Photo Not Available

Patient 45484 SUMERA KHAN 784-1990-6749676-2 First Time 35 Female United Nations M AAFIYA MEDICAL BILLING SERVICES LLC - TAKAFUL EMARAT - Default Scheme (99999)

Medical History (patient_history.aspx?patId=55521)

Billing History (patient_accounts.aspx?patId=55521)

Appointment Visit ID 56799 08-Jan-2025 Humaira - General - DHA-P-54155530

MRN Activities(Log) Insurance Cards EMID Card

Vitals Alert This Patient has Vitals for Temp: 37.1°C, Pulse: 88bpm, BP: 104mmHg, Height: 156cm, Weight: 89kg, BMI 36.57(Obese), Blood Sugar

Start Time | Nurse Station | Doctor Evaluation | Orthopedic Case Assessment | Diagnosis | Treatments/Procedures | Packages | Prescription | Reimbursement Forms | Documents | Progress Notes | Addendum | AAFIYA FORM | Other Forms | Sick Leave | End Time | Visit Summary Sheet | Nabidh Clinical Docs | Audit Log | Radiology | Laboratory | Health Declaration | Signed Documents | Image Comparison

(CLAVULANIC ACID : 125 MG) (AMOXICILLIN : 875 MG) TABLETS	TABLETS (14S, BLISTER PACK)	7	0.0000
(CAFFEINE : 65 MG (PARACETAMOL : 500 MG CAPLETS	CAPLETS (24S, BOX	6	0.0000
(ESOMEPRAZOLE (AS MAGNESIUM : 20 MG CAPSULES (HARD GELATIN	CAPSULES (HARD GELATIN (14S, BLISTER	7	2.2900
(DIPHENHYDRAMINE : 12.5 MG/5ML SYRUP (SUGAR FREE	SYRUP (SUGAR FREE (120ML, BOTTLE	1	6.5000

Estimated Cost :

MEDICAL PRACTIONER DECLARATION:

I declare that i am the patient's medical practitioner and that the particulars given are to the best of my knowledge true and correct

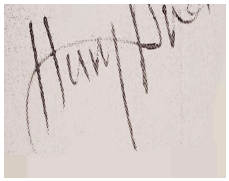
Dr. Humaira Mumtaz
General Practitioner
DHA No: 54155530-002
CITICARE MEDICAL CENTER LLC
DUBAI - U.A.E.

Dr's Name : Humaira Stamp:

PATIENT'S DECLARATION:

I hereby authorize any Healthcare provider, Insu other organization to release any information rega condition & history to Aafiya for purpose of deter benifits.

Patient's Signature(Parent If Minor):

Signature:  Date: 08-Jan-2025

Patient's Signature(Parent if Minor):

Aafiya Medical Billing Services reserve its right during the Agreement period with the service provider, survey and audit the service provider's operations with res
to its performance of services, the patient visit details and claims.

24/7 Claims Centre

Helpline: 9714263 0666 | Tel: 971 4 283 8116 | Fax: 971 4 283 8115 | Email: claims@aafiya.ae | Website: www.aafiya.

Patient Signature | Save | Print

Previous History

Date	Doctor	Previous Form
No Previous Complaints Found		