

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-TPA004-20230507190234	91305716	07/05/2023	NATIONAL GENERAL INSURANCE COMPANY/NAS Administration Services Limited	EC9R-21CC-DCD1-2DEA	DHA-P-25580547
Denial:		Comments:			

Diagnoses:

Type	Diagnosis
Principal	N39.0 - Urinary tract infection, site not specified
Secondary	R50.9 - Fever, unspecified
Secondary	H81.13 - Benign paroxysmal vertigo, bilateral

Showing 1 to 3 of 3 entries

Drugs:

ID	Drug	Status	Denial	Duration	Qty	Net	Patient Share	Instructions	ROA	Refills
14510210	0095-187902-1451 - UVAMIN RETARD, 20'S, 100 MG, CAPSULES (HARD GELATIN), MEPHA	Posted	-	5	10.00	0.00	0.00	Take 1 CAPSULE(s), 2 Time(s) per Day For 5 Day(s).	ORAL	0
14510211	0097-111701-0251 - ALKA-UR, 4G X 10, N/A N/A N/A N/A, EFFERVESCENT GRANULES, NATIONAL PHARMACEUTICAL INDUSTRIES CO. (SAOG), OMAN	Posted	-	5	10.00	0.00	0.00	Take 1 SACHET(s), 2 Time(s) per Day For 5 Day(s), MIX IN 200ML WATER.	ORAL	0
14510212	0120-107901-1172 - BRUFEN , 25'S, 200 MG, TABLETS, BOOTS-ENGLAND.	Posted	-	7	14.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 7 Day(s).	ORAL	0
14510213	1291-380701-1171 - BETASERC 16MG, 60'S, 16 MG, TABLETS, ABBOTT	Posted	-	30	30.00	0.00	0.00	Take 1 TABLET(s), 1 Time(s) per Day For 30 Day(s).	ORAL	0
14510214	0321-100604-1171 - NEUROBION, 20'S, 200 MCG 100 MG 200 MG, TABLETS, MERCK	Posted	-	60	60.00	0.00	0.00	Take 1 TABLET(s), 1 Time(s) per Day For 60 Day(s).	ORAL	0
Total:						0.00	0.00			

Showing 1 to 5 of 5 entries



Sick Leave Certificate

شهادة إجازة مرضية

Date: 07-05-2023 تاريخ:

Patient Information		
Patient Name	Ronielyn Gonzales Cimene	اسم المريض
Patient File No.	13967	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 / 784-1988-6820243-7	رقم بطاقة الهوية / رقم جواز السفر
Employer	Private	جهة العمل
Employer Name	Twinkle Home Healthcare	إسم جهة العمل

Sick Leave Information		
Diagnosis - ICD Code	Urinary tract infection, site not specified (N39.0) (N39.0),Fever (R50.9) (R50.9),Benign paroxysmal vertigo, bilateral (H81.13) (H81.13)	اسم ورقم التشخيص
Sick Leave From, To	07-05-2023, 11-05-2023	الإجازة المرضية من , إلى
Sick Leave Period	5	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: 8863



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