

Mediclinic Al Ain Hospital Doctor's Prescription



Patient Name: KHALED HAMAD ALI MOHAMMED URN: Order Date/Time: 1819973 Sep 23 2024 19:06:47 **ALDHAHERI** DOB: Jan 6 2023 [20 Months] DAMAN THIQA - AUH **Episode Number:** Payor: OP0023651451 Gender: Male Plan: DAMAN THIQA - NW UAE PVT -Weight: AUH Nationality: Emirati Card No: 22185191 Height: National ID: 784-2023-9779727-9 BSA: Card Explry: 01/05/2025 Contact No.: 0502529323 Co-Payment: Doctor: Mohamad Hosam Shayeb (License: GD42818) Contact Email: noemail@mediclinic.ae PAEDIATRIC CLINIC DR HALIM **Doctor Department:** OPC1 **Patient Location:** PAEDIATRIC CLINIC DR HALIM VAT: OPC1 Allergies: No known allergies Diagnosis: Primary: J21.9 - Acute bronchiolitis, unspecified Secondary: J30.9 - Allergic rhinitis, unspecified, J45.20 - Mild intermittent asthma, uncomplicated Frequency Duration **Qty Ordered Order Notes Body Site** Generic Strength Form **Pack Size** Dose Route Repeats

ambroxol HCl 15 mg/5 mL syrup Bottle (100 ml) 3 ml oral Every 12 Hour For 5 Day (s) 1 Bottle (100 ml) MUCUM

Dr. Mohamad Hosam Shayeb

Physician Signature:

Pharmacists Signature:

Patient Signature:

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