

**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: 02-May-2025

Clinic Name: CITICARE MEDICAL CENTER LLC

Emirates: 784-1992-9541480-1

Card Holder's Name: PRATHAP MONY MONY

Age: 32Y - 11M - 2D

Sex: Male

Name: ARUNACHALAM

Card Holder's Tel No:

Mobile No:

971556309358

Ins Card No: I019-010-122016143-01

Valid Upto: 7/6/2025

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



Clinical Details:

Temp 36.6

B.P. 133

Pulse. 84

Signs & Symptoms: RISK FOR FALL

Date of Onset Illness :

☐ Emergency ☐ Work related ☐ New visit ☐ Follow

Diagnosis: J06.9 - Acute upper respiratory infection, unspecified, R50.9 - Fever, unspecified, R51.9 - Headache, unspecified, RC throat, R09.81 - Nasal congestion, R05 - Cough

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

0188-135906-2441, PULMICORT , Pharmacy, 85027, COMPLETE CBC AUTOMATED , Lab, 9, Consultation Gp , General Consultation AIRWAY INHALATION TREATMENT , Co. Pay

Doctor's Name: Dr. Farhan Ilyas

signature with seal:

Dr. Farhan Ilyas
 Physician-General F
 DHA-0644178
 CITICARE MEDICAL
 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 mentioned examination/Investigation/therapy is given to me by the doctor. I hereby authorize any Clinic, Physician, Pharmacy person who has provided medical services to me to furnish any and all information with regard to any medical history, medical services and copies of all medical and Clinic records.

Signature of the Patient

Date 02-May-2025

Pharmaceuticals (to be filled by treating doctor only)

Medicine	Dose	Duration	Quantity
(LORATADINE : 10 MG) TABLETS	TABLETS (10S, BLISTER PACK)	5	10
(AMOXICILLIN : 500 MG) (CLAVULANIC ACID : 125 MG) FILM COATED TABLETS	FILM COATED TABLETS (20S, FOIL STRIP)	5	10
(PARACETAMOL : 500 MG) FILM COATED TABLETS	FILM COATED TABLETS (96S, BLISTER PACK)	5	15

