Administrative

MEDICAL CLAIM FORM

Claim Ref:

Patient Name	: **MAZHAR HANIF MUHAMMAD HANIF**	**Service Date**	**:22-May-2024**
Card No	: **I017-029-114504364-02**	**Health Provider**	**:Irham Medical Center Arjan**
Policy Holder	: **MAZHAR HANIF MUHAMMAD HANIF**	**Doctor's Name**	**:Humaira**
Payer Name	: **ABU DHABI NATIONAL INSURANCE COMPANY-ADNIC**	**Co-Insurance**	:
TPA	: **E CARE - Green Network**	**Remarks**	:
Validity	: **01-10-2023** To **30-09-2024**		
Gender	: **Male**		
Date Of Birth	: **07-Oct-1987**		
Patient's Tel No	: **0551120684**		

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

Network : Green

Direct Access SP - YES

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

Chief Complaints : co heart burn weight loss 10 kg with in 6 month lack of epittite oe chest is clear no added sounds vitals stable **Duration:**

Vitals: Temp : 35.8 Bp :129 Pulse :61 Resp :18

Clinical Findings:

Diagnosis: K29.70 - Gastritis, unspecified, without bleeding,R12 - Heartburn, **Date of Onset** :22/10/2024

Requested Investigations: 101, GENARAL WELNES CHECKUP (55 TEST),9, Consultation GP **Estimated Cost :**

Prescriptions: 0270-189301-0081 - (ALUMINIUM HYDROXIDE : N/A) (SODIUM BICARBONATE : N/A) (ALGINIC ACID : N/A) (MAGNESIUM TRISILICATE : N/A) CHEWABLE TABLETS,6445-533801-1561 - (ESOMEPRAZOLE (AS MAGNESIUM) : 20 MG) DELAYED RELEASE CAPSULES, **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 : Humaira

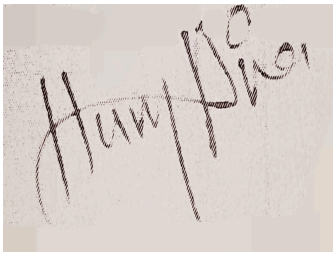
Stamp :

Dr. Humaira Mumtaz
General Practitioner
DHA No: 54155530-002
PESHAWAR MEDICAL CENTER LLC
DUBAI - U.A.E.

Patient 's signature{Parent if minor} :

Date : 22-May-2024

Signature :



Date : 22-May-2024