

ANNEXURE V

C NETWORK UAE

P. O. BOX: 50430, DUBAI, Tel – 04 3871900, Fax – 04 3977842 Email - approval@fmchealthcare.ae Helpline Number: 600-565691

Medical Expenses Claim form

Date: 04-Jan-2025

Emirates: 784-1997-4685474-6 Clinic Name: CITICARE MEDICAL CENTER LLC

Card Holder's SHUBHAM YADAV TAHASELDAR

Sex:Male

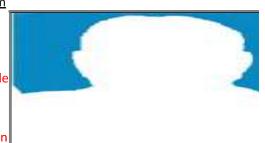
Name: **YADAV**

Card Holder's Tel No:

Mobile No: 0589532040

30/9/2025

Ins Card No: 1005-010-117490819-01 Valid Upto: Company Name: FMC Standard Network Employee No: Nationality: Indian



Clinical Details:	lemp2	B.P.126	Pulse. /6
Signs & Symptoms: RISK	OF FALL		
Date of Onset Illness:		○ Emergency ○ Work re	elated O New visit O Follow up
Diagnosis: K58.1 - Irritak	ole bowel syndrome with const	ipation, R10.30 - Lower abdominal pain, u	nspecified

Management plan (Services inside the clinic including injections and investigations)

9, Consultation Gp , General Consultation

Dr. Humaira Mumta DHA No: 54155530-00 CITICARE MEDICAL CENTE DUBAI - U.A.E.

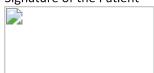
Doctor's Name: Humaira signature with seal:

Diagnostic Procedures referred outside:

I hereby authorize the physician, Hospital or pharmacy to file a claim for medical services on my behalf and I confirm that the above mentioned examination/Investigation/therapy is given to me by the doctor. I hereby authorize any Clinic, Physician, Pharmacy or a person who has provided medical services to me to furnish any and all information with regard to any medical history, medical con medical services and copies of all medical and Clinic records.

Signature of the Patient

Date 04-Jan-2025



Pharmaceuticals (to be filled by treating doctor only)

Medicine	Dose	Duration	Quantity
(PREDNISOLONE : 5 MG TABLETS	TABLETS (200S, BLISTER PACK	14	14
(LUBIPROSTONE : 24 MCG) SOFT CAPSULES	SOFT CAPSULES (56S, HDPE BOTTLE)	7	14

Medicine	Dose	Duration	Quantity
(CETIRIZINE HCL : 10 MG) FILM COATED TABLETS	FILM COATED TABLETS (10S, BLISTER PACK)	7	7
(SPORE OF BACILLUS CLAUSI : 2 BILLION) CAPSULES (HARD GELATIN)	CAPSULES (HARD GELATIN) (12S, BLISTER)	30	30
(PAROXETINE : 12.5 MG) MODIFIED RELEASE TABLETS	MODIFIED RELEASE TABLETS (30S, BLISTER PACK)	14	14
(CHARCOAL, ACTIVATED : 250 MG (SIMETHICONE : 80 MG CAPSULES	CAPSULES (20S, BLISTER	7	7
(BETAMETHASONE : 0.05% CREAM	CREAM (10G, TUBE	7	14