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        | : | Dalyn Lacson                  | AGE    | : | 26 YEARS         |
|---------------------|---|-------------------------------|--------|---|------------------|
| Address             | : | al abbas , room 601 AL ABBAS  | Mobile | : | +971 54 311 2577 |
| Medical Record #    | : |                               |        |   |                  |
| Principal Diagnosis | : | 12682                         |        |   |                  |
| Secondary Diagnosis | : | URINARY TRACT INFECTION N39.0 |        |   |                  |
| Additional Remarks  | : | HYDRATE WELL                  |        |   |                  |

| GENERIC/DOSE/FORM | STRENGTH | INSTRUCTIONS  | QUANTITY | ROUTE OF<br>ADMIN |
|-------------------|----------|---|----------|-------------------|
| MACROBID/TABLET   | 100MG    | 1 TABLET, 2 TIMES/DAY FOR 3<br>DAYS                           | 6        | PO                |
| PANADOL/TABLET    | 500MG    | 1 TABLET, 3 TIMES/DAY FOR 5<br>DAYS                           | 15       | PO                |
| ALKA-UR SACHETS   | 4G       | 1 SACHET, MIX IN 200ML OF<br>WATER, 2 TIMES/DAY FOR 5<br>DAYS | 10       | PO                |
|                   |          |   |          |                   |
|                   |          |   |          |                   |
|                   |          |   |          |                   |

Doctor Name License Number Date Signature & Stamp

Dr. Supriya Anand 25580547-001 01-APRIL-2023







## **Sick Leave Certificate** شهادة إجازة مرضية

01-04-2023 Date: تاريخ:

| Patient Information             |                              |                                   |  |  |
|---------------------------------|------------------------------|-----------------------------------|--|--|
| Patient Name                    | Dalyn Ampongan Lacson        | اسم المريض                        |  |  |
| Patient File No.                | 12682                        | رقم ملف المريض                    |  |  |
| Visit Type                      | Outpatient                   | نوع الزيارة                       |  |  |
| Date of Admission               | N/A                          | تاريخ الدخول                      |  |  |
| Date of Discharge               | N/A                          | تاريخ الخروج                      |  |  |
| Patient Passport No/Emirates ID | N/A / 784-1997-7274312-8     | رقم بطاقة الهوية / رقم جواز السفر |  |  |
| Employer                        | Private                      | جهة العمل                         |  |  |
| Employer Name                   | CUISINERONG PINOY Restaurant | إسم جهة العمل                     |  |  |

| Sick Leave Information |   |                          |
|------------------------|---|--------------------------|
| Diagnosis - ICD Code   | Urinary tract infection, site not specified (N39.0) (N39.0) | اسم ورقم التشخيص         |
| Sick Leave From, To    | 01-04-2023, 03-04-2023                                      | الإجازة المرضية من , إلى |
| Sick Leave Period      | 3   | مدة الإجازة المرضية      |
| Physician Remarks      | Leave is valid from 31.03.2023 to 03.04.2023                | ملاحظات الطبيب           |

| Physician Information |                                       |             |
|-----------------------|---------------------------------------|-------------|
| Physician Name        | Supriya Anand                         | اسم الطبيب  |
| Physician Title       | General Practitioner-General Practice | تخصص الطبيب |
| Facility Name         | Gsm Medical Center LLC                | اسم المنشأة |

| Physician Signature | And Annual Annua | توقيع الطبيب |
|---------------------|--|--------------|
| Physician Stamp     | CAMBAILTOCA CONTRILLAC AMAGE GOS (SELECTION TILL (6.2299973)   | ختم الطبيب   |

## Remarks:

- This certificate is electronically issued and does not require a DHA stamp or attending DHA for manual attestation.
- For the purpose of verification of this certificate, please visit DHA Website: https://services.dha.gov.ae/sheryan/wps/portal/home/services-professional/onlineverification and enter the Security code & Certificate No. mentioned below.

## ملاحظات:

- يتم إصدار هذه الشهادة إلكترونيًا ولا تتطلب ختم الهيئة أو الحضور لتصديقها
- لغرض التحقق من هذه الشهادة ، يرجى زيارة موقع هيئة الصحة بدبي: -https://services.dha.gov.ae/sheryan/wps/portal/home/services-professional/online verification وإدخال رمز و رقم الشهادة المذكورين أدناه.

PIN: 6674

