

Administrative

Patient Name

: ARIJ BEN ZINEB

Card No

: I017-029-119290084-01

Policy Holder

: ARIJ BEN ZINEB

Payer Name

: ABU DHABI NATIONAL
INSURANCE COMPANY-
ADNIC

TPA

: E CARE - Blue Network

Validity

: 01-01-1900 To 11-04-2024

Gender

: Female

Date Of Birth

: 14-Nov-1994

Patient's Tel No

: 971581248311

Service Date

:20-Feb-2024

Health Provider

:Irham Medical Center Arjan

Doctor's Name

:Sajid Sanaullah

Co-Insurance

Remarks

:

Network

: Green

Direct Access SP

- YES

☐ Acute

☐ Pre-existing and chronic

☐ Maternity

Chief Complaints

: Severe vomiting and heart burn in stomach and esophagitis started 10/1/2024

Duration:

Vitals

:Temp : 36.6 Bp :110 Pulse :82 Resp :18

Clinical Findings:

Diagnosis:

K29.70 - Gastritis, unspecified, without bleeding,R11.2 - Nausea with vomiting, unspecified,K21.00 - Gastro-esophageal reflux dis with esophagitis, without bleed,K59.00 - Constipation, unspecified,

Date of Onset

:20/35/2024

Requested Investigations:

0102-100104-1001, SODIUM CHLORIDE & DEXTROSE B.P.,0005-150403-1021, PREMOSAN ,0005-242802-0781, PANTONIX 40MG I.V.,96360, HYDRATION IV INFUSION INIT,96374, THER/PROPH/DIAG INJ IV PUSH,87338, IAAD EIA HPYLORI STOOL,9, Consultation GP

Estimated Cost

Prescriptions:

1291-170801-1161 - (LACTULOSE : 66.7%) SYRUP,0415-168207-0391 - (DOMPERIDONE :10 MG) FILM COATED TABLETS,0669-242802-3261 - (PANTOPRAZOLE (AS SODIUM) : 40 MG) DELAYED RELEASE TABLET,0435-189502-1111 - (SODIUM ALGINATE : 500 MG/5ML) (POTASSIUM BICARBONATE : 100 MG/5ML) SUSPENSION,

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.

Dr's Name

: Sajid Sanaullah

Signature :



Stamp :



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.

Patient 's signature{Parent : if minor}



Date : Feb-2024

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https://irhamc.visionsoftwares.ae/mr_ecare_claim_print.aspx?appId=46378&patId=52074

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