

## Electronic Prescription Reference

- \* This document can't be used for dispensing inside the emirate of Dubai.
- \* This document can be used for dispensing outside the emirate of Dubai with the proper stamps and signatures.

Details					
ID:	Reference Number	Prescription Date:	Plan:	Member ID:	Clinician ID:
DHA-F-0000802-INS012-20230323135442	89030933	23/03/2023	OIC - Oman Insurance Company	OIG/ME-30476/E/9759138	DHA-P-0219430
Denial:		Comments:			

Diagnoses:	
Type	Diagnosis
Principal	J02.9 - Acute pharyngitis, unspecified
Secondary	R50.9 - Fever, unspecified
Secondary	R05 - Cough
Secondary	J30.9 - Allergic rhinitis, unspecified
Secondary	R09.81 - Nasal congestion
Secondary	R07.0 - Pain in throat
Showing 1 to 6 of 6 entries	

Drugs:										
ID	Drug	Status	Denial	Duration	Qty	Net	Patient Share	Instructions	ROA	Refills
14367099	0205-123701-0391 - ZYRTEC, 20'S, 10 MG, FILM COATED TABLETS, UCB	Posted	-	10	10.00	0.00	0.00	Take 1 TABLET(s), 1 Time(s) per Day For 10 Day(s).at bedtime	ORAL	0
14367100	0027-128802-2021 - OTRIVIN (ADULT), 10ML, 0.1%, NASAL DROPS, NOVARTIS	Posted	-	4	1.00	0.00	0.00	2 drops in each nostril for 4 days but not more than 4 days	NASAL	0
14367101	0027-265802-1161 - SINECOD, 200ML, 0.15% W/V, SYRUP, NOVARTIS	Posted	-	5	1.00	0.00	0.00	Take 10ml three times a day for 5 days	ORAL	0
14367102	0249-125803-1742 - BETADINE, 250ML, 10%, GARGLE, MUNDIPHARMA	Posted	-	7	1.00	0.00	0.00	gargle 2 times a day and spit it out	LOCAL ORAL	0
14367103	0137-127402-1451 - AZOMAX 250MG, 6'S, 250 MG, CAPSULES (HARD GELATIN), SAUDI ARABIAN JAPANESE PHARMACEUTICAL CO. LTD (SAJA)	Posted	-	3	6.00	0.00	0.00	Take 1 CAPSULE(s) (s), 2 Time(s) per Day For 3 Day(s).	ORAL	0
Total:						0.00	0.00			

Showing 1 to 5 of 5 entries

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**Dr. Rabbia Haris**  
**GENERAL PRACTICE**  
 DHA LIC. NO.: 00219430-008  
 GSM MEDICAL CENTER L.L.C  
 European Business Center, G29, D/P-1  
 TEL: 04-8831002 & 04-8831003/2

**GSM MEDICAL CENTER**  
**DIP 1, GREEN COMMUNITY, EUROPEAN**  
**BUSSINESS CENTER**  
**GROUND FLOOR SHOP NO: 29**  
**Tel : 04-8831002, 04-8831003 Fax:**  
**048831004**



**Date : 23-Mar-2023**

## **CERTIFICATE**

**Name : melani sacriz**

**Age : 16-Jun-1987**

**Company :**

**Telephone # : 0563624653**

**Insurance : Cash**

**No : A00001**

This is to certify that the above named patient is suffering from **Acute nasopharyngitis along with fever, cough, headache and bodyaches, allergic rhinitis, nasal congestion** and she is getting treatment since **23-Mar-2023**. He is not fit for work and advised to take rest for **3 days** with effect from **23-Mar-2023**

**Sincerely Yours,**

**DR.DIVYA**

Address: DIP, Green Community, EBC G29, PO Box: 473510, Dubai, UAE Tel: +971 4 8831002 / 003  
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