

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: 03-Jun-2025

Clinic Name: CITICARE MEDICAL CENTER LLC Emirates: 999-9999-9999999-9

Card Holder's Name: SUSHAT KUMAR Age: 26Y - 6M - 3D Sex: Male

Card Holder's Tel No: Mobile No: 0563233076
Ins Card No: 1005-010-122774631-01 Valid Upto: 30/9/2025

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



Clinical Details:	Temp <mark>36.6</mark>	B.P.120	Pulse. <mark>84</mark>	
Signs & Symptoms: ris	c of fall			
Date of Onset Illness:		○ Emergency ○ Wo	ork related O New visit O Follow up visit	
Diagnosis: S81.811A -	aceration w/o foreign body, right	lower leg. init encntr. R52 - Pain, ur	nspecified	

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

12001, RPR S/N/AX/GEN/TRNK 2.5CM/<, Co.Pay,9, Consultation Gp, General Consultation

Contradlerein

Dr .Frahan Ilyas Malik Physician-General Practitioner DHA-06441782-001 CITICARE MEDICAL CENTER DUBAI U.A.E

Doctor's Name: Dr.Farhan lyas signature with seal:

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 03-Jun-2025



Pharmaceuticals (to be filled by treating doctor only)

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Medicine	Dose	Duration	Quantity	Price			
(AMOXICILLIN : 500 MG) (CLAVULANIC ACID : 125 MG) FILM COATED TABLETS	FILM COATED TABLETS (20S, FOIL STRIP)	7	14	0.0000			
(DICLOFENAC POTASSIUM : 50 MG) FILM COATED TABLETS	FILM COATED TABLETS (20S, BLISTER PACK)	7	14	1.0800			
(IBUPROFEN : 400 MG) FILM COATED TABLETS	FILM COATED TABLETS (30S, BLISTER PACK)	7	14	0.5500			