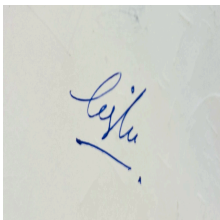


MedNet Global Healthcare Solutions L.L.C.

Paid-up capital AED 12,800,000



MEMBER DETAILS		BENEFIT DETAILS			
MEMBER NAME : MAAZ BIN ASGHAR ASGHAR SAMDANI INSURANCE PLAN : Islamic Arab Insurance Co. (P.S.C.) DHA MEMBER ID : EID : 784-1996-1994636-3 DOB : 22-06-1996 CARD NUMBER : 784-1996-1994636-3 GENDER : Male MOBILE NUMBER : 0568891984 START DATE : 28/05/2025 MEMBER NETWORK : Silver Premium END DATE : 28/05/2025		Please follow benefits list for other deductible/copayment details			
PRE-APPROVAL PROTOCOL: Please follow standard MedNet approval protocols					
SUBJECTIVE pt came with high blood pressure for the last three days					
OBJECTIVE					
Temp: 36.8 °C RR : 20 bpm PR : 78 BP : 158 bpm Weight : 92 kg					
P PHARMACEUTICALS					
L	Code	Generic	Dosage	Duration	Instructions
A	0207-379203-1171	(AMLODIPINE (AS BESYLATE) : 5MG) TABLETS	TABLETS (30S, BLISTER)	30	Take 1 Unit(s), 1 Time(s) per Day For 30 Day(s)
N					
P DIAGNOSTIC PROCEDURES					
L	Diagnosis: I10 - Essential (primary) hypertension				
A	Treatments: 10008, ECG, 9, Consultation Gp, 93005, Electrocardiogram, routine ECG with at least 12 leads; tracing only, without interpretation and report				
N					
Facility Name: CITICARE MEDICAL CENTER LLC Telephone No: 047700948 Physician's Name: AISHA 			Patient Registered by: CITICARE MEDICAL CENTER LLC Date and Time: 28-05-2025  Card Holder's Signature:		
Physician's Stamp & Signature: Dr. Aisha Umer Physician- General Practitioner DHA- 40131439-002 CITICARE MEDICAL CENTER DUBAI - U.A.E			"I hereby authorize any MedNet personnel to access my medical file"		

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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