

visit visa



First marriage for both

File No.: 038764

Nationality: SUD

GYNAECOLOGICAL SHEET

DR. LEILA HAMID MEDICAL CENTE

File No: 038764

NAME: ZAINAB HUMD HAMID AWAD

ID NO: VISIT VISA

MOB: 33128915

SEX: FEMALE

ADDRESS : ALMOORA



Age: 28 yrs

Marital Status: 10 yrs

band's Name: Adam Hamid omer

Mobile Phone:

Residence Phone:

SYMPTOMS:

4yo B⁻ Micturition & Balakacho
& dysuria & want to conceive. Not
in same place

Medical History:

P.H. 4s

F.H. 1

MENSTRUAL HISTORY:

Menarche: 13yo

Menstrual Habits: Regular Monthly for 5-6 days

Menstrual Symptoms: Normal

Parity: P 1

Abortion 0

Ectopic

LCB 7yo

L.N.M.P 25-4-24

Menopause:

♀

♂ 1

EXAMINATION

General Examination: Ht. 165 cm

Wt. 58.75 Kg BMI

Kg/m² Bp 120 mm Hg 80

Chest, C.V.S. Looks well

Abdomen: NAD

Breasts: Not examined

PELVIC EXAMINATION:

Speculum Exam.

Bimanual Exam.

Rectal Exam.

Investigation Requested:

Diagnosis: Uterus

want to conceive
& UTI

Plan of Management:

Next Appointment: 10 days

Siemens
Clinitek Status®

DR. LEILA HAMID
MEDICAL CENTER

Patient Name:

ZAINEB

Patient ID:

Z

Multistix® 10 SG

Test date 04-30-2024

Time 12:49PM

Operator D

Test number 2038

Color Yellow

Clarity
Clear

GLU Negative
BIL Negative

DR. LEILA H. MEDICAL CENTER W.L.L.

Tel. 44817651/ 44817652 - Fax: 44812796

Al Salam Street - North Muaitheer

Villa No.: 80 & 82



مركز د. ليلي حامد الطبي ذ.م.م.

تليفون: ٤٤٨١٧٦٥١ / ٤٤٨١٧٦٥٢ - فاكس: ٤٤٨١٢٧٩٦

شارع السلام - معيذر الشمالي

فيلا رقم: ٨٠ و ٨٢

وصفة طبية Prescription

No

30 APR 2024

Date: التاريخ:

Patient's name: Zainab Humd اسم المريض:

File No.: 038764 رقم الملف:

Age: 28yrs العمر: ٢٨

Rx

- Cranbionics - cap +x2 x 20/108

- Cefexime cap 400mg
1x1 x 6d

Doctor's signature:

Email: dr.leilamedcenter@gmail.com

Mobile: 55868523