Cancel Save

Out Patient V Enter Card Number/Emira Search

Patient Information							
Insurance Company	AL BUHAIRA NATIONAL INSURANCE COMPANY FMC TM (Plan Name: Dha Enhanced)						
Member ID- CardNo	I020-010-118078410-02						
Member Name	Jashwanth Kattu Narsareddy Kattu						
DOB/Gender	08 Jun 1999 / Male						
Nationality	INDIA						
Valid Till	28 Apr 2023 to 27 Apr 2024						
Status	MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES						
Emirates ID	784-1999-9502752-3						

Policy Deductibles Benefit&Coverage

Deductible	Amount	(%)	<u> </u>
Diagnostic & Treatment Services For Dental & Gum	0.00	20.00	
Gp	25.00	20.00	
Gp Maternity	0.00	10.00	
Hearing & Vision Aids	0.00	20.00	
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Stat	.u3	FACILI	TY FOR	MEDICAL	SERVICES				
Emi	rates ID	784-1	999-95	02752-3					
Claim Type New Visit Follow Up Select Claim Catagory				agory	Complaints *				
Emirates ID *				Emirates ID, Not available? select rea ✔				·	
Patient Contact No *		Temp *					Symptoms *		
	act No * ^L ition of _{- E}		_		_ 1			Allergies(If	
illnes	1		Day(s)	~	BPS/BPD	k	mmHg	Any)	
Pulse	_		/min		Claim/Inv.]	No		Sign	
ISI# L	Encounter Type	Encounter	Start	Encounte	er End	Start Date	Start Time	End Date	End Time
1	No Bed ✓	Elective		✔ Discharg	ed with app 🗸	14/06/2023	13:32	14/06/2023	13:32
SI# Type Code Diagnosis Description									
	Princ 🗸 🗌								9
S1#	Туре	Code		Vame Qty	Gross AmtP	t.Share Start	Clinician		
$\overline{}$	CPT	~	<u>+</u>	1 🗸		14/06/2			v (3)
					0.00	0.00			
Do you want Referal/Updation CPT(Yes/No)?									
Upload Reports Choose File No file chosen Upload File									