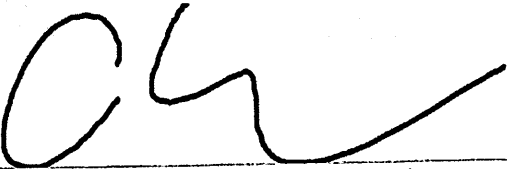
Oct-03-1986

37Y/F

GC-ED-RHWAY-BHW04

1001393550

This is to confirm that I have explained the conditions stated in this form to the patient/patient's relative/patient's legal representative to best of my knowledge and have made them understand such conditions.

	10-Jun-2024	21:25
Physician's Signature Over Printed Name	Date	Time
Clinical Pharmacist's / ECS Nurse Signature	Date	Time

I have received and understood the instructions given to me.

Patient's Signature Over Printed Name	Date	Time
Patient's Representative Signature Over Printed Name	Date	Time

Instructions, Return to Work, Fax Follow-up:

Discharge Instructions:

- Discharge Activity
 - Diet
 - Additional Discharge Instructions
- Advised 1-2 days rest
as advised
To follow up with MD of choice

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Page: 2 of 3



PATIENT'S NAME (Last, First Middle Name)

ADMISSION DATE/TIME

VILLARUEL, Richsel Salazar

Jun-10-2024 07:20 PM

PIN	BIRTHDATE	AGE/GENDER	ROOM/BED	VISIT NUMBER
1604050152	Oct-03-1986	37Y/F	GC-ED-RHWAY-BHW04	1001393550

Electronic Signatures:

Garcia, Gaudencio Abel Diaz (MD) (Signed 10-Jun-2024 21:26)

Authored: Emergency Diagnosis, Procedures, Disposition, Consent, Chart Review, Instructions, Return to Work, Fax Follow-up

Last Updated: 10-Jun-2024 21:26 by Garcia, Gaudencio Abel Diaz (MD)

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