No.	

Payer : TAKAFUL EMARAT

Card No: 097112730243880002 valid until: 03-03-2025

Card Holders Name: AMNA JEHANZEB BADAR IQBAL Mobile No: 0524450630

I.D No: ○ Identity Card ○ Passport ○ Labour Card ○ Other

Dear Doctor : We are pleased that our member is consulting you for medical care and kindly ask you to complete this SOAP fc complying with all MedNet's Network procedures. Thank you

SUBJECTIVE

OBJECTIVE

CONSULTATION

ASSESSMENT

PHARMACEUTICALS

(DEXAMETHASONE : 0.10% (TOBRAMYCIN : 0.3% EYE DROPS,EYE DROPS (5ML, DROPPER BOTTLE,7-, (POLYETHYLENE GLYCOL 400 : 4 MG/ML (PROPYLENE GLYCOL : 3 MG/ML EYE DROPS,EYE DROPS (10ML, DROPPER BOTTLE,7-

DIAGNOSTIC PROCEDURES

Acute atopic conjunctivitis, bilateral, Pain in left leg, Fever, unspecified, Low back pain

ICD10 code:

H10.13, M79.605, R50.9, M54.5

Physician's Name: AHSAN HUSSAIN

Telephone No.: 0521644729

Date: 07-12-2024

STAMP

Dr. Ahsan Hussain
General Practitioner
DHA No: 87543658-001
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.

SIGNATURE

CARD HOLDER'S SIGNATURE

"I hereby authorise any MedNet personnel to access my medi

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