

# In-Patient Claim # 24J477

Insurer Name: Santé

**Patient Name:** Tatiana (0 yrs)

**Policy Holder:** Tatiana

**Provider Name:** Rahbany Pharmacy

**Family of Benefits:** Prescription Medicines

**Admission Date:** 2024-09-09

**Approved Length of Stay:**

**Card No:** 0808-445e-9df3-8387 ()

**Policy No:** 227 (227)

**Physician:** Shaala Saiid Chahine

**Admission Motive:** SP

**Estimation Cost:** LL Lebanese (Ministry Rate)

**ICD:**

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ICD-9:

**Coverage Details & Notes:**

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Admission Class: Class A  
Approved Procedure/Treatment:  
Remarks: