Practitioner Services

DENTIST'S NAME & ADDRESS

SCHEDULE QUERY Dental 289



For the attention of Operations

| Enter clearly, inc postcode | | | | SCHEDULE DATE | | | |
|--|--|---------------------|--|--------------------------|---------------|-----------------------------|-----------------------------|
| | | | | MONTH YEAR | ₹ | LIST No | D. |
| | | | | | | | |
| | | | | DENTIST'S SIGNATURE DATE | | | ATE |
| | | | | | | | |
| CLAIM DETAILS | | | | | | | |
| Message on schedule | | Patient's Full Name | | | Date of Birth | | CHI number (on schedule) |
| | | | | | | | |
| Reason for querying schedule entry | | | | | | | |
| Result of investigation by PSD | | | | | | | |
| Message on schedule | | Patient's Full Name | | Date of Birth | | CHI number (on schedule) | |
| | | | | | | | |
| Reason for querying schedule entry | | | | | | | |
| Result of investigation by PSD | | | | | | | |
| Message on schedule | | Patient's Full Name | | Date of Birth | | CHI number (on schedule) | |
| | | | | | | | |
| Reason for querying schedule entry | | | | | | | |
| Result of investigation by PSD | | | | | | | |