Administrative

MEDICAL CLAIM FORM

Claim Ref:

Patient Name	**: VISHAL KUMAR CHAUDHARY**
Card No	**: I011-029-119736610-01**
Policy Holder	**: VISHAL KUMAR CHAUDHARY**
Payer Name	**: AL SAGR NATIONAL INSURANCE COMPANY**
TPA	**: E CARE - Green Network**
Validity	**: 19-06-2023** To **18-06-2024**
Gender	**: Male**
Date Of Birth	**: 06-Aug-1993**
Patient's Tel No	**: 0523004789**

Service Date :21-May-2024 **Network** : Green

Health Provider :Irham Medical Center Arjan **Direct Access SP - YES**

Doctor's Name :Enomen Goodluck

Co-Insurance :

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

Remarks :

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

Chief Complaints : Pain on the right hand. Works as a laundry and said to iron clothes with steam iron and said to have used the hand for too many work lately that pain started. Upon rest, the pain had subsided but returned upon resumption of duty today. There is no history of trauma, no fever and he is not on any drug.

Duration:

Vitals: Temp : 36.6 Bp :111 Pulse :81 Resp :20

Clinical Findings:

Diagnosis: M79.641 - Pain in right hand,M13.0 - Polyarthritis, unspecified, **Date of Onset** :21/24/2024

Requested Investigations: 85025, BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC COUNT,86140, C REACTIVE PROTEIN,85651, SEDIMENTATION RATE RBC NON AUTOMATED,0005-149902-1021, CLOFEN ,96372, THER/PROPH/DIAG INJ SC/IM,9, Consultation GP,9.01, Follow Up Consultation GP

Estimated Cost :

Prescriptions: 2093-596002-0432 - (DICLOFENAC DIETHYLAMINE : 23.2 MG / G) GEL,

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.

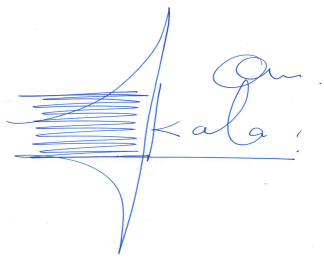
Dr's Name : Enomen Goodluck

Stamp :

Patient 's signature{Parent if minor} :

Date : 21-May-2024

Signature :



Date : 21-May-2024