| History | | | Cancel Save | e | Out P | atient 🗸 | 1011-010-1132 | 265615-0 | 1 Sea | arch |
|--|--|---|-----------------------------|-----------------------|--|-------------------|---------------|----------|-------|----------|
| | Patient Informat | ion | | | | | | | | |
| Insurance Company | AL SAGR NATIONAL INS CO. (PSC) (Plan Name: I Enhanced) | | - | Policy Deductibles | | Deductible Amount | | | t(%) | <u> </u> |
| Member ID- CardNo | I011-010-11326 | 1 | Benefit&Cove | rage | Diagnostic & Treatment Services For Dental & Gum | | 0.00 | 20.00 | | |
| Member Name | er Name MUHAMMAD HAROON | | | | | Gp | a dam | 25.00 | 20.00 | |
| DOB/Gender | 04 Sep 1992 / M | | | | Gp Maternity | | 0.00 | 10.00 | | |
| Nationality | PAKISTAN | | | | Hearing & Vision Aids | | 0.00 | 20.00 | | |
| Valid Till | 01 Dec 2022 to 30 Nov 2023 | | | | | Lab | | 0.00 | 0.00 | |
| Status | MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES | | | | - | Medicine | | 0.00 | 0.00 | • |
| Emirates ID | 784-1992-97650 | 32-9 | | | | | | | | |
| Claim Type New Visit Follow Up Select Clai | | | | Catagory Complaints * | | | | | | 7 |
| Emirates ID * | Emirates ID, No | nirates ID, Not available? select rea ✔ | | | | | | _ _ | | |
| Patient | Temp * | | °F | | Symptoms * | | | | | |
| Duration of | | - | | | Allergie | s(If | | | 1 | |
| illness * | Day(s) | ~ | BPS/BPD * | | mmHg | Any) | | | | _ |
| Pulse * /min | | Claim/Inv.No | | | Sign | | | | | |
| Туре | Type Encounter Start Encounter | | | | | t Time | End Date | | | |
| 1 No Bed ➤ Elective ➤ Discharged | | | d with appro 			 29/03/2023 | | | 33 29/03/2023 | | 10:33 | | |
| Sl# Type Code Diagnosis Description | | | | | | | | | | |
| 1 Princi V | | | | | | | | | | |
| Sl# Type Code NameOty Gross.AmtPt.ShareStart Clinician | | | | | | | | | | |
| | | | | | | | | | | |
| 9 | 0.00 | 0.00 | | | | ~ (| 9 | \dashv | | |
| Do you want Referal/Updation CPT(Yes/No)? | | | | | | | | | | |
| Upload Reports Choose File No file chosen Upload File | | | | | | | | | | |