

ANNEXURE V

FMCNETWORK 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: 25-Jun-2025

Clinic Name: CITICARE MEDICAL CENTER LLC Emirates: 784-1996-8340056-0
Card Holder's Name: SAWARAN CHAND Age: 28Y - 10M - 24D Sex: Female
Card Holder's Tel No: 971589522956 Mobile No: 0589522956
Ins Card No: 1005-010-117490735-01 Valid Upto: 30/9/2025
Company Name: FMC Standard Network Employee No: ________Nationality: Indian



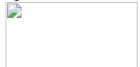
Clinical Details:	Temp36.7	B.P.117	Pulse. <mark>86</mark>	
Signs & Symptoms: risk of f	fall		○ Work related ○ New visit ○ Follow up visit	
Date of Onset Illness:		○ Emergency ○ V		
Diagnosis: K29.00 - Acute g	gastritis without bleeding, R12	2 - Heartburn, R14.3 - Flatulence		
Management plan (Service	ces inside the clinic including	injections and investigations)		
9, Consultation Gp , Genera	al Consultation			

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 25-Jun-2025



Pharmaceuticals (to be filled by treating doctor only)

Medicine	Dose	Duration	Quantity	Price
(CALCIUM CARBONATE : 80 MG/5ML) (SODIUM BICARBONATE : 133.5 MG/5ML) (SODIUM ALGINATE : 250 MG/5ML) SUSPENSION	SUSPENSION (200ML, BOTTLE)	7	1	0.0000
(ESOMEPRAZOLE (AS MAGNESIUM) : 20 MG) CAPSULES (HARD GELATIN)	CAPSULES (HARD GELATIN) (14S, BLISTER)	7	14	2.2900
(SIMETHICONE : 42MG) CHEWABLE TABLETS	CHEWABLE TABLETS (30S, BLISTER PACK)	5	5	0.0000