

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-INS012-20230615191812	93540942	15/06/2023	OIC - Oman Insurance Company	OIG/ME-107249/E/10346306	DHA-P-25580547
Denial:	Comments:				

Diagnoses:

Type	Diagnosis
Principal	G43.001 - Migraine without aura, not intractable, with status migrainosus
Secondary	R11.2 - Nausea with vomiting, unspecified
Showing 1 to 2 of 2 entries	

Drugs:

ID	Drug	Status	Denial	Duration	Qty	Net	Patient Share	Instructions	ROA	Refills
14640338	0240-223401-1171 - PROXEN , 20'S, 500 MG, TABLETS, GRUNENTHAL	Posted	-	7	21.00	0.00	0.00	Take 1 TABLET(s), 3 Time(s) per Day For 7 Day(s).	ORAL	0
14640339	0031-168201-0391 - DOMPY , 30'S, 10 MG, FILM COATED TABLETS, JAMJOOM PHARMACEUTICALS	Posted	-	3	6.00	0.00	0.00	Take 1 TABLET(s), 2 Time(s) per Day For 3 Day(s).	ORAL	0
14640340	0717-226501-2401 - MYONAL 50MG, 30'S, 50 MG, SUGAR COATED TABLETS, EISAI CO LTD.	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
Total:						0.00	0.00			
Showing 1 to 3 of 3 entries										



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



Date: 15-JUNE-2023

SICK LEAVE CERTIFICATE

Name: **Suzette Ann De Leon**

Age: **30 Years**

Telephone: **+971 50 481 4248**

Insurance: **Oman Insurance**

This is to certify that **Suzette Ann De Leon** is suffering from **Migraine without Aura, Vomiting**. She is not fit to attend work yet, advised to take rest for **02 DAY** with effect from **15-JUNE-2023**.

Sincerely Yours,

Dr. Supriya Anand

