

Medical Justification Letter

To Whom It May Concern,

This is to certify that **Ms. Maryam Pirasteh** has been under my dental care following recent dental treatment. The prescribed medications, as listed in the attached prescription, are necessary to manage pain, inflammation, allergic reactions, stress-related symptoms, and potential gastrointestinal side effects associated with the use of antibiotics and NSAID therapy.

These medications are prescribed for the patient's personal dental care and are not intended for resale or distribution.

Sincerely,

Dr. Mohammad Matin Jalali, DDS

License No: 222175

For dental infection & pain control:

1. Amoxicillin 500 mg – 8 strips – 1 cap every 8 hours for 5 days
2. Ibuprofen 400 mg – 10 strips – 1 tab every 8 hours as needed for pain
3. Paracetamol (Acetaminophen) 500 mg – 4 strips – 1 tab every 6 hours as needed for pain/fever
4. Pantoprazole 40 mg – 1 box – 1 tab once daily before breakfast (*for gastric protection during NSAID use*)

For allergy management:

5. Neotadine (Desloratadine) 5 mg – 7 strips – 1 tab once daily

For gastrointestinal discomfort:

6. Loperamide 2 mg – 3 strips – 1 cap after loose stool, max 8/day
7. Diphenoxylate/Atropine – 3 strips – 1 tab after loose stool, max 8/day
8. Dimethicone 80 mg – 2 strips – 1 tab after meals

For stress-related symptoms:

9. Propranolol 10 mg – 2 strips – 1 tab twice daily