MedNet Global Healthcare Solutions L.L.C.

Paid-up capital AED 12,800,000

mednet
The preferred choice for healthcare solutions

MEMBER DETAILS				BENEFIT DETAILS
MEMBER NAME	: NOUR SHEBI MAHMOUD SHEBI ABDEL HAMID ELSHEHABY			Please follow benefits list for other deductible/copayment details
INSURANCE PLAN	: Dubai Insurance_Swiss Life			
DHA MEMBER ID	:			
EID	: 784-2022-3458447-6	DOB	: 13-12-2022	
CARD NUMBER	: 097111910409631002	GENDER	: Male	
MOBILE NUMBER	: 0527043687	START DATE	: 07-08-25	
MEMBER NETWORK	: Silver Premium	END DATE	: 07-08-25	

PRE-APPROVAL PROTOCOL:Please follow standard MedNet approval protocols

SUBJECTIVE

C/O:

congested cough with mucus - 2 weeks , worsening

runny nose

fever

vaccinated upto date

started nursery 2 weeks back, exposure significant

on exam:

throat: hyperemic, congested

chest: no work of breathing , harsh vesicular breathing with creptitations

heart sounds normal

abdomen soft non tender

OBJECTIVE

Temp: 36.4 °C RR : 22 bpm PR : 70 BP : 00 bpm Weight : 20 kg

P L A N **PHARMACEUTICALS**

Code	Generic	Dosage	Duration	Instructions
1845-505006-2481	(ARNICA MONTANA : 1.111 G/100 G) SYRUP (SUGAR FREE)	SYRUP (SUGAR FREE) (100ML, PLASTIC BOTTLE)	5	Take 5ML 3 Time(s) per Day For 5 Day(s) after meal
6396-925801-3851	(SEA WATER (SODIUM CHLORIDE) : 0.9% (28 ML / 100 ML)) NASAL SPRAY	NASAL SPRAY (100ML, SPRAY BOTTLE)	7	Take 3ML 3 Time(s) per Day For 7 Day(s) before meal, put 3 ml in nebuliser
1086-123702-1381	(CETIRIZINE HCL : 1 MG/ML) SOLUTION (ORAL)	SOLUTION (ORAL) (75ML, BOTTLE)	7	Take 5ML 1 Time(s) per Day For 7 Day(s) evening

P	**DIAGNOSTIC PROCEDURES**
L	**Diagonosis:**J06.9 - Acute upper respiratory infection, unspecified, J30.9 - Allergic rhinitis, unspecified, R05 - Cough
A	**Treatments:**85025, Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count,86141, C-reactive protein; high sensitivity (hsCRP),82306, Vitamin D; 25 hydroxy, includes fraction(s), if performed,82728, Ferritin,83540, Iron,9, Consultation GP
N	

Facility Name:CITICARE MEDICAL CENTER LLC

Telephone No: 047700948

Physician's Name: Dr Bushra

Physician's Stamp &Signature:

Dr. Bushra Mufti
General practitioner
DHA: 75646242-001
CITICARE MEDICAL CENTER
DUBAI - U.A.E

Patient Registered by:CITICARE MEDICAL CENTER LLC

Date and Time: 07-08-2025

Card Holder's Signature:

"I hereby authorize any MedNet personnel to access my medical file"

DISCLAIMER:

ALL SERVICES OUTSIDE PRE-APPROVAL PROTOCOL ARE SUBJECT TO RESTROSPECTIVE MEDICAL EVALUATION UPON CLAIM SUBMISSION. CLAIMS PROCESSING IS SUBJECT TO CONTRACTUAL TARIFF.

MedNet Claims Center: 600 546002 (24-hour hotline), Fax: 800 4883

E-mail: mcc@mednet.com