

Administrative

MEDICAL CLAIM FORM

Claim Ref:

Patient Name : PRAKASH BAHADUR RANABHAT
Card No : I040-029-118854865-01
Policy Holder : PRAKASH BAHADUR RANABHAT
Payer Name : UNION INSURANCE COMPANY
TPA : E CARE - Blue Network
Validity : 02-01-2025 To 01-01-2026
Gender : Male
Date Of Birth : 20-Feb-1986
Patient's Tel No : 0525258101

Service Date : 03-Aug-2025

Network :
: Green

Health Provider : CITICARE MEDICAL CENTER LLC

Direct Access SP - YES
Doctor's Name : DR Amaizah

Co-Insurance :

CONSULTATION	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
10% max	NIL	NIL	NIL LIMIT	NIL	10%	NA

Remarks :
☐ Acute ☐ Pre-existing and chronic ☐ Maternity

Chief Complaints : PC : SEVRE PAIN IN HEEL AND ANKLE

Duration :
Vitals: Temp : 36.1 Bp :120 Pulse :64 Resp :22

Clinical Findings:
Diagnosis: R52 - Pain, unspecified,M13.121 - Monoarthritis, not elsewhere classified, right elbow,

Date of Onset : 03/42/2025

Requested Investigations: 86140, C REACTIVE PROTEIN,0125-122107-1022, DEXAMETHASONE SODIUM PHOSPHATE,0005-149902-1021, CLOFEN ,80061, LIPID PANEL,84550, URIC ACID BLOOD,96372, THER/PROPH/DIAG INJ SC/IM,82947, GLUCOSE QUANTITATIVE BLOOD XCPT REAGENT STRIP,85025, BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC COUNT

**Estimated :
Cost**
Prescriptions: 0027-142201-0832 - (DICLOFENAC POTASSIUM : 50 MG) POWDER FOR SOLUTION,0186-143701-0062 - (CELECOXIB : 200 MG) CAPSULES,

**Estimated :
Cost**
MEDICAL PRACTITIONER DECLARATION :

I declare that I am the patient's medical practitioner and that the particulars given are to the best of my knowledge true and correct.

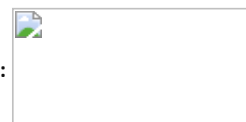
PATIENT'S DECLARATION :

I hereby authorize any Healthcare provider, Insurer, Employer or other organization to release any information regarding my medical condition & history for purpose of determining insurance benefits.

Dr's Name : DR Amaizah

Stamp :

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

**Patient 's
signature{Parent :
if minor}**

Date : 03-Aug-2025

Signature :
Date : 03-Aug-2025