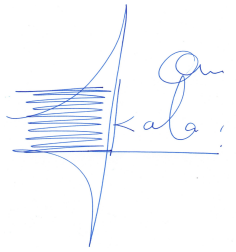


MEMBER DETAILS		BENEFIT DETAILS	
MEMBER NAME : MADHAT ATTALLAH INSURANCE PLAN : DUBAI INSURANCE COMPANY DHA MEMBER ID : EID : 784-1993-1480625-0 DOB : 26-03-1993 CARD NUMBER : 097112660280014401 GENDER : Male MOBILE NUMBER : 582314606 START DATE : 02-07-24 MEMBER NETWORK : Silver Premium END DATE : 02-07-24		Please follow benefits list for other deductible/copayment details	
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			
No Prescriptions History Found			
P L A N DIAGNOSTIC PROCEDURES			
Diagnosis: 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		Patient Registered by: CITICARE MEDICAL CENTER LLC	
Telephone No: 047700948		Date and Time: 02-07-2024	
Physician's Name: Enomen Goodluck			
		Card Holder's Signature:	
		"I hereby authorize any MedNet personnel to access my medical file"	



Physician's Stamp & Signature:



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