Administrative MEDICAL CLAIM FORM Claim Ref:

Patient Name	: **RABIN KADEL THANNA BAHADUR KADEL**	**Service Date**	**:14-May-2024**	**Network**	: Green
Card No	: **I017-029-117588521-02**	**Health Provider**	**:Irham Medical Center Arjan**		**Direct Access SP - YES**
Policy Holder	: **RABIN KADEL THANNA BAHADUR KADEL**	**Doctor's Name**	**:SANDIA**		
Payer Name	: **ABU DHABI NATIONAL INSURANCE COMPANY-ADNIC**	**Co-Insurance**	:		
TPA	: **E CARE - Green Network**	**Remarks**	:		
Validity	: **01-01-1900** To **30-09-2024**				
Gender	: **Male**				
Date Of Birth	: **10-Oct-1998**				
Patient's Tel No	: **0569282742**				

CONSULTATION	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
10% max	NIL	NIL	NIL LIMIT	NIL	10%	NA

☐ **Acute** ☐ **Pre-existing and chronic** ☐ **Maternity**

Chief Complaints : pt co cough dry cough for 5 days sore throat hAD FEVER 3 DAYS AGO took panadol for that now no fever on exam chest is congested and throat is inflamed looks dehydrated **Duration:**

Vitals: Temp : 36.4 Bp :90 Pulse :79 Resp :18

Clinical Findings:

Diagnosis: R05 - Cough,R07.0 - Pain in throat,R53.1 - Weakness, **Date of Onset** : 14/26/2024

Requested Investigations: 9, Consultation GP,96360, HYDRATION IV INFUSION INIT,0102-152902-1001, LACTATED RINGERS INJECTION USP **Estimated Cost** :

Prescriptions: 0219-114501-2481 - (AMBROXOL : 15 MG/5ML) SYRUP (SUGAR FREE),0195-123701-0391 - (CETIRIZINE HCL : 10 MG) FILM COATED TABLETS,0139-116207-1171 - (CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 500 MG) TABLETS, **Estimated Cost** :

MEDICAL PRACTITIONER DECLARATION :

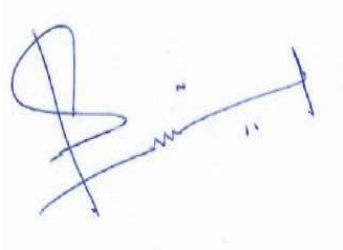
I declare that I am the patient's medical practitioner and that the particulars given are to the best of my knowledge true and correct.

PATIENT'S DECLARATION :

I hereby authorize any Healthcare provider, Insurer, Employer or other organization to release any information regarding my medical condition & history for purpose of determining insurance benefits.

Dr's Name : SANDIA **Stamp :**

Patient 's signature{Parent if minor} : **Date** : 14-May-2024

Signature :  **Date** : 14-May-2024