

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-INS012-20230417105430	90252094	17/04/2023	OIC - Oman Insurance Company	OIG/ME-112046/E/9930689	DHA-P-25580547
Denial:		Comments:			

Diagnoses:	
Type	Diagnosis
Principal	J06.9 - Acute upper respiratory infection, unspecified
Secondary	R05 - Cough
Showing 1 to 2 of 2 entries	

Drugs:

ID	Drug	Status	Denial	Duration	Qty	Net	Patient Share	Instructions	ROA	Refills
14444850	0097-127402-0391 - MACROMAX 250, 6'S, 250 MG, FILM COATED TABLETS, NATIONAL PHARMACEUTICAL INDUSTRIES CO. (SAOG), OMAN	Posted	-	3	6.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 3 Day(s).	ORAL	0
14444851	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
14444852	2027-560101-0392 - MAXIGESIC, 16'S, 150 MG 500 MG, FILM COATED TABLETS, AFT PHARMACEUTICALS LTD	Posted	-	3	6.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 3 Day(s).	ORAL	0
14444853	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 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
Total:						0.00	0.00			

Showing 1 to 4 of 4 entries



Dr. Ayub Anand
General Practitioner
DHA LIC. NO. 25580547-001
GSM MEDICAL CENTER LLC
Mob: 058 9261206 TEL: 04 2399913

Sick Leave Certificate

شهادة إجازة مرضية

Date: 17-04-2023 تاريخ:

Patient Information		
Patient Name	Jeralyn Arcenal Gestuada	اسم المريض
Patient File No.	13281	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 / 784-1991-3576815-0	رقم بطاقة الهوية / رقم جواز السفر
Employer	Private	جهة العمل
Employer Name	Redwood Nursery	إسم جهة العمل

Sick Leave Information		
Diagnosis - ICD Code	Acute upper respiratory infection (J06.9) (J06.9), Cough (R05) (R05)	اسم ورقم التشخيص
Sick Leave From, To	17-04-2023, 19-04-2023	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: 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. - لفرض 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: 4178



1681729140310