## MedNet Global Healthcare Solutions L.L.C.

Paid-up capital AED 12,800,000

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The preferred choice for healthcare solutions

| MEMBER DETAILS | | | | BENEFIT DETAILS |
|---|---|---|---|---|
| MEMBER NAME | : NOOR ULLAH MUHAMMAD ZAHOOR | | | Please follow benefits list for other deductible/copayment details |
| INSURANCE PLAN | : National Life And General Insurance | | | |
| DHA MEMBER ID | : | | | |
| EID | : 784-1993-8270799-2 | DOB | : 25-10-1993 | |
| CARD NUMBER | : 097111700264325201 | GENDER | : Male | |
| MOBILE NUMBER | : 0523305458 | START DATE | : 01-09-24 | |
| MEMBER NETWORK | : Silver Premium | END DATE | : 01-09-24 | |

**PRE-APPROVAL PROTOCOL:Please follow standard MedNet approval protocols**

**SUBJECTIVE**

co fever on and off left lumber pain severe dark colour of urine pain in urination 27th august 2024

oe

left lumber pain severe

chest is clear no addded sounds

restless

**OBJECTIVE**

**Temp: 36.5 °C RR : 18 bpm PR : 65 BP : 148 bpm Weight : 63 kg**

**P PHARMACEUTICALS**

| | Code | Generic | Dosage | Duration | Instructions |
|---|---|---|---|---|---|
| L | 0027-142201-0832 | (DICLOFENAC POTASSIUM : 50 MG) POWDER FOR SOLUTION | POWDER FOR SOLUTION (9S, SACHET) | 5 | Take 1sachet 3 Time(s) per Day For 5 Day(s) others |
| A | 0097-658501-0252 | (TARTARIC ACID : 0.89G) (SODIUM BICARBONATE : 1.76G) (CRANBERRY EXTRACT : 0.25 G) (TRI SODIUM CITRATE ANHYDROUS : 0.63G) (CITRIC ACID ANHYDROUS : 0.72G) EFFERVESCENT GRANULES | EFFERVESCENT GRANULES (30 X 4.25G, SACHET) | 7 | Take 1sachet 3 Time(s) per Day For 7 Day(s) others |
| | 0195-116604-0391 | (METRONIDAZOLE : 500 MG) FILM COATED TABLETS | FILM COATED TABLETS (20S, BLISTER PACK) | 7 | Take 1Tablets 2 Time(s) per Day For 7 Day(s) others |
| N | 3114-482003-0391 | (CIPROFLOXACIN (AS HYDROCHLORIDE) : 500 MG) FILM COATED TABLETS | FILM COATED TABLETS (10S, BLISTER) | 7 | Take 1 Unit(s), 1 Time(s) per Day For 7 Day(s) |

**P DIAGNOSTIC PROCEDURES**

L **Diagonosis:**R50.9 - Fever, unspecified, N39.0 - Urinary tract infection, site not specified, R52 - Pain, unspecified

**Treatments:**9, GP Cons,85025, Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count,81001, Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; automated, with microscopy,0195-107704-0801, CEFTRIAXONE-TABUK IV,0005-149902-1021, CLOFEN -(DICLOFENAC SODIUM : 75 MG/3ML) SOLUTION FOR INJECTION,0102-152902-

A 1001, LACTATED RINGERS INJECTION USP,96365, Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to 1 hour,96360, Intravenous infusion, hydration; initial, 31 minutes to 1 hour,96372, Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular,96361, Intravenous infusion, hydration; each additional hour (List separately in addition to code for primary procedure),30042033, CIPROFLOXACIN,0002-116601-1001, METRONIDAZOLE : 500 MG/100ML) SOLUTION FOR INFUSION

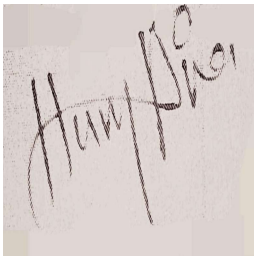
N

**Facility Name:**CITICARE MEDICAL CENTER LLC

**Telephone No:** 047700948

**Physician's Name:** Humaira

**Physician's Stamp &Signature:**



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

**Patient Registered by:**CITICARE MEDICAL CENTER LLC

**Date and Time:** 01-09-2024

**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**

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