

**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: 23-Apr-2025

Clinic Name: CITICARE MEDICAL CENTER LLC Emirates: 784-1997-2652787-4

Card Holder's Name: PRIYA SAHU ARUN KUMAR SAHU Age: 27Y - 7M - 10D Sex: Female

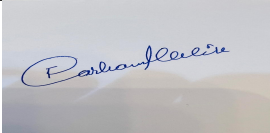
Card Holder's Tel No: Mobile No: +919630911307

Ins Card No: I005-010-118997977-01 Valid Upto: 30/9/2025

Company Name: FMC Standard Network Employee No: Nationality: Indian



Clinical Details:	Temp 37	B.P. 113	Pulse. 111
Signs & Symptoms:			
Date of Onset Illness :	☐ Emergency ☐ Work related ☐ New visit ☐ Follow up visit		
Diagnosis: J06.9 - Acute upper respiratory infection, unspecified, R05 - Cough, R07.0 - Pain in throat, R50.9 - Fever, unspecified, R52 - Pain, unspecified			

Management plan (Services inside the clinic including injections and investigations)	
0195-107704-0801, CEFTRIAXONE-TABUK IV , Pharmacy, 0439-152905-1001, LACTATED RINGERS INJECTION USP , Pharmacy, 0125-122107-1022, DEXAMETHASONE SODIUM PHOSPHATE , Pharmacy, 96365, IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST TO 1 HR , Co.Pay, 9, Consultation Gp , General Consultation, 96361, HYDRATE IV INFUSION ADD-ON , Co.Pay, 96374, THER/PROPH/DIAG INJ IV PUSH , Co.Pay	
Doctor's Name: Dr. Farhan Ilyas signature with seal:	 Dr. Farhan Ilyas Malik Physician-General Practitioner DHA-06441782-001 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 23-Apr-2025



Pharmaceuticals (to be filled by treating doctor only)