



Patient 38023 **ATHUL MAVOLI JAYARAJAN MAVOLI** 784-1992-3293513-2 Repeat
33 Male Indian S NAS - EN CN GN - National Life And General Insurance - Default
Scheme (99999) [Medical History \(patient_history.aspx?patId=39047\)](#)
[Billing History \(patient_accounts.aspx?patId=39047\)](#)

Appointment **Visit ID 56936** 14-Jan-2025 **Abdulrahman - Dental - DHA-P-0230994**
[MRN Activities\(Log\)](#) [Insurance Cards](#) [EMID Card](#)
[ain.aspx?appld=56936&pat_age=33&patId=39047&app_fdate=1/14/2025 12:00:00 AM&pat_code=38023](#)

Vitals Alert This Patient has Vitals for Temp: 37.1°C, Pulse: 80bpm, BP: 120mmHg, Height: 165cm, Weight: 90.6kg, BMI 33.28(Obese), Blood Sugar

Start Time Nurse Station Dental Station ▼ OPG & IOPA Images DMF / Index Treatment Plan
Dental Charting Diagnosis Treatments/Procedures ▼ Packages Prescription
Reimbursement Forms ▼ Documents Progress Notes Addendum NAS REIMB Claim FORM
NAS PRESCRIPTION Claim FORM NAS DENTAL FORM Dental Consent Forms ▼ Other Forms
Sick Leave End Time Visit Summary Sheet Nabidh Clinical Docs Audit Log Radiology
Laboratory Health Declaration Signed Documents Image Comparison

PROCEDURE / MANAGEMENT PLANNED

D1110 - PROPHYLAXIS - ADULT, D0150 - comprehensive oral evaluation - new or established patient, D0150 - comprehensive oral evaluation - new or established patient, D0485 - consultation, including preparation of slides from biopsy material supplied by patient or source, D9310 - consultation - diagnostic service provided by dentist or physician other than requesting dentist or physician, D0150 - comprehensive oral evaluation - new or established patient

TREATING DENTAL SPECIALIST Abdulrahman

HOSPITAL / CLINIC CITICARE MEDICAL CENTER LLC

CONSULTATION DETAILS **NEW** ☐ **FOLLOW-UP** ☐ **CONSUTATION FEES**

Dr. Abdulrahman Al Takraati



DAT

DOCTOR'S SIGNATURE AND STAMP

I hear allow NAS authorized personnel to obtain any requisite medical details from my current and previous physicians and

BENEFICIARYS' SIGNATURE

NAS Administration Services, P.O.Box: 44505, Abu Dhabi, UAE. Te:02-6777997, FaxL02-6766227

 Patient Signature

Save

 Print**Previous History**

Date	Doctor	Previous Form
No Previous Complaints Found		