PPS Critical Illness Cover (STANDALONE) Pregnancy Complications Cover Doctor Claim form

The Professional Provident Society Holdings Trust No. IT 312/2011(PPS Holdings Trust) is a Registered South African Trust. PPS Insurance Company (Namibia) Limited Reg. No. 2003/122. PPS Insurance Company Limited Reg. No. 2001/017730/06. PPS Insurance Company Ltd is an Administrator of PPS Insurance Company (Namibia) Ltd.



Particulars of Policyholder	
Member number:	
National ID number/Passport if no ID:	
Name:	
Surname:	

Medical condition

To be completed in full by the treating Medical Attendant only; please answer all the questions in full to ensure timeous assessment of your patients claim.

In order to assess the claim timeously a full and comprehensive report/s regarding the condition below is required from the member's Medical Attendant in addition to this claim form. All relevant medical, blood and special investigations reports, PLUS any other relevant documentation must be included.

All medical information will be treated with confidentiality. PPS Insurance (Namibia) obtained prior written consent from the above-mentioned life insured in terms whereof additional information pertaining to the claim may be provided.

Assessment of the Critical Illness Pregnancy complications cover will be based on specific definitions for the conditions below only. Please read the definitions and indicate the condition for which the claimant was treated.

Abortion due to Amniocentesis

Miscarriage directly or indirectly caused by amniocentesis within 7 days of amniocentesis.

Amniotic Fluid Embolism

Diagnosis of an amniotic fluid embolism requiring emergency treatment and intensive care admission.

Ectopic Pregnancy

The ectopic pregnancy must have been terminated by laparotomy or laparoscopic surgery.

Hyperemesis Gravidarum

Treatment must require a minimum hospital admission for 4 (four) days.

Placenta Praevia

The placenta must extend to the margin of the internal os of the cervix or partially or completely obstruct the os, Caesarean section must be required for this condition.

Pulmonary Embolism

Life threatening obstruction of the pulmonary artery or one of its main branches by an embolus (thrombus, air or fat embolism, foreign body). For this benefit, a claim is considered only during pregnancy or 2 weeks post-partum.

Hydatidiform mole

Confirmatory histological evidence will be required.

Severe Pre-eclampsia and Eclampsia

The diagnosis of severe pre-eclampsia or eclampsia by a gynaecologist or physician.

Sheehan's Syndrome

Diagnosis must be confirmed by a neurologist.

Uterine Rupture

Uterine rupture is defined as the full thickness tear of the uterus into the abdominal cavity during labour.

Abruptio Placentae

The condition must require hospitalisation and a blood transfusion and/or have disseminated intravascular coagulation (generation of blood clots in the circulating blood).

Please note the assessment of this claim may depend on the severity of your patient's condition.					
Date of diagnosis: DD / MM M /	Date of onset of sympto	ms: DD/MM	/		
Date of first consultation: DD / MM / YYYY ICD 10 code:					
Name of current and previous medical practitioners who have treated your patient for this condition:					
Doctor's name	Address and contact details	Speciality	Date of last consultation		
Secondary, contributory or concurrent medical conditions:					
Are there further treatment options available for your patient? Please give details:					
Important: please submit these reports to: namibiaclaims@pps.co.za or fax to +264 (0) 61 411 330					
Medical practitioner's details					
HPCNA Reg No:	Practice No:				
Surname:	Tractice 140.	Initials:			
Email:					
Contact telephone number:					
Physical address:					
Thysical address.					
Fax No. (h): 0					
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Signature of attending practitioner:					

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Details of the claim

Signed at

day of

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