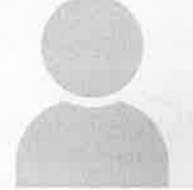


Student Health Report

Patient: ADAM YAIL GHOUINI
Qatari ID: 32001200278
DOB/AGE/Sex: 08/07/2020 3 years Male
HC Number: HC08655906
FIN: 0153156909;
Admitting: 0153161079;
Attending: Dr.Essam Hassan Qabeel -PHC70325 -General
Admit: n/a
Disch: n/a
Location: PharmNet:Clinical Pharmacist1 TEST ; Physician
Laboratory



Paste Patient Photo



Pediatric Ambulatory Care Intake

Document Type: Pediatric Ambulatory Care Intake
Service Date/Time: 09/10/2023 08:56
Result Status: Auth (Verified)
Perform Information: Osama Mahmoud Ibrahim AL-Redwan -PHC53353 -Nurse
(09/10/2023 08:56)
Sign Information: Osama Mahmoud Ibrahim AL-Redwan -PHC53353 -Nurse
(09/10/2023 08:56)

Pediatric Ambulatory Care Intake Entered On: 09/10/2023 09:02 AST

Performed On: 09/10/2023 08:56 AST by Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse

Intake

Chief Complaint : for school admission health check up .
Menstrual Status : N/A
Visit Type General Info Peds : Outpatient Visit
PHCC Reason for Visit_Peds : Consultation
Device Associated Vital Signs : No qualifying data available.
Temperature Oral : 36.6 DegC
Peripheral Pulse Rate : 109 bpm
SpO2 : 100 %
Weight Dosing : 15 kg(Converted to: 33 lb 1 oz, 33.069 lb, 529.109 oz)
Weight Measured : 15 kg(Converted to: 33 lb 1 oz, 33.069 lb, 529.109 oz)
Height/Length Measured : 103 cm(Converted to: 3 ft 5 in, 3.38 ft, 40.55 in)
BSA Measured : 0.66 m2
BMI Measured : 14.14 kg/m2

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 08:56 AST

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

Department of Laboratory Medicine & Pathology
P.O Box 3050 Doha, Qatar
Administrative Enquires +974 4026 4011
Email: Pathlabmed@hamad.qa
24/7 DLMP Pandemic Hotline; +974 5573 9846/4025 8225
Email: DLMPPandemicHotline@hamad.qa
HGH Lab Anatomical Pathology; +974 44392046/7
HGH Lab Microbiology; +974 4439 4975/2038

HGH Lab Rapid Response; +974 4025 7359
Al Wakra hospital Lab; +974 4011 4201
Al Khor Hospital Lab; +974 4474 5181/2
NCCCR hospital Lab; +974 4439 7755/6
The Cuban Hospital Lab; +974 4015 7790
HBKMC Lab; +974 4026 4077/8
PEC Al Saad Lab; +974 4439 6014
HMGH Lab; +974 4024 0275

n/a

Patient: ADAM YAIL GHOUINI
 Qatari ID: 32001200278 HC Number: HC08655906
 DOB/AGE/Sex: 08/07/2020 3 years Male FIN: 0153156909;
 0153161079;
 0153170177;
 0153160436

Pediatric Ambulatory Care Intake

General Info - Peds

Information Given By : Self, Father
 Preferred Communication Mode : Verbal
 Languages : Arabic

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 08:56 AST

Allergy

(As Of: 09/10/2023 09:02:13 AST)

Allergies (Active)

No Known Allergies
 Estimated Onset Date: Unspecified ; Created By: Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse; Reaction Status: Active ; Category: Drug ; Substance: No Known Allergies ; Type: Allergy ; Updated By: Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse; Reviewed Date: 09/10/2023 09:01 AST

CDC-ID Risk Screening

Fever 37.8°c and above : No
 Respiratory symptoms (e.g. cough, breathing difficulty/shortness of breath, runny nose, sore throat) : No
 Rash or unusual skin lesions : No
 Headache and myalgia : No
 Profuse diarrhea / Abdominal cramps : No
 Nausea / Vomiting : No
 Altered sensorium/consciousness : No
 Loss of taste/smell : No
 Lymphadenopathy (swollen lymph nodes) : No
 Genital Skin Lesions and or rectal/anal pain : No
 Unexplained bleeding or bruising : No
 Had close contact with a person who arrived from abroad or been sick within the last 21 days : No
 Residing or working in an area with high risk of transmission of pathogenic organism : No
 Working on animal farm, contact with live or dead animals (such as camels), or consuming : No
 consum food par, spec occasns, receptn than 7 : No
 Infectious disease risk screening : Negative

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 08:56 AST

Image 1 - Images currently included in the form version of this document have not been included in the text rendition version of the form.

Fall Risk Screening

3 Years - 5 Years : Yes

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 08:56 AST

FRA - Initial assessment

Unsteady gait : No
 Use of an assistive device : No
 Visual/Auditory deficits : No
 Balance disturbances : No

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 08:56 AST

FRA Education provided

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

n/a

Patient: ADAM YAIL GHOUINI
Qatari ID: 32001200278
DOB/AGE/Sex: 08/07/2020 3 years Male
HC Number: HC08655906
FIN: 0153156909;
0153161079;
0153170177;
0153160436

Pediatric Ambulatory Care Intake

Provided physically safe environment : Yes
Eliminated spills : Yes
Non Slippery floors : Yes
Pathway with no clutters : Yes
Pathway with no electric cords : Yes
Pathway with no unnecessary equipment's : Yes
Orient patient/family to environment & safety in environment : Yes
Provide walking/assistive aids such as wheel chair : No
Lock all movable equipment before transferring patients : No
Assist in patient transfer and ambulation : No
Assistance for patients with auditory & Visual impairment : No
Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 08:56 AST

FRA further assessment

Diagnosis of Parkinson's Disease : No
Diagnosis of Stroke. : No
Poor Vision : No
On 1 or more medications from Potential Fall Risk Medication List : No
Unstable Gait or Limb weakness. : No
Bowel or Bladder incontinence. : No
Environmental Safety risks. : No
Hypoglycemia/Unawareness Hypoglycemia : No
Post Fall : No
Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 08:56 AST

PHCC Nursing Triage

Triage Patient : No
Mode of Arrival : Ambulatory
Level of Consciousness : Alert
Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 08:56 AST

Medication List

Medication List
(As Of: 09/10/2023 09:02:13 AST)

Electronically Signed on 09/10/2023 08:56 AST

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

n/a

Patient: ADAM YAIL GHOUINI
Qatari ID: 32001200278
DOB/AGE/Sex: 08/07/2020 3 years Male
HC Number: HC08655906
FIN: 0153156909;
0153161079;
0153170177;
0153160436

Vision Testing

Document Type: Vision Testing
Service Date/Time: 09/10/2023 10:10
Result Status: Auth (Verified)
Perform Information: Osama Mahmoud Ibrahim AL-Redwan -PHC53353 -Nurse
(09/10/2023 10:10)
Sign Information: Osama Mahmoud Ibrahim AL-Redwan -PHC53353 -Nurse
(09/10/2023 10:10)

Vision Testing Entered On: 09/10/2023 10:11 AST
Performed On: 09/10/2023 10:10 AST by Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse

Vision Testing

Left Eye Corrective Lenses : None
Right Eye Corrective Lenses : None
Eye, Left Visual Acuity : 6/6
Eye, Right Visual Acuity : 6/6

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 10:10 AST

Electronically Signed on 09/10/2023 10:10 AST

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse

Immunization Report

Vaccine:	Date Given:	Age:
BCG	17/01/2021	6 months

Vaccine:	Date Given:	Age:
DTP(acell)&HIB&Polio vaccine ⁰¹	09/10/2023	3 years

Facility:
RUW Al Ruwais

Order Comments

O1: DTP (acell.)/HIB/Polio (DTap (acell.)/HIB/polio vaccine (Pentaxim))
in the middle 1/3 of the thigh

Vaccine:	Date Given:	Age:
DTP(whole cell)&HIB&Hep B vaccine(PENTA)	15/07/2022	2 years

Vaccine:	Date Given:	Age:
hepatitis B pediatric vaccine	17/01/2021	6 months

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

n/a

Patient: ADAM YAIL GHOUINI
Qatari ID: 32001200278 HC Number: HC08655906
DOB/AGE/Sex: 08/07/2020 3 years Male FIN: 0153156909;
0153161079;

Immunization Report

Vaccine:	Date Given:	Age:
measles/mumps/rubella virus vaccine(MMR) Facility: RUW Al Ruwais	09/10/2023	3 years
measles/mumps/rubella virus vaccine(MMR)	30/06/2022	23 months
pneumococcal 13-valent conjugate vaccine	15/07/2022	2 years
pneumococcal 13-valent conjugate vaccine	30/06/2022	23 months
polio vaccine (OPV) Facility: RUW Al Ruwais	09/10/2023	3 years
polio vaccine (OPV)	15/07/2022	2 years
polio vaccine (OPV)	17/01/2021	6 months
varicella virus vaccine Facility: RUW Al Ruwais	09/10/2023	3 years

PED Behavioral & Social Skills Note

DOCUMENT NAME: SEHA Ped Behavioral & Social Skills -Txt
SERVICE DATE/TIME: 09/10/2023 09:08
RESULT STATUS: Auth (Verified)
PERFORM INFORMATION: Osama Mahmoud Ibrahim AL-Redwan -PHC53353 -Nurse
(09/10/2023 09:08)
SIGN INFORMATION: Osama Mahmoud Ibrahim AL-Redwan -PHC53353 -Nurse
(09/10/2023 09:08)

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

n/a

Patient: ADAM YAIL GHOUINI
Qatari ID: 32001200278
DOB/AGE/Sex: 08/07/2020 3 years Male
HC Number: HC08655906
FIN: 0153156909;
0153161079;
0153170177;
0153160436

PED Behavioral & Social Skills Note

**Pediatric Behavioral and Social Skills Assessment Entered On: 09/10/2023 09:09 AST
Performed On: 09/10/2023 09:08 AST by Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse**

SEHA Behavioral and Social Skills

Number of Siblings : 0
Can Dress Him/Herself completely? : Yes
Separate from mother at interview? : Yes
Answers questions? : Yes
Toilet Trained at Day and Night? : Yes
Can eat alone? : Yes
Recognize names? : Yes

Osama Mahmoud Ibrahim AL-Redwan - PHC53353 - Nurse - 09/10/2023 09:08 AST

Hematology

General Hematology

Test	Collected Date Collected Time	09/10/2023 09:28	Units	Reference Range
WBC		8.6 ^{**}	x10 ³ /uL	[5.0-15.0]
RBC		4.4 ^{**}	x10 ⁶ /uL	[3.9-5.1]
Hgb		12.1 ^{**}	gm/dL	[11.0-14.0]
Hct		36.4 ^{**}	%	[34.0-40.0]
MCV		82.9 ^{**}	fL	[75.0-87.0]
MCH		27.6 ^{**}	pg	[24.0-30.0]
MCHC		33.2 ^{**}	gm/dL	[31.0-37.0]
RDW-CV		11.4 ^{L**}	%	[11.6-14.5]
Platelet		223 ^{**}	x10 ³ /uL	[200-490]
MPV		6.1 ^{L**}	fL	[7.4-10.4]
Absolute Neutrophil count Auto# (ANC)		1.74 ^{**}	x10 ³ /uL	[1.50-8.00]
Lymphocyte Auto #		5.24 ^{L**}	x10 ³ /uL	[6.00-9.00]
Monocyte Auto #		.75 ^{**}	x10 ³ /uL	[0.20-1.00]
Eosinophil Auto #		.71 ^{**}	x10 ³ /uL	[0.10-1.00]
Basophil Auto #		.15 ^{H**}	x10 ³ /uL	[0.02-0.10]
Neutrophil Auto %		20.3 ^{**}	%	
Lymphocyte Auto %		60.9 ^{**}	%	
Monocyte Auto %		8.8 ^{**}	%	
Eosinophil Auto %		8.3 ^{**}	%	

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

n/a

Patient: ADAM YAIL GHOUINI

Qatari ID: 32001200278

DOB/AGE/Sex: 08/07/2020 3 years Male

HC Number: HC08655906

FIN: 0153156909;
0153161079;

0153170177;
0153160436

Hematology

General Hematology

Collected Date 09/10/2023

Collected Time 09:28

Test	Units	Reference Range
Basophil Auto %	1.8** %	

School Health Report - Dental Note

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

* Auth (Verified) *

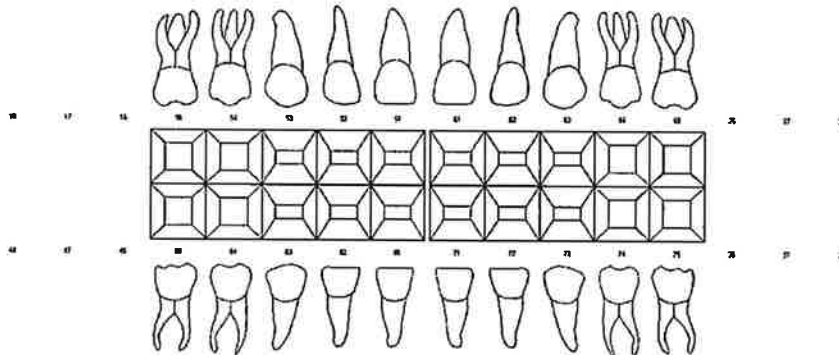


Date : 09 October 2023

PHCC School Entry Dental Assessment Report

Name ADAM YAIL GHOUINI
Patient HC Number HC08655906
Gender Male
Age 3 Years3 Months
Patient Qatari ID Number 32001200278
Nationality Algerian
Provider Name Mohammad Alshwatereeh

Dental Assessment



Date	For	By	Description	Tooth	Cost (£)	Scheme
------	-----	----	-------------	-------	----------	--------

Dental Notes

Allergies- ALLERGIES: No Known Allergies (Active)

Notes - 09/10/2023 - [55786]

PHCC Dental School Health Assessment Form
 GradeKindergarten
 Does the student have parent consent?Yes
 Does the student have any oral pain?No
 Duration of pain-

Primary Healthcare Corporation, Doha, Qatar

* Auth (Verified) *



Date : 09 October 2023

Does the student have bad breath?No
Does the student have bleeding gums?No
If yes, please specify-
Does the student have stains/ discoloration on teeth?No
Does the student have calculus?No
Does the student have any malocclusion?/NO
If yes, please specify-
Does the student have any fractured teeth?No
If yes, please specify which teeth []
Extent of tooth fracture-

Questions for Primary School Students only:

Oral Hygiene aids used-
Manual toothbrushYes
Powered toothbrushNo
Tooth pasteYes
If yes, does the toothpaste contain fluorideYes
SewakNo
ToothpickNo
Other, please specify []

Frequency of oral hygiene1
Frequency of consumption of cariogenic food and drinks-
Timing of consumption of cariogenic food and drinksafter meals
Self-assessed oral health statusgood

n/a

Patient: ADAM YAIL GHOUINI
Qatari ID: 32001200278
DOB/AGE/Sex: 08/07/2020 3 years Male
HC Number: HC08655906
FIN: 0153156909;
0153161079;
0153170177;
0153160436

Orders

Laboratory

Order: **Complete Blood Count PHCC (CBC PHCC)**

Order Date/Time: 09/10/2023 09:23

Order Status: Completed Department Status: Completed Activity Type: General Lab

End-state Date/Time: 09/10/2023 09:45 End-state Reason:

Ordering Physician: Dr.Essam Hassan Qabeel -PHC70325 - Consulting Physician:
General Practitioner

"Entered and Electronically Signed By:" Dr.Essam Hassan Qabeel -PHC70325 -General Practitioner on 09/10/2023 09:23

Order Details: Blood, Routine collect, school health, 40273065, 10/9/23 9:28:00 AM AST, Once, Stop date 10/9/23 9:45:56 AM AST, ORD_SET_REQ_DT_RANGE, 0

Action Type: Complete Action Date/Time: 09/10/2023 09:45

Communication Type:

Action Type: Status Change Action Date/Time: 09/10/2023 09:29

Communication Type:

Action Type: Status Change Action Date/Time: 09/10/2023 09:29

Communication Type:

Action Type: Activate Action Date/Time: 09/10/2023 09:28

Communication Type: Written

Action Type: Order Action Date/Time: 09/10/2023 09:23

Communication Type: Written

Action Type: Order Action Date/Time: 09/10/2023 09:07

Communication Type: Cosign Required

Patient Care

Order: **SEHA Certificate**

Related Diagnosis: School admission medical examination; Code: 265572013

Order Date/Time: 09/10/2023 10:53

Order Status: Ordered Department Status: Ordered Activity Type: Patient Care

End-state Date/Time: 09/10/2023 10:53 End-state Reason:

Ordering Physician: Dr.Essam Hassan Qabeel -PHC70325 - Consulting Physician:
General Practitioner

"Entered and Electronically Signed By:" Dr.Essam Hassan Qabeel -PHC70325 -General Practitioner on 09/10/2023 10:53

Order Details: 10/9/23 10:53:00 AM AST, Fit & Need Completion of Immunization, 10/9/23 10:53:00 AM AST

Action Type: Order Action Date/Time: 09/10/2023 10:53

Communication Type: Written

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

n/a

Patient: ADAM YAIL GHOUINI
Qatari ID: 32001200278
DOB/AGE/Sex: 08/07/2020 3 years Male
HC Number: HC08655906
FIN: 0153156909;
0153161079;
0153170177;
0153160436

<i>Orders</i>
<i>Pharmacy</i>

Order: DTP (acell.)/HIB/Polio (DTap (acell.)/HIB/polio vaccine (Pentaxim))
Related Diagnosis: Requires vaccination; Code: 3425287013
Order Date/Time: 09/10/2023 10:14
Order Status: Completed Department Status: Completed Activity Type: Pharmacy
End-state Date/Time: 09/10/2023 10:53 End-state Reason:
Ordering Physician: Dr.Essam Hassan Qabeel -PHC70325 - Consulting Physician:
General Practitioner
"Entered and Electronically Signed By:" Dr.Essam Hassan Qabeel -PHC70325 -General Practitioner on 09/10/2023 10:14
Order Details: = 0.5 mL, IM, Inj, Once, Start: 10/9/23 11:00:00 AM AST, Stop: 10/9/23 10:53:12 AM AST, 09/10/2023 10:14:00 AST
Action Type: Complete Action Date/Time: 09/10/2023 10:53
Communication Type:
Action Type: Order Action Date/Time: 09/10/2023 10:14
Communication Type: Written

Order: measles/mumps/rubella (measles/mumps/rubella vaccine (live) INJ)
Related Diagnosis: Requires vaccination; Code: 3425287013
Order Date/Time: 09/10/2023 10:13
Order Status: Completed Department Status: Completed Activity Type: Pharmacy
End-state Date/Time: 09/10/2023 10:54 End-state Reason:
Ordering Physician: Dr.Essam Hassan Qabeel -PHC70325 - Consulting Physician:
General Practitioner
"Entered and Electronically Signed By:" Dr.Essam Hassan Qabeel -PHC70325 -General Practitioner on 09/10/2023 10:13
Order Details: 0.5 mL, Subcutaneous, Inj, Once, Start: 10/9/23 11:00:00 AM AST, Stop: 10/9/23 10:54:16 AM AST, 09/10/2023 10:13:00 AST
Action Type: Complete Action Date/Time: 09/10/2023 10:54
Communication Type:
Action Type: Order Action Date/Time: 09/10/2023 10:14
Communication Type: Written

LEGEND: *=Corrected, @=Abnormal, C=Critical, L=Low, H=High, f=Footnote, #=Interpretive Data, R=Ref lab

n/a

Patient: ADAM YAIL GHOUINI
Qatari ID: 32001200278 HC Number: HC08655906
DOB/AGE/Sex: 08/07/2020 3 years Male FIN: 0153156909;
0153161079;
0153170177;
0153160436

Orders

Pharmacy

Order: **varicella virus vaccine (varicella Live vaccine (0.5 mL))**
Related Diagnosis: Requires vaccination; Code: 3425287013
Order Date/Time: 09/10/2023 10:13
Order Status: Completed Department Status: Completed Activity Type: Pharmacy
End-state Date/Time: 09/10/2023 10:55 End-state Reason:
Ordering Physician: Dr.Essam Hassan Qabeel -PHC70325 - Consulting Physician:
General Practitioner
"Entered and Electronically Signed By:" Dr.Essam Hassan Qabeel -PHC70325 -General Practitioner on 09/10/2023 10:13
Order Details: 0.5 mL, Subcutaneous, Inj, Once, Start: 10/9/23 11:00:00 AM AST, Stop: 10/9/23 10:55:44 AM AST,
09/10/2023 10:13:00 AST
Action Type: Complete Action Date/Time: 09/10/2023 10:55
Communication Type:
Action Type: Order Action Date/Time: 09/10/2023 10:14
Communication Type: Written

Order: **polio vaccine Oral (polio live vaccine (OPV))**
Related Diagnosis: Requires vaccination; Code: 3425287013
Order Date/Time: 09/10/2023 10:13
Order Status: Completed Department Status: Completed Activity Type: Pharmacy
End-state Date/Time: 09/10/2023 10:51 End-state Reason:
Ordering Physician: Dr.Essam Hassan Qabeel -PHC70325 - Consulting Physician:
General Practitioner
"Entered and Electronically Signed By:" Dr.Essam Hassan Qabeel -PHC70325 -General Practitioner on 09/10/2023 10:13
Order Details: 2 drop(s), Oral, Drops-Oral, Once, Start: 10/9/23 11:00:00 AM AST, Stop: 10/9/23 10:51:24 AM AST,
09/10/2023 10:13:00 AST
Action Type: Complete Action Date/Time: 09/10/2023 10:51
Communication Type:
Action Type: Order Action Date/Time: 09/10/2023 10:14
Communication Type: Written

Performing Locations
*1: This test was performed at:
RUW Laboratory



School Entry Final Health
Assessment Certificate

Patient Visit Data			
Name :	ADAM YAIL GHOUNI	Date of Birth :	08/07/2020
HC Number :	HC08655906	Gender :	Male
Encounter Number :	153156909	Nationality :	Algerian
QID :	32001200278	Contact Phone Number:	70580913

Family Physician Decision
Fit & Need Completion of Immunization

Physician Notes
Transferred to :

Care Provider/Facility Details	
Health Center :	Al Ruwais Health Center
Examination Date :	09/10/2023 10:53:00 AST
Examined by Family Physician :	Dr. Essam Hassan Qabeel – PHC70325 – General Practitioner
Age at Examination :	3 Years

Signature :
Electronically Signed on 09/10/2023 10:53:00 AST
Dr. Essam Hassan Qabeel – PHC70325 – General
Practitioner



Notes:

This is electronically signed certificate and does not require PHYSICIAN Signature and FACILITY Stamp.
Certificate is invalid if any corrections are made.
Certificate is issued at applicant's request.
Certificate must be submitted to school/ organization for the purpose of school admission.
Document QID number should corresponded to applicant QID.

