



GUIA DE TRATAMENTO ODONTOLÓGICO

24



984396
INTERCÂMBIO

1-Registro ANS
406414

3-Dados de Emissão da Guia
11/17/015/12/21

4-Data de Autorização
11/19/015/12/21

6-Sentença
AUTORIZADO

8-Número da Guia Principal
9912749

7-Data Validade da Sentença
11/15/018/12/21

8-Número da Carteira
0101210121514171516121010101010110121

9-Plano
POS REDE PRESTADORA

10-Empresa
DENTAL UNI COOPERATIVA

11-Data Validade da Carteira
11/17/017/12/21

12-Número do Cartão Nacional de Saúde

13-Nome
JAIZA MACEDO SANTOS ABREU

20/12/1994

15-Nome do Titular do Plano
JULIO CESAR ABREU MACEDO SANTOS

16-Identificação a RIN
N

17-Nome do Profissional Solicitante
MARIA APARECIDA DA ROCHA

22-Nome do Contratado Executante
MARIA APARECIDA DA ROCHA

18-Número no CRO
34202

19-UF
SP

20-Código CBO 5

025 -
Faturar Empresa

21-Código na Operadora / CNPJ / CPF
8141513181218171716181

23-Nome do Contratado Executante
MARIA APARECIDA DA ROCHA

23-Número no CRO
34202

24-UF
SP

25-Código CNES

26-Código CBO 5

26-Nome do Profissional Solicitante
MARIA APARECIDA DA ROCHA

30-Tabela
31-Código do Procedimento

32-Descrição
CONSULTA ODONTOLÓGICA

33-Dentista/Região

34-Frete

35-Cid

36-Quantidade US

37-Valor

38-Franchising/Co-participação R\$

39-Aux

40-Data de Realização

41-Motivo da Guia 42-Assinatura

1-0101811010101016151

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