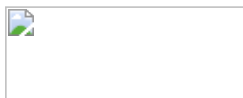
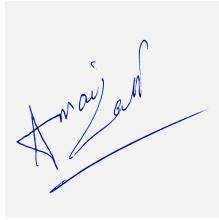


MedNet Global Healthcare Solutions L.L.C.

Paid-up capital AED 12,800,000



MEMBER DETAILS		BENEFIT DETAILS			
MEMBER NAME : AHMAD OTHMAN S ESHTIEH INSURANCE PLAN : TAKAFUL EMARAT DHA MEMBER ID : EID : 784-1990-3803695-2 DOB : 01-01-1991 CARD NUMBER : 097112730352340201 GENDER : Male MOBILE NUMBER : 569656655 START DATE : 24-05-25 MEMBER NETWORK : Silver Premium END DATE : 24-05-25		Please follow benefits list for other deductible/copayment details			
PRE-APPROVAL PROTOCOL: Please follow standard MedNet approval protocols					
SUBJECTIVE					
follow up high cholesterol prediabetic low vitamin d					
OBJECTIVE					
Temp: 36.8 °C RR : 18 bpm PR : 86 BP : 140 bpm Weight : 92 kg					
P PHARMACEUTICALS					
L	Code	Generic	Dosage	Duration	Instructions
	0005-164102-0391	(METFORMIN HCL : 1000 MG) FILM COATED TABLETS	FILM COATED TABLETS (30S, BLISTER PACK)	60	Take 1Tablets 1 Time(s) per Day For 60 Day(s) after meal
A	0188-155601-0391	(ROSUVASTATIN (AS CALCIUM) : 20 MG) FILM COATED TABLETS	FILM COATED TABLETS (28S, BLISTER (CALENDAR PACK))	60	Take 1Tablets 1 Time(s) per Day For 60 Day(s) evening
N	0201-124202-0341	(ASPIRIN : 75 MG) ENTERIC COATED TABLETS	ENTERIC COATED TABLETS (56S, BLISTER PACK)	60	Take 1Tablets 1 Time(s) per Day For 60 Day(s) after meal
P DIAGNOSTIC PROCEDURES					
L	Diagnosis: E78.5 - Hyperlipidemia, unspecified, R03.0 - Elevated blood-pressure reading, w/o diagnosis of htn, R73.03 - Prediabetes				
A	Treatments: INJ064, VITAMIN D, INJECTION ,96372, INJECTION SERVICE-IM,51.02, Non-surgical cleansing with surgical dressing between 16 sq inches / 100 sq centimeters and 48 sq inches / 300 sq centimeters ,9.01, 9.01 follow up visit				
N					
Facility Name: CITICARE MEDICAL CENTER LLC Telephone No: 047700948 Physician's Name: DR Amaizah			Patient Registered by: CITICARE MEDICAL CENTER LLC Date and Time: 24-05-2025  Card Holder's Signature:		
			"I hereby authorize any MedNet personnel to access my medical file"		



Physician's Stamp & Signature:

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

DISCLAIMER:

**ALL SERVICES OUTSIDE PRE-APPROVAL PROTOCOL ARE SUBJECT TO RESTROSPECTIVE MEDICAL EVALUATION UPON CLAIM SUBMISSION.
CLAIMS PROCESSING IS SUBJECT TO CONTRACTUAL TARIFF.**

MedNet Claims Center: 600 546002 (24-hour hotline), Fax: 800 4883

E-mail: mcc@mednet.com

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