

## 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:
<b>DHA-F-0000802-INS010-20230521204449</b>	<b>92119861</b>	<b>21/05/2023</b>	<b>AXA - AXA Insurance Gulf</b>	<b>27/E/0</b>	<b>DHA-P-25580547</b>
<b>Denial:</b>	<b>Comments:</b>				

### Diagnoses:

Type	Diagnosis
Principal	J06.9 - Acute upper respiratory infection, unspecified
Secondary	R50.9 - Fever, unspecified
Showing 1 to 2 of 2 entries	

### Drugs:

Drugs:

ID	Drug	Status	Denial	Duration	Qty	Net	Patient Share	Instructions	ROA	Refills
14559058	0271-397401-1161 - KOFLET SYRUP, 100ML, 35 MG/5ML 15 MG/5ML 20 MG/5ML 15 MG/5ML 9 MG/5ML 9 MG/5ML 1.25 MG/5ML 35 MG/5ML 25 MG/5 ML 25 MG/5 ML 15 MG/5ML 10 MG/5ML 8 MG/5ML 8 MG/5ML 8 MG/5ML 3 MG/5ML, SYRUP, THE HIMALAYA DRUG COMPANY	Posted	-	5	1.00	0.00	0.00	Take 10ml, 2 Time(s) per Day For 5 Day(s).	ORAL	0
14559059	0195-123701-0391 - ARTIZ , 10'S, 10 MG, FILM COATED TABLETS, TABUK PHARMACEUTICAL MANUFACTURING CO.	Posted	-	7	7.00	0.00	0.00	Take 1 TABLET(s), 1 Time(s) per Day For 7 Day(s), before bedtime.	ORAL	0
14559060	2027-719101-0391 - MAXIGESIC PE, 20'S, 500 MG 150 MG 2.5 MG, FILM COATED TABLETS, AFT PHARMACEUTICALS LTD	Posted	-	5	10.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 5 Day(s).	ORAL	0
Total:						0.00	0.00			

Showing 1 to 3 of 3 entries



## Sick Leave Certificate

### شهادة إجازة مرضية

Date: 21-05-2023 تاريخ:

Patient Information		
Patient Name	Pol Krysper Matol Sandejas	اسم المريض
Patient File No.	14488	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 / 784-1984-4828387-3	رقم بطاقة الهوية / رقم جواز السفر
Employer	Private	جهة العمل
Employer Name	K and V Group DMCC	إسم جهة العمل

Sick Leave Information		
Diagnosis - ICD Code	Acute upper respiratory infection (J06.9) (J06.9),Fever (R50.9) (R50.9)	اسم ورقم التشخيص
Sick Leave From, To	21-05-2023, 21-05-2023	الإجازة المرضية من , إلى
Sick Leave Period	1	مدة الإجازة المرضية
Physician Remarks	Leave is valid from 19/05/2023 to 21/05/2023	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		توقيع الطبيب
Physician Stamp		ختم الطبيب

Remarks: ملاحظات:

- This certificate is electronically issued and does not require a DHA stamp or attending DHA for manual attestation. - يتم إصدار هذه الشهادة إلكترونياً ولا تتطلب ختم الهيئة أو الحضور لتصديقها

- 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. - 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: 8905



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