



2 - Nº Guia no Prestador

1880527

3 - Nome da Operadora

DENTAL UNI - COOPERATIVA ODONTOLÓGICA

7 - Nome do Contratado

20523/SC - NICOLI MARCELINO DELALLO

3 - Nome da Operadora

3 2 8 7 3 2 0 3 0 0 1 8 9

Código de Registro do Procedimento

Número do Lote

9 - Número do Protocolo

10 - Código da Guia do Protocolo

11 - Justificativa

Número da Guia no Prestador

1 8 0 1 4 1 7

14 - Número da Guia Atribuído pela Operadora

1 8 0 1 4 1 7

15 - Status

AUTORIZADO

16 - Beneficiário

00202536829300004804 - ENZO PEDROSO RICHTER

7 - Código da Guia da Guia

18 - Justificativa (no caso de recurso de toda a guia)

Foi esquecido de coletar a assinatura do paciente antes do envio da guia. Porém, realizado a assinatura e encaminhando agora com o recurso devidamente assinado.

Dados dos Itens da Guia

20 - Data de Realização do Procedimento

28 - Valor Recusado

30 - Valor Acalado

21 - Dente/Região

22 - Face

29 - Justificativa do Prestador

31 - Justificativa da Operadora

23 - Quantidade

24 - Tabela

25 - Procedimento/Item Assistencial

26 - Descrição do Procedimento

27 - Código da Guia

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RESTAURAÇÃO RESINA FOTOPOLIMERIZÁVEL 2 FACES

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RESTAURAÇÃO RESINA FOTOPOLIMERIZÁVEL 1 FACE

1 3 1 9

3- 0 4 0 3 2 0 2 4 6 4 0 1 9 4 8 5 1 0 0 2 0 0

RESTAURAÇÃO RESINA FOTOPOLIMERIZÁVEL 2 FACES

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