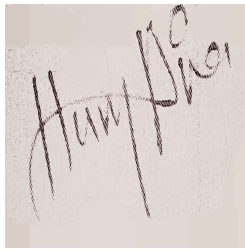


MedNet Global Healthcare Solutions L.L.C.

Paid-up capital AED 12,800,000



MEMBER DETAILS		BENEFIT DETAILS											
MEMBER NAME : VIRGINIA VAN DER WESTHUIZEN INSURANCE PLAN : Islamic Arab Insurance Co. (P.S.C.) DHA MEMBER ID : EID : 784-1954-4497960-3 DOB : 15-03-1954 CARD NUMBER : 097112950280448502 GENDER : Female MOBILE NUMBER : 0504520238 START DATE : 25-11-24 MEMBER NETWORK : Silver Premium END DATE : 25-11-24		Please follow benefits list for other deductible/copayment details											
PRE-APPROVAL PROTOCOL: Please follow standard MedNet approval protocols													
SUBJECTIVE co she is already taking antihypertensive medicine now she complain dark colour of urine pain in the urination and feeling heaviness in left hand oe chest is clear no added sounds restless													
OBJECTIVE													
Temp: 36 °C RR : 18 bpm PR : 86 BP : 120 bpm Weight : 71 kg													
P L A N PHARMACEUTICALS <table border="1"> <thead> <tr> <th>Code</th> <th>Generic</th> <th>Dosage</th> <th>Duration</th> <th>Instructions</th> </tr> </thead> <tbody> <tr> <td colspan="5">No Prescriptions History Found</td> </tr> </tbody> </table>				Code	Generic	Dosage	Duration	Instructions	No Prescriptions History Found				
Code	Generic	Dosage	Duration	Instructions									
No Prescriptions History Found													
P L A N DIAGNOSTIC PROCEDURES Diagonosis: N39.0 - Urinary tract infection, site not specified, I10 - Essential (primary) hypertension, E78.5 - Hyperlipidemia, unspecified Treatments: 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,90.19, RENAL PANEL equivalent to CPT 80069, for Covid-19 ,80061, Lipid panel This panel must include the following: Cholesterol, serum, total (82465), Lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718), Triglycerides (84478),90.19, RENAL PANEL equivalent to CPT 80069, for Covid-19 ,9, Consultation - GP													
Facility Name: CITICARE MEDICAL CENTER LLC Telephone No: 047700948 Physician's Name: Humaira		Patient Registered by: CITICARE MEDICAL CENTER LLC Date and Time: 25-11-2024  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

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