

Sick Leave Certificate

شهادة إجازة مرضية

Date: 09-02-2023 تاريخ:

Patient Information

Patient Name	Pauline Anne Roxas	اسم المريض
Patient File No.	10711	رقم ملف المريض
Visit Type	Outpatient	نوع الزيارة
Date of Admission	N/A	تاریخ الدخول
Date of Discharge	N/A	تاریخ الخروج
Patient Passport No/Emirates ID	N/A / 784199860601022	رقم بطاقة الهوية / رقم جواز السفر
Employer	Private	جهة العمل
Employer Name	N/A	اسم جهة العمل

Sick Leave Information

Diagnosis - ICD Code	Acute upper respiratory infection (J06.9) (J06.9),Headache, common migraine, with status migrainosus (G43.001) (G43.001),Malaise (R53.81) (R53.81),Fever, unspecified (R50.9) (R50.9)	اسم ورقم التشخيص
Sick Leave From, To	09-02-2023, 11-02-2023	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> وادخل رقم ورقة الشهادة المذكورة أدناه.



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-TPA008-20230209173549	86546397	09/02/2023	NATIONAL LIFE AND GENERAL INSURANCE COMPANY SAOC/INAYAH TPA LLC	I044-008-118672340-01	DHA-P-25580547
Denial:	Comments:				

Diagnoses:

Type	Diagnosis
Principal	J06.9 - Acute upper respiratory infection, unspecified
Secondary	G43.001 - Migraine without aura, not intractable, with status migrainosus
Secondary	R53.81 - Other malaise
Secondary	R50.9 - Fever, unspecified
Showing 1 to 4 of 4 entries	

Drugs:

ID	Drug	Status	Denial	Duration	Qty	Net	Patient Share	Instructions	ROA	Refills
14193630	127405-039 - (AZITHROMYCIN : 500 MG) FILM COATED TABLETS	Posted	-	5	10.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 5 Day(s). after food.	ORAL	0
14193631	0195-123701-0391 - ARTIZ , 10'S, 10 MG, FILM COATED TABLETS, TABUK PHARMACEUTICAL MANUFACTURING CO.	Posted	-	5	5.00	0.00	0.00	Take 1 TABLET(s), 1 Time(s) per Day For 5 Day(s). before bedtime.	ORAL	0
14193632	2027-560101-0392 - MAXIGESIC, 16'S, 150 MG 500 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). after food.	ORAL	0
14193633	131601-117 - (BETAHISTINE : 8 MG) TABLETS	Posted	-	7	14.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 7 Day(s).	ORAL	0
				Total:	0.00	0.00				
Showing 1 to 4 of 4 entries										

