GSM Medical Center Muaded Almazrouei Bdlg -1st floor - Al Satwa Rd - near Satwa Roundabout - Al Satwa - Dubai

Tel: 04-8831002,04-8831003

Fax: 048831004



PRESCRIPTION

Patient Name	:	Glenn Jhovy Torres Fontanilla	AGE	:	25 YEARS
Address	:	CLOCK PLAZA BUILDING, AL RIGGA	Mobile	:	+971 54 308 9657
Medical Record #	:	11768			
Principal Diagnosis	:	ACUTE UPPER RESPIRATORY INFECTION JO6.9			
Secondary Diagnosis	:				
Additional Remarks	:				
Live Meeting	:				

GENERIC/DOSE/FORM STRENGTH INSTRUCTIONS		INSTRUCTIONS	QUANTITY	ROUTE OF ADMIN
AUGMENTIN/TABLET	AUGMENTIN/TABLET 625MG 1TABLET, 2TIMES/DAY OR 5 DAYS		10	РО
ARTIZ/TABLET	ARTIZ/TABLET 10MG 1TABLET, 1TIME/DAY FOR 7 DAYS, BEFORE BEDTIME		7	РО
MAXIGESIC/TABLET	MAXIGESIC/TABLET 500MG/150MG 2TABLETS, 2TIMES/DAY FOR 5 DAYS		20	РО
CHLORASEPTIC LOZENGES	6MG/10MG	TAKE 1 UNIT WHENEVER THROAT PAIN, MAXIMUM 4/DAY	20	PO

Doctor Name License Number Date Signature & Stamp

Dr. Supriya Anand 25580547-001 07-MARCH-2023

Con Supriya Anand
General Practitioner
Dia LLC NO. 2550547-001
GSM MEDICAL CENTER LLC
Mote: (58 9261206 TEL: 04 2399313





Sick Leave Certificate شهادة إجازة مرضية

اريخ:	07-03-2023	Date:		
A V Table (A A A A A A A A A A A A A A A A A A A	计 是是是一个人,但是是是是一种人。	Patient Information		
سم المريض	Glenn Jhovy Torres Fontanilla	Patient Name		
قم ملف المريض	11768	Patient File No.		
وع الزيارة	Outpatient	Visit Type		
اريخ الدخول	N/A	Date of Admission		
اريخ الخروج	N/A	Date of Discharge		
قم بطاقة الهوية / رقم جواز السفر	N/A / 784-1997-8631461-9	Patient Passport No/Emirates ID		
تهة العمل	Private	Employer		
سم جهة العمل	WWICS Immigration Services LLC	Employer Name		
		Sick Leave Information		
سم ورقم التشخيص	Acute upper respiratory infection (J06.9) (J06.9)	Diagnosis - ICD Code		
إجازة المرضية من ، إلى	07-03-2023, 09-03-2023	Sick Leave From, To		
دة الإجازة المرضية	3	Sick Leave Period		
لاحظات الطبيب		hysician Remarks		
		Physician Information		
م الطبيب	Supriya Anand	Physician Name		
فصص الطبيب	General Practitioner-General Practice	Physician Title		
يم المنشأة	Gsm Medical Center LLC	acility Name		
قيع الطبيب	· Dr. Supriya Anand	Physician Signature		
تم الطبيب	General Practitioner DHA LIC. NO. 25580547-001	nysician Stamp		
تم التعبيب :حظات: - يتم إصدار هذه الشهادة إلكترونيًا ولا تتطلب ختم الهيئة أو الد	GSM MEDICAL CENTER L.L.C Mob. 058 9261206 TEL: 04 2399313	emarks: - This certificate is electronically issued and does not require a DI DHA for manual attestation.		

CP_9.3 F-06

- For the purpose of verification of this certificate, please visit DHA Website: https://services.dha.gov.ae/sheryan/wps/portal/home/services-professional/online-verification and enter the Security code & Certificate No. mentioned below.



verification وإدخال رمز و رقم الشهادة المذكورين أدناه.

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