

**VIBRANT**  
**MULTI SPECIALITY HOSPITAL**  
 "The Skill to Heal - The Spirit to Care."

**OPD ASSESSMENT FORM**

Patient Name: Digital Date & Time: 20/12/2021  
Patel

UHID: 13375

Age / Sex: 62 yrs F

Chief Complaints with duration	<u>fever</u> <u>once a day since</u>						
	Pain Score	None(0) <input type="checkbox"/>	Mild (1-3) <input type="checkbox"/>	Moderate (4-6) <input type="checkbox"/>	Severe (7-10) <input type="checkbox"/>		
	Increasing Factor:						
	Decreasing Factor:						
Character:							

**Current Medication Taken at Home**

**VITALS**

Height(cm)	Weight (kgs)	Temp (°f)	Pulse/Min	BP mmHg	Spo2%	RR
		<u>101</u>	<u>118pm</u>	<u>124/80</u>	<u>981</u>	

Gen.Exam	Pallor	Icterus	Pedal edema	Cyanosis	Clubbing	Lymph adenopathy	Flatfoot	Peripheral pulsation

**Local Examination**

**SYSTEMIC EXAMINATION**

Resp System

CVS

P/A

CNS

ENT

SKIN

OTHER



Patient Name :	Bijal Patel			UHID :	13381																																																																																								
Provisional Diagnosis	Acute problem :		ACS	Chronic problem :																																																																																									
Plan of Care	dys congestive			DM																																																																																									
Investigations Advised																																																																																													
Result Investigations																																																																																													
Instructions Given																																																																																													
Type of Diet Advised	Antidiabetic diet-																																																																																												
<table border="1"> <thead> <tr> <th>Rx</th> <th>Sr. No.</th> <th>Drug Name &amp; Dose</th> <th>(M)</th> <th>(A)</th> <th>(E)</th> <th>NO. OF DAYS</th> <th>INSTRUCTIONS</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>Tab ECGEN (25)</td> <td>0</td> <td>1</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>2</td> <td>Tab TONACT (10)</td> <td>0</td> <td>0</td> <td>1</td> <td></td> <td>Bedtime</td> </tr> <tr> <td>3</td> <td>3</td> <td>Tab AUREYL (2)</td> <td>2</td> <td>2</td> <td>2</td> <td></td> <td>30 min before meal</td> </tr> <tr> <td>4</td> <td>4</td> <td>VOCALIBASE (0.3)</td> <td>1</td> <td>1</td> <td>1</td> <td></td> <td>just before meal</td> </tr> <tr> <td>5</td> <td>5</td> <td>GIBTULLO (25)</td> <td>0</td> <td>1</td> <td>0</td> <td></td> <td>after lunch</td> </tr> <tr> <td>6</td> <td>6</td> <td>VILDARTAGUE (5V)</td> <td>0</td> <td>1</td> <td>1</td> <td></td> <td>30 min before meals.</td> </tr> <tr> <td>7</td> <td>7</td> <td>VERIN 16</td> <td>1</td> <td>1</td> <td>1</td> <td></td> <td></td> </tr> <tr> <td>8</td> <td>8</td> <td>Pantop (40)</td> <td>1</td> <td>0</td> <td>1</td> <td></td> <td></td> </tr> <tr> <td>9</td> <td>9</td> <td>INOLVIT -</td> <td>0</td> <td>1</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X(30)</td> <td></td> </tr> </tbody> </table>						Rx	Sr. No.	Drug Name & Dose	(M)	(A)	(E)	NO. OF DAYS	INSTRUCTIONS	1	1	Tab ECGEN (25)	0	1	0			2	2	Tab TONACT (10)	0	0	1		Bedtime	3	3	Tab AUREYL (2)	2	2	2		30 min before meal	4	4	VOCALIBASE (0.3)	1	1	1		just before meal	5	5	GIBTULLO (25)	0	1	0		after lunch	6	6	VILDARTAGUE (5V)	0	1	1		30 min before meals.	7	7	VERIN 16	1	1	1			8	8	Pantop (40)	1	0	1			9	9	INOLVIT -	0	1	0									X(30)	
Rx	Sr. No.	Drug Name & Dose	(M)	(A)	(E)	NO. OF DAYS	INSTRUCTIONS																																																																																						
1	1	Tab ECGEN (25)	0	1	0																																																																																								
2	2	Tab TONACT (10)	0	0	1		Bedtime																																																																																						
3	3	Tab AUREYL (2)	2	2	2		30 min before meal																																																																																						
4	4	VOCALIBASE (0.3)	1	1	1		just before meal																																																																																						
5	5	GIBTULLO (25)	0	1	0		after lunch																																																																																						
6	6	VILDARTAGUE (5V)	0	1	1		30 min before meals.																																																																																						
7	7	VERIN 16	1	1	1																																																																																								
8	8	Pantop (40)	1	0	1																																																																																								
9	9	INOLVIT -	0	1	0																																																																																								
						X(30)																																																																																							

30 day

Next follow-up after :

Name of Clinician : Dr Pragya Patel

Signature : Patel