



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-Jun-2025

Clinic Name: CITICARE MEDICAL CENTER LLC Emirates: 784-1997-8982880-5

Card Holder's Name: Lamarana Bah Age: 27Y - 11M - 28D Sex: Male

Card Holder's Tel No: Mobile No: 0522838139

Ins Card No: I019-010-119614751-01 Valid Upto: 7/6/2025

Company FMC Standard Employee No: _____ Nationality: Sierra Leonean



Clinical Details: Temp 36

B.P. 114

Pulse: 75

Signs & Symptoms: RISK FOR FALL

Date of Onset Illness :

☐ Emergency ☐ Work related ☐ New visit ☐ Follow up visit

Diagnosis: R19.7 - Diarrhea, unspecified, R52 - Pain, unspecified, E86.0 - Dehydration, R42 - Dizziness and giddiness, A09 - Infectious gastroenteritis and colitis, unspecified

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

0439-152905-1001, LACTATED RINGERS INJECTION USP , Pharmacy, 0002-116601-1001, (METRONIDAZOLE : 500 MG/100ML) SOLUTION FOR INFUSION , Pharmacy, 96360, HYDRATION IV INFUSION INIT , Co.Pay, 0125-122107-1022, DEXAMETHASONE SODIUM PHOSPHATE , Pharmacy, 96372, THER/PROPH/DIAG INJ SC/IM , Co.Pay, 96365, IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST TO 1 HR , Co.Pay, 9, Consultation Gp , General Consultation

Doctor's Name: DR Amaizah

signature with seal:

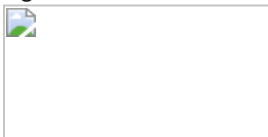
Dr. Amaizah Ishtiaq
General Practitioner
DHA: 98486553-001
CITICARE MEDICAL CENTER
DUBAI - U.A.E

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 02-Jun-2025



Pharmaceuticals (to be filled by treating doctor only)