

ANNEXURE V

FMCNETWORK 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-Feb-2025

Clinic Name: CITICARE MEDICAL CENTER LLC Emirates: 784-1997-6690100-5
Card Holder's Name: UPUL MADHUSANKHA Age: 27Y - 2M - 3D Sex: Male

Card Holder's Tel No: Mobile No: 0554494932
Ins Card No: 1005-010-121772611-01 Valid Upto: 30/9/2025
Company FMC Standard Employee
Name: Network No: Nationality: Lankan



Clinical Details:	Temp <mark>37.2</mark>	B.P. <mark>150</mark>	Pulse. <mark>92</mark>
Signs & Symptoms: RISK F	OR FALL		
Date of Onset Illness :		○ Emergency ○ We	ork related O New visit O Follow up visit
Diagnosis: J06.9 - Acute up	oper respiratory infection, uns	pecified, J30.9 - Allergic rhinitis, uns	specified, R50.9 - Fever, unspecified, R05 -
Cough, K29.00 - Acute gas	tritis without bleeding		

Management plan (Services inside the clinic inclu	ding injections and investigations)
94640, AIRWAY INHALATION TREATMENT, Co.Pay,	0 7
	,
	Dr. Humaira Mumtaz General Practitioner DHA No: 54155530-002 CITICARE MEDICAL CENTER LLC 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 any other person who has provided medical services to me to furnish any and all information with regard to any medical history, medical condition, or medical services and copies of all medical and Clinic records.

Signature of the Patient

Date 04-Feb-2025

Pharmaceuticals (to be filled by treating doctor only)

Medicine	Dose	Duration	Quantity	Price
(CAFFEINE : 65 MG (PARACETAMOL : 500 MG CAPLETS	CAPLETS (24S, BOX	6	12	0.0000
(CETIRIZINE HCL : 10 MG) FILM COATED TABLETS	FILM COATED TABLETS (10S, BLISTER PACK)	5	5	0.0000
(ESOMEPRAZOLE (AS MAGNESIUM : 20 MG DELAYED RELEASE CAPSULES	DELAYED RELEASE CAPSULES (30S, CONTAINER	7	14	1.9700
(DIPHENHYDRAMINE : 12.5 MG/5ML SYRUP (SUGAR FREE	SYRUP (SUGAR FREE (120ML, BOTTLE	1	1	6.5000
(AZITHROMYCIN: 500 MG FILM COATED TABLETS	FILM COATED TABLETS (3S, BLISTER	7	7	10.8300