

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.

Detail

ID:	Reference Number	Prescription Date:	Plan:	Member ID:	Clinician ID:
CH/F-000 302-INS012-202 04271 003	90723877	27/04/2023	OIC - Oman Insurance Company	OIG/ME-30476/E/10094421	DHA-P-53383490
Car id:			Comments:		

Diagnoses:

Type	Diagnosis
Principal	A09 - Infectious gastroenteritis and colitis, unspecified
Secondary	R52 - Pain, unspecified
Showing 1 to 2 of 2 entries	

Drugs

ID	Drug	Status	Denial	Duration	Qty	Net	Patient Share	Instructions	ROA	Refills
144 3525	6594-608705-0831 - ASHROLYTE O.R.S-COLA FLAVOUR, 10X21.8G, 2.6 G 1.5 G 2.9 G 13.5 G, POWDER FOR SOLUTION	Posted	-	4	8.00	0.00	0.00	Take 1 SACHET(s), 2 Time(s) per Day For 4 Day(s).IN 1 LITER OF WATER	ORAL	0
144 3526	136501-117 - (HYOSCINE : 10 MG) TABLETS	Posted	-	4	8.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 4 Day(s).FOR PAIN	ORAL	0
Total:						0.00	0.00			

Showing 1 to 2 of 2 entries

GSM Medical Center
Muaded Almazrouei Bdlg -
1st floor - Al Satwa Rd - near
Satwa Roundabout - Al Satwa
- Dubai
Tel: 04-8831002,04-8831003
Fax: 048831004



Date : 27-04-2023

CERTIFICATE

Name : **Jude Victor Adrada**

Age : **28-Oct-1997**

Company :

Telephone: 0522819458

Insurance : **Insurance**

This is to certify that the above named patient is suffering from ACUTE GASTROENTERITIS and he is getting treatment since **27-Apr-2023** He is not fit for work and advised to take rest for 1 DAY with effect from **27-Apr-2023**.

Sincerely Yours,

Dr. Attiya Nisar

