

No.

Payer : Dubai Insurance_Swiss Life

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

SUBJECTIVE**OBJECTIVE****CONSULTATION****ASSESSMENT****PHARMACEUTICALS****DIAGNOSTIC PROCEDURES**

Laceration without foreign body of left hand, init encntr, Acute pain due to trauma

ICD10 code:

S61.412A, G89.11

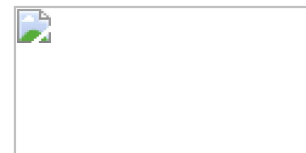
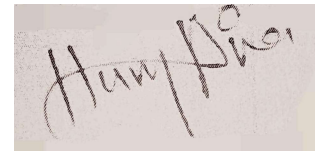
Physician's Name: Humaira

Telephone No.: 0524244416

Date: 03-01-2025

STAMP

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

SIGNATURE**CARD HOLDER'S SIGNATURE**

"I hereby authorise any MedNet personnel to access my medical records"

Distribution: White to Physician, Pink to Pharmacy, Yellow to Diagnostic Center/ Laboratory, Green to Cardholder

MedNet Claims Center: 800 4882 (24-hour hotline), Fax: 800 4883

E-mail: medicalunit@mednet-uae.com

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