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Support Tickets

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Users

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Lab

Patient Registra

Registration I

0971116202452436

Clinic Invoice

MORE



Mobile number*

United Arab Emirates (+

502137718

Email

Email Address

Identification* ☐ No Emirates ID

Emirates ID

XXX-XXXX-XXXXXXXX-X

Select Doctor *

RESET

SAVE & QUEUE

PRINT CLAIM FORM

Please follow your Network List for the services to be availed.

PRINT BENEFITS

SAVE BENEFITS AS PDF

Patient Data



First Name MAZEN

Last Name ZAKI

Date of Birth 22 September 1982

Gender Male

Start Date 22 February 2023

Expiry Date 21 February 2024

Member Network Green

Policy Holder ZAKI MAZEN

Policy Issued From Dubai-DHA

Member Benefits

Payer's Name ADAMJEE INSURANCE