

ANNEXURE V

F M C NETWORK UAE

 $\begin{array}{l} {\rm P.\ O.\ BOX:\ 50430,\ DUBAI,\ Tel-04\ 3871900,\ Fax-04\ 3977842}\\ {\rm Email-approval@fmchealthcare.ae} & {\rm Helpline\ Number:\ 600-565691} \end{array}$

Medical Expenses Claim form

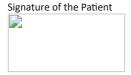
Card Holder's Nam Card Holder's Tel N Ins Card No:	ne: SWASTHIK ALVA SATHISH AL	Valid Upto: 7/6/2026		
Clinical Details:	Temp36.6	B.P.130	Pulse. 58	

Signs & Symptoms: risk of fall							
Date of Onset Illness :	ate of Onset Illness : Emergency O Work related New visit Follow up visit						
Diagnosis: M79.672 - Pain in left foot, R22.42 - I	ocalized swelling, mass and lump, left lower limb, T14.90XA - Injury, unspecified, ir	nitial					
encounter, M21.42 - Flat foot [pes planus] (acqu	red), left foot						
Management plan (Services inside the clinic in	cluding injections and investigations)						
0005-149902-1021, CLOFEN -(DICLOFENAC SOC	UM: 75 MG/3ML) SOLUTION FOR INJECTION, Pharmacy,0125-122107-1022,						
DEXAMETHASONE SODIUM PHOSPHATE-(DEXA	METHASONE: 4 MG/ML) SOLUTION FOR INJECTION, Pharmacy,96372, THER/PROP	'H/DIAG					
INJ SC/IM , Co.Pay							
Doctor's Name: KEERTHANA	يرثانا راني باديبورايل ثارا Dr. Keerthana Rani Padippurayil T General Practitioner License No.: 37864046- د Signature with seal:	Thara -001					

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.

Date 12-Jul-2025



Pharmaceuticals (to be filled by treating doctor only)

Medicine	Dose	Duration	Quantity	Price
(IBUPROFEN (AS L-ARGININE SALT) : 400 MG) FILM COATED TABLETS	FILM COATED TABLETS (12S, BLISTER)	3	6	0.0000
(SERRAPEPTASE : 10 MG) TABLETS	TABLETS (30S, BLISTER)	2	4	0.0000