			Cano	elSave		Out P	atient 🕶	1017-010-119	988672-0	01 Search	
	Patient Inform	ation									
Insurance	ABU DHABI NATIONAL INSURANCE										
Company	COMPANY (Plan Name: Dha Enhanced)			Policy Deductible	es D	Deductible				Amount(%)	
Member ID- CardNo	1017-010-119988672-01			Benefit&Coverag	וטן	Diagnostic & Treatment Services For Dental & Gum				20.00	
Member Name	REUBEN EMMANUEL SAULO				<u> </u>	Gp Gp Maternity Hearing & Vision Aids			15.00	10.00	
DOB/Gender	04 Feb 1992 / Male								0.00	10.00	
Nationality	PHILIPPINES					earing & \ ab	Vision Aids	5	0.00	0.00	
Valid Till	20 Oct 2023 to 30 Sep 2024					Medicine			0.00	0.00	
Status	MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES				M	Medicine-Maternity				10.00	
Emirates ID	784-1992-05351										
Claim Type Ne	w Visit © Follow Up 🤇	Selec	ct Claim C	atagory	Con	nplaints *					
Emirates ID *		Emirates ID, N	Not available	? select re≀ ❤	_ COII	іріаннз					
Patient Contact		Temp *		°F	•	nptoms *					
No * L	Allergies(If										
illness *	Day(s)	▼ BPS/BPD *		mmHg	Any	,					
Pulse *	/min	Claim/Inv.N	о		Sign	1					
Sl# Encounter Type	Enc	counter Start E	Encounter I	End Star	t Date	Star	t Time	End Date	End	Time	
1 No Bed + No eme	ergency room 🗸 Ele	ective 🗸	Discharged	with apprc ➤ 20/0)2/2024	14:0)8	20/02/2024	14:0)8	
Sl# Type Code Diagnosis Description											
1 Principa ➤											
Sl# Type	Code Name		Qty G	ross.AmtPt.Sha	reStar	t (Clinician				
1 CPT ▼			1 🗸		20/0	2/2024	Select		~ (•	
				0.00 0.	00						
☐Do you want Referal/Updation CPT(Yes/No)?	Remarks										
Upload Choose File No file chosen Upload File Reports											