MedNet Global Healthcare Solutions L.L.C.

Paid-up capital AED 12,800,000

mednet
The preferred choice for healthcare solutions

MEMBER DETAILS				BENEFIT DETAILS
MEMBER NAME	: MADHAT ATTALLAH			Please follow benefits list for other deductible/copayment details
INSURANCE PLAN	: DUBAI INSURANCE COMPANY			
DHA MEMBER ID	:			
EID	: 784-1993-1480625-0	DOB	: 26-03-1993	
CARD NUMBER	: 097112660280014401	GENDER	: Male	
MOBILE NUMBER	: 582314606	START DATE	: 03-07-24	
MEMBER NETWORK	: Silver Premium	END DATE	: 03-07-24	

PRE-APPROVAL PROTOCOL:Please follow standard MedNet approval protocols

SUBJECTIVE

PC: COUGH 1 DAY

FLU

SORE THROAT

BODY ACHE

FEVER RECORDED AT HOME NOW HAVING NO FEVER PANADOL ALREADY TAKEN

OBJECTIVE

Temp: 37 °C RR : 20 bpm PR : 84 BP : 116 bpm Weight : 97 kg

P L A N **PHARMACEUTICALS**

Code	Generic	Dosage	Duration	Instructions
0070-148701-1171	(LORATADINE : 10 MG) TABLETS	TABLETS (10S, BLISTER PACK)	3	Take 1Tablets 1 Time(s) per Day For 3 Day(s) after meal at night for once only
7512-014201-1161	(ADHATODA VASICA : 112.5 MG/10ML) (TULSI (OCIMUM SANCTUM) : 90MG/10ML) (SOLANUM XANTHOCARPUM : 90MG/10ML) (TERMINALIA BELLIRICA EXTRACT : 52.5 MG/10ML) (HEDYCHIUM SPICATUM : 37.5 MG/10ML) (GLYCYRRHIZA GLABRA EXTRACT : 22.5 MG/10ML) (PIPER LONGUM : 22.5 MG/10ML) SYRUP	SYRUP (200ML, BOTTLE)	5	Take 1Syrup 2 Time(s) per Day For 5 Day(s) after meal
0005-107001-0051	(CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS	CAPLETS (24S, BOX)	5	Take 1Tablets 2 Time(s) per Day For 5 Day(s) after meal

P L A N **DIAGNOSTIC PROCEDURES**

Diagonosis:J06.9 - Acute upper respiratory infection, unspecified, R50.9 - Fever, unspecified, J00 - Acute nasopharyngitis [common cold]

Treatments:0195-107704-0801, CEFTRIAXONE-TABUK IV,96374, Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); intravenous push, single or initial substance/drug,9, Consultation GP

Facility Name: CITICARE MEDICAL CENTER LLC **Telephone No:** 047700948 **Physician's Name:** Enomen Goodluck **Physician's Stamp &Signature:** Dr. Enomen Goodluck Ekata General Practitioner DHA No: 28040827-001 CITICARE MEDICAL CENTER LLC DUBAI - U.A.E.	**Patient Registered by:** CITICARE MEDICAL CENTER LLC **Date and Time:** 03-07-2024 **Card Holder's Signature:** **"I hereby authorize any MedNet personnel to access my medical file"**

DISCLAIMER:

ALL SERVICES OUTSIDE PRE-APPROVAL PROTOCOL ARE SUBJECT TO RESTROSPECTIVE MEDICAL EVALUATION UPON CLAIM SUBMISSION. CLAIMS PROCESSING IS SUBJECT TO CONTRACTUAL TARIFF.

MedNet Claims Center: 600 546002 (24-hour hotline), Fax: 800 4883

E-mail: mcc@mednet.com

Contains Confidential Medical Information. Not To Be Handled By Unauthorized personnel