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	: ROCHELLE MARTILLANO ALMENANZA			Please follow benefits list for other deductible/copayment details
INSURANCE PLAN	: DUBAI INSURANCE COMPANY			
DHA MEMBER ID	:			
EID	: 784-1989-0758482-9	DOB	: 15-11-1989	
CARD NUMBER	: 097112440281748802	GENDER	: Female	
MOBILE NUMBER	: 0557332859	START DATE	: 09-10-24	
MEMBER NETWORK	: Silver Premium	END DATE	: 09-10-24	

PRE-APPROVAL PROTOCOL:Please follow standard MedNet approval protocols

SUBJECTIVE

DECLINED BLOOD TEST as they are not covered by insurance.

OBJECTIVE

Temp: 36.8 °C RR : 18 bpm PR : 80 BP : 114 bpm Weight : 65.8 kg

P PHARMACEUTICALS

Code	Generic	Dosage	Duration	Instructions
0188-135906-2441	(BUDESONIDE : 0.5 MG/ML) SUSPENSION FOR NEBULIZATION	SUSPENSION FOR NEBULIZATION (2ML X 20, UNIT)	30	Take 1Puff 2Time(s) perDay For 30 Day(s) others
0188-232401-0392	(ESOMEPRAZOLE : 40 MG) FILM COATED TABLETS	FILM COATED TABLETS (28S, BLISTER PACK)	56	Take 1Tablets 1 Time(s) per Day For 56 Day(s) after meal
0011-528301-0391	(DAPAGLIFLOZIN (AS PROPANEDIOL) : 10 MG) FILM COATED TABLETS	FILM COATED TABLETS (28S, BLISTER PACK)	56	Take 1Tablets 1Time(s) perDay For 56 Day(s) after meal
0188-155602-0391	(ROSUVASTATIN (AS CALCIUM) : 10 MG) FILM COATED TABLETS	FILM COATED TABLETS (28S, BLISTER (CALENDAR PACK))	56	Take 1Tablets 1Time(s) perDay For 56 Day(s) evening
0030-244101-0391	(CLOPIDOGREL : 75 MG) FILM COATED TABLETS	FILM COATED TABLETS (28S, BLISTER PACK)	56	Take 1Tablets 1 Time(s) per Day For 56 Day(s) morning
0090-312201-1171	(EZETIMIBE : 10 MG) TABLETS	TABLETS (28S, BLISTER PACK)	56	Take 1Tablets 1Time(s) perDay For 56 Day(s) evening

P DIAGNOSTIC PROCEDURES

L A N

Diagonosis:K29.00 - Acute gastritis without bleeding, I20.9 - Angina pectoris, unspecified, J45.20 - Mild intermittent asthma, uncomplicated, E78.5 - Hyperlipidemia, unspecified, E11.9 - Type 2 diabetes mellitus without complications, K21.9 - Gastro-esophageal reflux disease without esophagitis

Treatments: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: 09-10-2024

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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