

# Clinical Code Query Form

## Personal Details

<b>Title</b>	Mr
<b>First Name</b>	Ahmed
<b>Last Name</b>	Ahmed
<b>Telephone</b>	0810778616
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## Practice Information

<b>Medical Practice Type</b>	Specialist
<b>BHF Practice No</b>	9090

## Query Information

<b>Query Type</b>	Unique Clinical Codes
<b>Diagnosis Code</b>	9090
<b>Procedure Code</b>	9090
<b>Query Description</b>	hi

## Additional Diagnosis Codes

## Additional Procedure Codes

12
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