## Administrative MEDICAL CLAIM FORM Claim Ref:

| | | | |
|---|---|---|---|
| **Patient Name** | : **SONAM MANISHKUMAR VAZA** | **Service Date** | **:15-Mar-2025** **Network** : Green |
| **Card No** | : **I022-029-120724591-01** | **Health Provider** | **:CITICARE MEDICAL CENTER LLC** **Direct Access SP - YES** |
| **Policy Holder** | : **SONAM MANISHKUMAR VAZA** | **Doctor's Name** | **:AISHA** |
| **Payer Name** | : **TAKAFUL EMARAT** | **Co-Insurance** | |
| **TPA** | : **E CARE - Blue Network** | **Remarks** | : |
| **Validity** | : **29-04-2024** To **28-04-2025** | | |
| **Gender** | : **Female** | | |
| **Date Of Birth** | : **28-Nov-1987** | | |
| **Patient's Tel No** | : **0522082823** | | |

| CONSULTATION | LAB/RADIOLOGY | PHYSIO | PHARMACY | IP | MATERNITY | DENTAL |
|---|---|---|---|---|---|---|
| 10% max | NIL | NIL | NIL LIMIT | NIL | 10% | NA |

☐ **Acute** ☐ **Pre-existing and chronic** ☐ **Maternity**

**Chief Complaints :** co burning micturation dark colour urine dribbling of the urine fever with chills known case of hypothyroism **Duration:**

**Vitals:**Temp : 36.6 Bp :140 Pulse :88 Resp :18

**Clinical Findings:**

**Diagnosis:** N39.0 - Urinary tract infection, site not specified,N39.43 - Post-void dribbling,R50.9 - Fever, unspecified,E86.0 - Dehydration, **Date of Onset** :15/22/2025

**Requested Investigations:** 85025, BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC COUNT,86140, C REACTIVE PROTEIN,81003, URNLS DIP STICK TABLET RGNT AUTO WO MICROSCOPY,81015, URINALYSIS MICROSCOPIC ONLY,0102-100104-1001, SODIUM CHLORIDE & DEXTROSE B.P.,0195-107704-0801, CEFTRIAXONE-TABUK IV,0046-136504-1021, SPASMOPAN,96372, THER/PROPH/DIAG INJ SC/IM,96365, THER/PROPH/DIAG IV INF INIT,9, Consultation GP **Estimated Cost** :

**Prescriptions:** 0005-107001-0051 - (CAFFEINE : 65 MG) (PARACETAMOL : 500 MG) CAPLETS,6445-533801-1561 - (ESOMEPRAZOLE (AS MAGNESIUM : 20 MG DELAYED RELEASE CAPSULES,0097-658501-0251 - (TARTARIC ACID : 0.89G) (SODIUM BICARBONATE : 1.76G) (CRANBERRY EXTRACT : 0.25 G) (TRI SODIUM CITRATE ANHYDROUS : 0.63G) (CITRIC ACID ANHYDROUS : 0.72G) EFFERVESCENT GRANULES,3114-482003-0391 - (CIPROFLOXACIN (AS HYDROCHLORIDE) : 500 MG) FILM COATED TABLETS, **Estimated Cost** :

**MEDICAL PRACTITIONER 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.

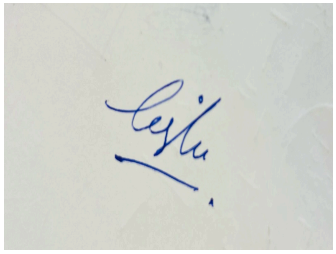
**PATIENT'S DECLARATION :**

I hereby authorize any Healthcare provider, Insurer, Employer or other organization to release any information regarding my medical condition & history for purpose of determining insurance benefits.

**Dr's Name** : AISHA **Stamp :**

Dr. Aisha Umer
Physician- General Practitioner
DHA- 40131439-002
CITICARE MEDICAL CENTER
DUBAI - U.A.E

**Patient 's signature{Parent : if minor}** **Date :** 15-Mar-2025

**Signature :**  **Date** : 15-Mar-2025