

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-INS012-20230307213656	88074551	07/03/2023	OIC - Oman Insurance Company	OIG/ME-91088/E/9427815	DHA-P-25580547
Denial:		Comments:			

Diagnoses:

Type	Diagnosis
Principal	G43.009 - Migraine without aura, not intractable, without status migrainosus
Secondary	R12 - Heartburn

Showing 1 to 2 of 2 entries

Drugs:

ID	Drug	Status	Denial	Duration	Qty	Net	Patient Share	Instructions	ROA	Refills
14301866	1513-242802-1752 - PANTOZOL, 30'S, 40 MG, GASTRO-RESISTANT TABLETS, NYCOMED	Posted	-	10	10.00	0.00	0.00	Take 1 TABLET(s), 1 Time(s) per Day For 10 Day(s), 45 MINUTES BEFOFE FOOD	ORAL	0
14301867	2294-238802-0391 - ONDANSETRON, 10'S, 8 MG, FILM COATED TABLETS, WOCKHARDT PHARMACEUTICALS (CP PHARMA)	Posted	-	10	10.00	0.00	0.00	Take 1 TABLET(s), 1 Time(s) per Day For 10 Day(s).	ORAL	0
14301868	0031-168201-0391 - DOMPY , 30'S, 10 MG, FILM COATED TABLETS, JAMJOOM PHARMACEUTICALS	Posted	-	10	10.00	0.00	0.00	Take 1 TABLET(s), 1 Time(s) per Day For 10 Day(s), OR WHENEVER NAUSEA	ORAL	0
14301869	0240-223401-1171 - PROXEN , 20'S, 500 MG, TABLETS, GRUNENTHAL	Posted	-	14	28.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 14 Day(s), WHENEVER MIGRAINE HEADACHE	ORAL	0
Total:						0.00	0.00			

Showing 1 to 4 of 4 entries



## Sick Leave Certificate

### شهادة إجازة مرضية

Date: 07-03-2023 تاريخ:

Patient Information		
Patient Name	Gloria Pabalan Abaya	اسم المريض
Patient File No.	11798	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 / 784-1987-7647197-5	رقم بطاقة الهوية / رقم جواز السفر
Employer	Private	جهة العمل
Employer Name	Yateem Optician LLC	إسم جهة العمل

Sick Leave Information		
Diagnosis - ICD Code	Migraine with aura, not intractable, without status migrainosus (G43.109) (G43.109), Heart burn (R12) (R12)	اسم ورقم التشخيص
Sick Leave From, To	07-03-2023, 09-03-2023	الإجازة المرضية من , إلى
Sick Leave Period	3	مدة الإجازة المرضية
Physician Remarks		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		توقيع الطبيب
Physician Stamp		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/online-verification> and enter the Security code & Certificate No. mentioned below.

#### ملاحظات:

- يتم إصدار هذه الشهادة إلكترونياً 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.

CP\_9.3 F-06

PIN: 9861



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