MedNet Global Healthcare Solutions L.L.C.

Paid-up capital AED 12,800,000

mednet
The preferred choice for healthc

MEMBER DETAILS				BENEFIT DETAILS
MEMBER NAME	: MOHAMED HUSSAIN MAHGOUB MOHAMED			Please follow benefits list for other deductible/copayme
INSURANCE PLAN	: TAKAFUL EMARAT			
DHA MEMBER ID	:			
EID	: 784-1989-4800773-1	DOB	: 28-11-1989	
CARD NUMBER	: 097112730346279901	GENDER	: Male	
MOBILE NUMBER	: 0559534717	START DATE	: 30-10-24	
MEMBER NETWORK	: Silver Premium	END DATE	: 30-10-24	

PRE-APPROVAL PROTOCOL:Please follow standard MedNet approval protocols

SUBJECTIVE

PC: Difficulty breathing since last night but said to be progressively increasing.

He is a known asthmatic uses ventolin inhaler occasionally but has used in a long while

Has slight cough,

No fever, no chest pain and no wheezing.

OBJECTIVE

Temp: 36.4 °C RR : 18 bpm PR : 70 BP : 113 bpm Weight : 89 kg

P L A N PHARMACEUTICALS

Code	Generic	Dosage	Duration	Instructions
0005-119803-1171	(PREDNISOLONE : 20 MG TABLETS	TABLETS (20S, BLISTER PACK	7	Take 1Tablets 1 Time For 7 Day(s) evening
0090-265901-1171	(MONTELUKAST : 10 MG) TABLETS	TABLETS (28S, BLISTER PACK)	28	Take 1Tablets 1Time(For 28 Day(s) evening
0006-124507-1392	(SALBUTAMOL : 100 MCG) AEROSOL INHALER	AEROSOL INHALER (200 DOSE, BLISTER IN DISKUS)	30	Take 2Puff 1Time(s) p 30 Day(s) others

P L DIAGNOSTIC PROCEDURES

Diagonosis:J45.21 - Mild intermittent asthma with (acute) exacerbation, R06.00 - Dyspnea, unspecified

A

Treatments:94640, Pressurized or nonpressurized inhalation treatment for acute airway obstruction or for sputum induct diagnostic purposes (eg, with an aerosol generator, nebulizer, metered dose inhaler or intermittent positive pressure brea device),0188-135906-2441, PULMICORT,0006-402803-2071, VENTOLIN NEBULES,85025, Blood count; complete (CBC), au (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count,86140, C-reactive protein;,9, Consultation

N

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: 30-10-2024

Card Holder's Signature:

"I hereby authorize any MedNet personnel to access m file"

DISCLAIMER:

ALL SERVICES OUTSIDE PRE-APPROVAL PROTOCOL ARE SUBJECT TO RESTROSPECTIVE MEDICAL EVALUATION UPON CLAIM SU

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