

Administrative

MEDICAL CLAIM FORM

Claim Ref:

Patient Name : FUSSEL LUGO
 Card No : I017-029-117079201-02
 Policy Holder : FUSSEL LUGO

Service Date : 07-Nov-2023
 Health Provider : Irham Medical Center Arjan
 Doctor's Name : Sajid Sanaullah

Network : Green
 Direct Access SP - YES

Payer Name : ABU DHABI NATIONAL
 : INSURANCE COMPANY-ADNIC

Co-Insurance :

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

TPA : E CARE - Green Network
 Validity : 01-10-2023 To 30-09-2024
 Gender : Male
 Date Of Birth : 03-Apr-1980
 Patient's Tel No : 0527229677

Remarks :

☐ Acute ☐ Pre-existing and chronic ☐ Maternity

Chief Complaints : severe abdominal pain and vomiting since two weeks back started 15/10/2023 severe flatus Duration:

Vitals:Temp : 36.4 Bp :110 Pulse :60 Resp :22

Clinical Findings:

Diagnosis: K29.00 - Acute gastritis without bleeding,R14.3 - Flatulence,R11.2 - Nausea with vomiting, unspecified,K21.00 - Gastro-esophageal reflux dis with esophagitis, without bleed, Date of Onset : 07/42/2023

Requested Investigations: 0102-100104-1001, SODIUM CHLORIDE & DEXTROSE B.P.,0005-242802-0781, PANTONIX 40MG I.V.,0005-150403-1021, PREMOSAN ,96374, THER/PROPH/DIAG INJ IV Estimated : Cost

Prescriptions: 6506-525701-1171 - (SIMETHICONE : 80 MG) (CHARCOAL, ACTIVATED : 250 MG) TABLETS,0188-232401-0392 - (ESOMEPRAZOLE : 40 MG) FILM COATED TABLETS,0031-168201-0391 - (DOMPERIDONE : 10 MG) FILM COATED TABLETS, 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 :

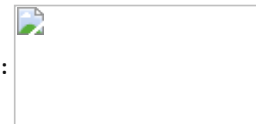
I hereby authorize any Healthcare provider, Insurer, Employer or other organization to release any information regarding my medical condition & history for purpose of determining insurance benefits.

Dr's Name : Sajid Sanaullah

Stamp :



Patient's signature{Parent : if minor}



07-
Date : Nov-
2023

Signature :

Date : 07-Nov-2023