Administrative

MEDICAL CLAIM FORM

Claim Ref:

Patient Name	: YOUSSEF FEDDA	**Service Date**	:09-Nov-2023	**Network**	: Green
Card No	: I017-029-114545544-01	**Health Provider**	:Irham Medical Center Arjan		**Direct Access SP - YES**
Policy Holder	: YOUSSEF FEDDA	**Doctor's Name**	:Dr.Rashmi Mosale		
Payer Name	: ABU DHABI NATIONAL INSURANCE COMPANY-ADNIC	**Co-Insurance**	:		
TPA	: E CARE - Blue Network	**Remarks**	:		
Validity	: 01-01-1900 To 11-05-2024				
Gender	: Male				
Date Of Birth	: 18-Jan-1989				
Patient's Tel No	: 971554920486				

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

☐ **Acute** ☐ **Pre-existing and chronic** ☐ **Maternity**

Chief Complaints : fever , headache and bodyache 2 days cough and cold present O?e- febrile, looks ill throat congested generalised weakness present adviced rest for a day **Duration:**

Vitals: Temp : 37.5 Bp :116 Pulse :82 Resp :22

Clinical Findings:

Diagnosis: J06.9 - Acute upper respiratory infection, unspecified,R05 - Cough,R50.9 - Fever, unspecified,R53.1 - Weakness,K29.00 - Acute gastritis without bleeding, **Date of Onset** :09/35/2023

Estimated Cost :

Requested Investigations: 9, Consultation GP

Prescriptions: 0005-116702-2481 - (DIPHENHYDRAMINE : 12.5 MG/5ML) SYRUP (SUGAR FREE),0097-142201-0391 - (DICLOFENAC POTASSIUM : 50 MG) FILM COATED TABLETS,0207-632002-1751 - (PANTOPRAZOLE (AS SODIUM SESQUIHYDRATE) : 40 MG) GASTRO-RESISTANT TABLETS,0252-185801-0391 - (DIPHENHYDRAMINE : 25 MG) (PARACETAMOL : 500 MG) (PSEUDOEPHEDRINE : 30 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 : Dr.Rashmi Mosale

Stamp :

Dr. Rashmi Keshava Murthy Mosale
General Practitioner
DHA No: 00230994-003
PESHAWAR MEDICAL CENTER LLC
DUBAI - U.A.E.

Patient 's signature{Parent : if minor}

Date : 09-Nov-2023

Signature :

Date : 09-Nov-2023