ANNEXURE V

F M 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-Mar-2025
Clinic Name: CITICARE MEDICAL CENTER LLC Emirates: 784-1998-8482131-7
Card Holder's Name: KHARAK SINGH KISHAN SINGH Age: 26Y - 7M - 17D Sex: Male
Card Holder's Tel No: Mobile No: 0569469783
Ins Card No: I005-010-119076401-01 Valid Upto: 30/9/2025
Company Name: FMC Standard Network Employee No: _____ Nationality: Indian

Clinical Details: Temp B.P. Pulse.
Signs & Symptoms:
Date of Onset Illness :
○ Emergency ○ Work related ○ New visit ○ Follow up visit
Diagnosis: R21 - Rash and other nonspecific skin eruption, R05 - Cough, J00 - Acute nasopharyngitis [common cold], R50.9 - Fever, unspecified

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

9.01, Free Follow-Up Consultation Gp , General Consultation,0046-111801-0511, (CHLORPHENIRAMINE : 10 MG) INJECTION , Pharmacy,96372, THER/PROPH/DIAG INJ SC/IM , Co.Pay,0125-122107-1022, DEXAMETHASONE SODIUM PHOSPHATE , Pharmacy,2190-106618-1001, PARAFUSIV I.V. 10MG/ML-(PARACETAMOL : 10 MG/ML) SOLUTION FOR INFUSION , Pharmacy,96374, THER/PROPH/DIAG INJ IV PUSH , Co.Pay,94640, AIRWAY INHALATION TREATMENT , Co.Pay,0188-135906-2) SUSPENSION FOR NEBULIZATION , Pharmacy

Doctor's Name: DR Amaizah signature with seal:

Dr. Amaizah Ishtiaq
General Practitioner
DHA: 98486553-001
CITICARE MEDICAL CENTER
DUBAI - U.A.E

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-Mar-2025

Pharmaceuticals (to be filled by treating doctor only)