Abu Dhabi Healthcare report 2012



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1. Introduction

The purpose of this report is to give Dutch businesses an insight in Abu Dhabi's healthcare sector and help them to identify possible business opportunities. While the focus of this report is on Abu Dhabi, we will use information on the whole UAE where there is no Abu Dhabi-specific information available.

The development of the national healthcare sector is one of the key focus points of the UAE's Government Strategy. In "The Highlights of the UAE Government Strategy 2011-2013" one can read the following about the Government's view on healthcare:

"The UAE Government aims to ensure access of all citizens and residents to primary healthcare, and to improve the quality of healthcare services provided in the country to global standards. It also seeks to reduce lifestyle diseases and increase the readiness of the health system to deal with epidemics and health risks."

In order to achieve its goals the UAE government is increasingly looking to Public Private Partnerships (PPP). In Abu Dhabi the move towards PPPs, which started in 2006, is changing the healthcare landscape in the Emirate. Examples of high-profile partnerships which seek to bring western technology, practices, and standards to Abu Dhabi are the Cleveland Clinic and John Hopkins. These two renowned private players are now managing hospitals in Abu Dhabi under long-term management contracts.

The rapidly growing population as well as chronic lifestyle induced diseases and injuries are likely to be the main drivers for healthcare services in Abu Dhabi, and the UAE as a whole, for the coming years. The UAE is looking to improve both its hard and soft healthcare infrastructure and is increasingly looking to private players to share the burden and speed up the process.

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¹ http://uaepm.ae/pdf/PMO%20StrategyDocEngFinV2.pdf page 14

2. Key statistics and International Comparison

Demographics

With more than 2 million inhabitants Abu Dhabi is the most populated of the seven emirates that make up the United Arab Emirates. It is also the largest Emirate, making up 80% of the UAE's landmass. When analyzing the healthcare sector of Abu Dhabi it is important to pay close attention to the unique demographic situation of the Emirate. One in five residents is a UAE National of whom two thirds are under 30 years of age. Expatriates are overwhelmingly male and of Asian origin, predominantly aged between 20 and 49.

The resident status is generally contingent on being employed. This means that there are very few retirees or unemployed expatriates. Residents older than 65 will only be able to renew their visa if they are highly qualified and hold a specialist post that cannot be filled by an Emirati.

As a consequence Abu Dhabi's, and the UAE's, healthcare provisions (like number of beds per 1000 people) may seem rather low. However the young and relatively healthy population of the UAE requires fewer medics and beds than aging western countries.

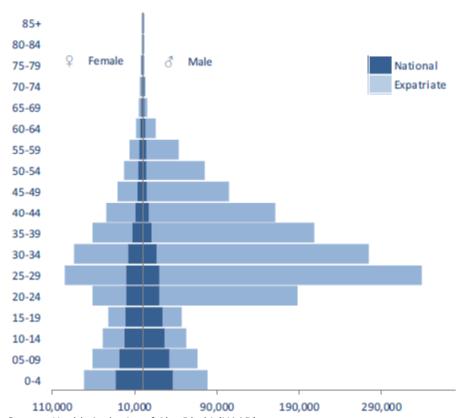


Figure 1: Abu Dhabi's population by age, gender and nationality (2010).

Source: Health Authority of Abu Dhabi (HAAD)

General healthcare statistics

Figure 2 shows several key statistics about the Abu Dhabi healthcare sector, the statistics are from 2010.

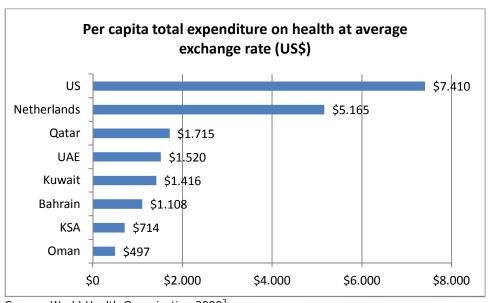
Figure 2 - Key statistics Abu Dhabi healthcare sector

| Emirate Facts | Abu Dhabi |
|--|---------------|
| Population | 2.3 million |
| Nationals as a % of the Population | 19% Nationals |
| Annual Budget | AED 8 billion |
| Number of Employees | 16,500 |
| Number of patient encounters | 4.5 million |
| Number of Hospitals | 12 Hospitals |
| Number of Primary Health Clinics (PHCs) | 41 PHCs |
| Total Number of Beds in Hospitals and PHCs | 2,369 |
| Average Spending per Patient Encounter | AED 1,788 |

Source: TCO report on the UAE healthcare sector January 2012²

The total expenditure on health as a percentage of gross domestic product (GDP) is still relatively low in the UAE (2,8%) compared to the Netherlands (10,8%) and the US (16,2%) but also compared to other GCC countries like Kuwait (3,3%) and Saudi Arabia (5,0%). However, considering the high GDP per capita of several countries in the GCC, looking at the average per capita healthcare expenditure (instead of the expenditure as a percentage of the GDP) might paint a clearer picture. Figure 3 shows the average per capita healthcare expenditure. The UAE rank second in the region but still significantly lags the US and the Netherlands.

Figure 3 - Per capita total expenditure on health at average exchange rate (US\$)



Source: World Health Organization 2009³

http://apps.who.int/ghodata/?vid=1901#

² http://tcoconsulting.com/publications/TCO 3 23012012.pdf page 3

According to the Economist Intelligence Unit (EIU) healthcare expenditure per capita is expected to grow at a compound annual rate of 5% by 2014.

Health Insurance in Abu Dhabi

Health insurance is mandatory for all residents in the Emirate of Abu Dhabi. The process of making health insurance mandatory was initiated in 2006 when health insurance became mandatory for firms with more than 500 expatriate workers. In 2007 the law was extended to all expatriates and in 2008 it was extended to the UAE nationals.

The Abu Dhabi Government provides full medical coverage for all UAE Nationals living in Abu Dhabi. In Cooperation with the National Health Insurance Company (Daman), the Abu Dhabi government runs a UAE national insurance scheme called Thiqa (which means "trust" in Arabic). Thiqa is open to Nationals living in Abu Dhabi. More than 500.000 UAE Nationals have enrolled for the Thiqa program, and they can use healthcare services from more than 1600 medical providers (including both public and private) that are part of Daman's network. There will be no charge as long as they present their Thiqa cards. For more information on the Thiqa program visit www.thiqa.ae

There are 33 licensed insurers competing for members in Abu Dhabi. With a market share of 85% Daman is the absolute market leader in Abu Dhabi.

Health factors, risks and disease patterns

According to statistics of the World Health Organization the UAE ranked first in life expectancy in 2009 (78 years), manifested the lowest infant mortality rate (seven per 1,000 births) and was ranked third in terms of having one of the lowest adult mortality rates (79 per 1,000 births) among other GCC countries.

The vast economic growth of the UAE has dramatically changed the lifestyle of most of its citizens. Rising affluence and the resulting new lifestyle have generated diseases such as diabetes, coronary and cardiovascular, hypertension, cancer, allergies, respiratory and skin diseases. Major risk factors that are causing this trend include the population's unhealthy diet choices, lack of physical activity, incidences of being overweight and obesity, and tobacco smoking. Others include the hot weather, which makes walking difficult and an excessive use of cars are owned.

The '2011 Survey of the UAE healthcare sector' which was published by Deloitte in December 2011 provides a comprehensive overview (figure 4) of how the UAE's health factors, risks and disease patterns are linked.

The aging population and the rise in lifestyle related diseases will increase the demand for healthcare providers. As mentioned earlier the UAE government is trying to keep up with the demand for healthcare by attracting private providers and encouraging the development of public private partnerships.

Pharmaceuticals

Alpen Capital, a UAE investment bank, estimates that pharmaceutical sales in the UAE will grow from an estimated US\$1.8bn in 2010 to US\$3.8bn by 2015. If the estimations are correct 35% of total pharmaceutical sales in the GCC will take place in the UAE. This puts the UAE in second place, after Saudi Arabia, in terms of sales in the GCC.

While there are few domestic producers of pharmaceutical products, the UAE pharmaceutical market is dominated by foreign multinationals. There is a strong preference for branded drugs in the UAE against generic products. The authorities try to increase the demand for cheaper generic products through tight restrictions on advertising of pharmaceutical products, and a ban on direct marketing to the consumer. Demand in the OTC medicines' market is also growing faster than demand for prescription drugs⁴.

⁴ http://www.rncos.com/Press Releases/UAE-Pharmaceutical-Market-Evolving-as-a-Major-Force-in-the-Region.htm

Environmental factors (climate) Unhealthy diet Sedentary life Tobacco Respiratory and lung diseases Primary cause of Affects 1 out of 5 · Third cause of · Key driver for the About 125,000 Obesity can lead death in the country people aged 20 death in the UAE prevalence of people in the UAE to musculoskeletal to 79 (may be underheart attacks are suffering from disorders such as · Heart strokes occur lung diseases such and strokes osteoporosis and recorded) • UAE ranks as at an early age of as asthma, chronic arthritis second highest UAE Nationals · Affects 41% of 45 which is 10 to bronchitis and worldwide for Emiratis aged develop breast 15 years earlier than emphysema; diabetes prevalence between 30 the International cancer at least a mainly due to first and 70 decade earlier than average of 55-60 and second hand their counterparts vears smoking, air In western countries pollution and dust 1 in 5 children have asthma

Figure 4 – The UAE's health factors, risks and disease patterns.

Source: Deloitte "2011 Survey of the UAE healthcare sectors"⁵

Studying Medicine in Abu Dhabi

Students who want to study Medicine in Abu Dhabi have the opportunity to do so at the United Arab Emirates University in Al Ain. At this university there is a faculty of Medicine and Health Science. For more information on the programs the university offers visit http://www.fmhs.uaeu.ac.ae

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http://www.deloitte.com/assets/Dcom-Lebanon/Local%20Assets/Documents/Consulting/Consulting%20Healthcare%20publication%20FV2.pdf page 9

3. Important entities

In 2001, the Abu Dhabi government established the General Authority of Health Services (GAHS) to match its healthcare services to that of its economic growth. In 2007, the GAHS was split into two separate organizations, the Health Authority of Abu Dhabi (HAAD) and the Abu Dhabi Health Services Company (SEHA). HAAD is the regulatory body of healthcare in Abu Dhabi and SEHA (which means health in Arabic) is the operator of public healthcare assets in Abu Dhabi.

The Health Authority - Abu Dhabi (HAAD) - http://www.haad.ae

HAAD is the regulative body of the Healthcare Sector in the Emirate of Abu Dhabi. HAAD defines the strategy for the health system, monitors and analyses the health status of the population and performance of the system. In addition HAAD shapes the regulatory framework for the health system, inspects against regulations, enforces standards, and encourages adoption of world-class best practices and performance targets by all healthcare service providers in the Emirate. HAAD also drives programs to increase awareness and adoption of healthy living standards among the residents of Abu Dhabi.

Tenders from HAAD are published on their website http://www.haad.ae/haad/tabid/790/Default.aspx

Abu Dhabi Health Services Company (SEHA) - http://www.seha.ae

SEHA is an independent, public joint stock company (PJSC) created to manage and develop the curative activities of the public hospitals and clinics of the Emirate of Abu Dhabi. SEHA owns and operates 12 hospital facilities, 2,644 licensed beds, and more than 40 Ambulatory and Primary Healthcare Clinics. SEHA is one of the largest employers in the Middle East with more than 15,500 doctors, nurses and other clinical staff and administration employed. SEHA aims to deliver world class healthcare, locally, by partnering with internationally recognized healthcare leaders. SEHA's partners include Johns Hopkins Medicine, Cleveland Clinic, Bumrungrad International, Vamed, and Vienna Medical University.

Tenders from SEHA are published on their website: http://www.seha.ae/SEHA/EN/Pages/eTenderWelcome.aspx

In short, HAAD regulates all healthcare entities, public and private, by licensing them, setting clear rules and ensuring everyone complies. HAAD does not own or build facilities, treat patients, pay for treatment or pay the private sector to partner. SEHA is the public provider: it owns and develops existing public healthcare facilities, treats patients and partners with private players to manage its facilities.

Daman, The National Health Insurance Company - www.damanhealth.ae

Another important player in Abu Dhabi's healthcare sector is Daman. Daman was formed in 2005 and became the UAE's first specialized National Health Insurance Company. With a market share of 85% in Abu Dhabi, Daman is the absolute market leader in the emirate. Daman is jointly owned by the Government of Abu Dhabi (80%) and Munich Re (20%). Munich Re is a reassurance company based in Munich, Germany.

Mubadala Development Company - www.mubadala.ae/

Mubadala is a wholly owned investment vehicle of the Government of Abu Dhabi. The mandate of Mubadala is to facilitate the diversification of Abu Dhabi's economy. Mubadala has nine business units operating in a diverse range of strategic sectors deemed important for Abu Dhabi's economy, one of the business units being Healthcare.

Mubadala Healthcare is playing an instrumental role in the creation of a thriving private healthcare sector in Abu Dhabi. Mubadala Healthcare tries to establish long-term partnerships with renowned international medical institutions to build sustainable businesses, create regional capacity, and to stimulate the overall development of the sector. A good example is the Cleveland Clinic in Abu Dhabi; Mubadala Healthcare provides the capital and local business acumen, while Cleveland Clinic brings the clinical expertise to manage and operate the hospital.

4. Challenges and opportunities

According to Deloitte's '2011 Survey of the UAE healthcare sector⁶, there are five major challenges and opportunities that private healthcare providers face in the UAE.

Figure 5: the 5 major opportunities and challenges for private healthcare providers

| Top 5 Challenges | Top 5 Opportunities |
|--|---|
| Attraction and retention of qualified healthcare | Opportunities for providers of highly specialized |
| professionals | care and centers of excellence |
| Quality and standardization of services | Inbound medical tourism for minor plastic |
| | surgery |
| Cost and complexity of regulation requirements | Demand for long-term care facilities will grow |
| Low premium strategy from insurance providers | Government is highly supporting home care |
| | services development |
| UAE outbound medical tourism | Partnerships between UAE providers will improve |
| | patients' access to advanced medical equipment |

The top 5 Challenges

1. Attraction, retention and development of qualified healthcare professionals

The UAE suffers from a shortage of all kinds of healthcare professionals, including doctors, physicians, dentists, nurses and support staff. The UAE lags behind the developed and neighboring GCC countries in the provision of healthcare professionals. The attraction, retention and education of staff is the greatest challenge for the UAE's health sector.

2. Quality and standardization of services

The UAE healthcare sector employs a wide variety of nationalities, each educated according to a different curriculum. Managing staff from different cultures, medical approaches and practices and creating patient care standards that all the staff can adapt is one of the major challenges faced by healthcare providers.

3. Cost and complexity of requirements and licensing

The UAE healthcare sector suffers from a lack of standardization in regulations across the country leading to various obstacles. E.g. Dubai hospitals are still using ICD9 disease codes while Abu Dhabi has already implemented ICD10 codes.

4. Low premium strategy from insurance providers

Insurance coverage is a key driver of any hospital's investment in technology. The low premium strategy which has been so far followed by the insurers in the UAE to gain market share has prevented some of the specialized treatments from being covered and as a result has dissuaded healthcare provides from investing in advanced technology.

5. A lack of confidence in the UAE's health system coupled with high treatment costs are the main source of UAE outbound tourism

The UAE is one of the biggest markets for outbound medical tourism in the Middle East. UAE residents are keen on traveling overseas for medical treatment given the high medical treatment cost in the country and the proximity of very competitive medical destinations. Also there is a lack of confidence of residents in the local health system.

Top 5 Opportunities

1. Being a speciality care center brings a sustainable competitive advantage

Based on current disease patterns and trends against the available supply in the UAE healthcare market, opportunities for medical providers in the UAE reside in highly specialized care and centers of excellence.

^{6 &}lt;a href="http://www.deloitte.com/assets/Dcom-">http://www.deloitte.com/assets/Dcom-
Lebanon/Local%20Assets/Documents/Consulting/Consulting%20Healthcare%20publication%20FV2.pdf page 12

2. Inbound medical tourism's potential resides in minor plastic surgery care

In the previous section we could read that the UAE is one of the biggest markets for *outbound* medical tourism. For plastic surgery however the number of patients traveling to the UAE (especially Dubai) to visit qualified aesthetic surgeons increases. The UAE is becoming an attractive destination for people from the GCC and Northern Africa looking for minor cosmetic surgery in addition to Lasik, dentistry and rejuvenation treatments. However competition is fierce with other competing nations including Jordan and Lebanon.

3. Demand for long-term care facilities will grow

The increase in the number of elderly (65+) during the past 15 years and the explosion of chronic diseases are shaping the future of the UAE's medical offering and leasing to the creation of new services.

4. The government is highly supporting home care services development

In order to cut down the high costs of healthcare, the UAE government highly supports the development of homecare services.

5. Creating partnerships between UAE providers will improve patients' access to advanced medical equipment

Establishing partnerships between healthcare private providers based on shares services, resources and equipment will help to improve the quality of healthcare in the country and patient's access to advanced and expensive technologies.

Low import duties Medical Devices⁷

The UAE tend to devote a high proportion of total health expenditure to medical devices compared to developed nations. In recent years, the medical device market has been buoyed by some of the lowest import duties in the region. In vitro and diagnostic equipment are exempted from import tariffs, while capital equipment and instruments carry a 5% levy. This is one of the main reasons which make the UAE an attractive destination for medical devices' imports and taking the medical device market to grow at a compound annual growth rate of around 11% per year over the period 2011-2014.

⁷ http://www.rncos.com/Press Releases/Lower-Import-Duties-Accelerating-UAE-Medical-Device-Market.htm

5. Ongoing, recently completed and future healthcare projects in Abu Dhabi

Some of the details of the biggest healthcare projects in Abu Dhabi.

Cleveland Clinic Abu Dhabi - one of Abu Dhabi's flagship healthcare projects. The facility being built on Sowwah Island is set to open its doors in the fourth quarter of 2013. The hospital will have 364 beds, with the option to increase that level to 490, and is designed to operate five different specialist institutes covering digestive disease, eye, heart and vascular disorders, neurological treatment, and respiratory and critical care.

ADHSC The new 'Al Mafraq Hospital' –a new hospital being built to replace the current Al Mafraq hospital. The hospital will have 688 beds. The 600 USD million project of the Abu Dhabi Health Service Company (SEHA) is expected to open in Q4, 2014.

ADHSC Al Ain Hospital – in the city of al Ain a new hospital is being constructed. This is also a project of SEHA. The project has a total value of 709 USD million and the will have 690 beds.

ADHSC Special Security Hospital – There are plans to build a Special Security Hospital in Shamkha, Abu Dhabi. The hospital will cover an area of 32.000 sq. m. and will include 125 beds.

New Oasis Hospital – a new hospital replacing the old Oasis Hospital in Al Ain. The project covers an area of 30.500 sq. m. and will include 110 beds. In August 2012 the project is expected to be completed.

Arzanah Medical Complex – a medical complex in Arzanah owned and developed by Mubadala, due for completion mid-2012. The 163 USD million project will compromise three specialist healthcare facilities: The Abu Dhabi Knee and Sports Medicine Centre, Wooridul Spine Centre and diagnostic facilities.

New Sheikh Khalifa Medical City – A three million square foot, 838 bed medical complex replacing the old Sheik Khalifa Medical City and provide expanded medical, pediatric and trauma care for the residents of Abu Dhabi. With construction scheduled to start in 2013, the new Sheikh Khalifa Medical City will combine a general hospital with a level-one trauma center and women's and pediatric hospitals.

6. Exhibitions & Fairs

In 2012 two major healthcare events will take place in Abu Dhabi; The Abu Dhabi Medical Congress and The World Health Care Congress.

The Abu Dhabi Medical Congress – 14-16 October 2012 - http://www.abudhabimed.com/
The Abu Dhabi Medical Congress is the region's fastest-growing healthcare event. Year on year, ADMC grows in exhibitors and attendees numbers. In 2012, the show expands from 7,000 to 9,000 sq. m. and welcomes a fifth show vertical, Dentistry, running along Emergency, Primary Healthcare, Patient Safety and Rehabilitation

The World Health Care Congress – 9-11 December 2012 – http://www.worldcongress.com/events/HR12004/

The 3rd Annual World Health Care Congress Middle East (WHCC ME), co-sponsored by the Health Authority Abu Dhabi and the Abu Dhabi Tourism Authority, is a global event in which over 600 health care, government and corporate leaders from over 25 countries come together to define objectives and frame solutions to the challenges of health care reform, cost, quality and delivery.

Though not held in Abu Dhabi, The Arab Health Exhibition, held in Dubai, is the largest healthcare exhibition in the Middle East.

The Arab Health Exhibition – 28 -31 January 2013 - http://www.arabhealthonline.com/
The Arab Health Exhibition & Congress is the largest healthcare exhibition in the Middle East, and the second largest in the world. Arab Health is viewed as a must-attend global event in the healthcare calendar. Established 37 years ago, it provides a platform for the world's leading manufacturers, wholesalers and distributors to meet the medical and scientific community in the Middle East and beyond.

Another noteworthy event that is not held in Abu Dhabi but in Dubai is Hospital Build and Infrastructure Middle East.

Hospital Build & Infrastructure – 4-6 June 2012 - http://www.hospitalbuild-me.com
Hospital Build & Infrastructure is the fastest-growing, global business-to-business platform dedicated to bringing together investors, commissioners, backers and managers of healthcare-related building projects with key players in planning, design, construction, operations, management, supply and refurbishment.

7. Apendix Public Hospitals

| Public hospitals (SEHA) | Al Mafraq Hospital | Al Rahba Hospital | Sheikh Khalifa Medical City | Al Mirfaa Hospital | Al Sila Hospital | Corniche Hospital | Delma Hospital | Ghiathy Hospital | Liwa Hosital | Madinat Zayed Hospital | Al Ain Hospital | Tawam Hospital |
|---|-----------------------|----------------------|--------------------------------------|-----------------------|---------------------|----------------------|-------------------|---------------------|-----------------|------------------------------|--------------------|-------------------|
| Area | Abu Dhabi | Abu Dhabi | Abu Dhabi | Al Gharbia | Al Gharbia | Abu Dhabi | Al Gharbia | Al Gharbia | Al Gharbia | Al Gharbia | Al Ain | Al Ain |
| Phone | 02 582 3100 | 02 506 4444 | 02 610 2000 | 02 883 5000 | 02 872 1555 | 02 672 4900 | 02 878 1888 | 02 874 1666 | 02 882 2204 | 02 884 4444 | 03 763 5888 | 03 707 4100 |
| Emergency facilities | * | * | * | * | * | * | * | * | * | * | * | * |
| No of inpatient beds | 500 | 116 | 550 | 28 | 28 | 235 | 21 | 32 | 50 | 138 | 412 | 468 |
| Allergy Clinic | | * | | - | | | | | | * | | |
| Burns unit | * | | | | | | | | | | | |
| Cardiology | * | | * | | | | | | | * | * | * |
| Cardiothoracic Surgery | | | * | | | | | | | | * | |
| Critical Care/ (CCU)Intensive Care (ICU) and/or High Dependency Unit (HDU) | * | * | * | | | | | | | | * | * |
| Dermatology | * | * | * | | | | | * | | * | * | * |
| Diabetes | * | * | * | | | | | | | * | * | * |
| Electrophysiology | | | * | | | | | | | | | |
| Endocrinology | * | | * | | | | | | | | | * |
| ENT - Ear, Nose & Throat | * | * | * | * | * | | * | * | * | * | * | * |
| Gastroenterology | * | * | * | * | | | | * | | * | * | * |
| Hepatology | | | * | | | | | | | | * | |
| Infectious diseases | * | | * | | | | | | | | * | * |
| Internal Medicine | * | * | * | * | * | | * | * | | * | | * |
| IVF | | | * | | | | | | | | | * |
| Neonatology and/or PICU | * | * | | | | * | | | | | * | * |
| Neurology | | | * | | | | | | | | * | * |
| Neurosurgery | * | * | * | | * | | | | | | * | * |
| Nutrition | | * | * | * | | * | * | | | * | * | * |
| Obesity Clinic | | | * | | * | | | | | | | |
| Obstetrics & Gynaecology | * | * | * | * | | * | * | * | * | * | * | * |
| Oncology | * | | * | | * | | | | | | | * |
| Ophthalmology | * | * | * | | | | | * | | * | * | |
| Orthodontics | | | * | * | * | | | | | | | |
| Orthopaedics | * | * | * | * | * | | | * | | * | * | * |
| Paediatrics (and/or Paediatric Surgery) | * | * | * | | | | * | * | * | * | * | * |
| Pain management clinic | | * | * | | | | | | | | | * |
| Physiotherapy | | * | * | | | | | | | * | * | * |
| Plastic surgery | * | * | * | | | | | | | * | | * |
| Psychiatry/Psychology | | | * | | | | | | | | * | * |
| Renal | * | * | * | * | * | | * | * | | | | * |
| Respiratory medicine | | | * | | | | | | | * | * | |
| Rheumatology | * | | * | | | | | | | | | |
| Sleep Studies Unit | | | * | | | | | | | | | * |
| Speech therapy | | | * | | | | | | | | | |
| Sports medicine/Rehabilitation | | | * | | | | | | | | * | * |
| Strokes | | * | * | | | | | | | | * | |
| Urology | * | | * | | | | | | | * | * | * |
| Vascular Surgery | * | * | * | | | | | | | * | * | |
| Dental | | * | * | | | | | | | | | * |
| Cosmetic | | * | * | | | | | | | | | |
| Complementary medicine | | | | | | | | | | | | |

Private hospitals and polyclinics

| Private hospitals Private hospitals and | Ahalia | Al Noor | Al Noor | Al Raha | Al Salam | Cosmes | Dar Al | Emirate | Gulf | Lifeline | Prince | Al Noor | Emirates | Oasis |
|--|----------------|-----------------------------|-------------------------------|----------------|----------------|--------------------------------|--------------------|--|--------------------------|----------------|--------------------------------------|--------------------|---|----------------|
| polyclinics | Hospital | Hospital Airport Road | Khalifa Street Hospital | Hospital | Hospital | urge & Emirates Hospital | Shifaa Hospital | s French Hospital Franco- Emirien | Diagnos tic Centre | Hospital | Speciali sed Medical Centre | Hospital Al Ain | Internatio nal Hospital Al Ain | Hospital |
| Area | Abu Dhabi | Abu Dhabi | Abu Dhabi | Abu Dhabi | Abu Dhabi | Abu Dhabi | Abu Dhabi | Abu Dhabi | Abu Dhabi | Abu Dhabi | Abu Dhabi | Al Ain | Al Ain | Al Ain |
| Phone | 02 626 2666 | 02 444 6655 | 02 626 5265 | 02 633 0440 | 02 671 1220 | 02 446 6648 | 02 641 6999 | 02 626 5722 | 02 665 8090 | 02 633 5522 | 02 641 5533 | 03 766 7666 | 03 763 7777 | 03 722 1251 |
| Emergency facilities | * | * | * | Not 24 hr | * | | * | * | * | * | | * | * | * |
| No of inpatient beds | 50 | 150 | 100 | 12 | 40 | 7 | 16 | 12 | | 35 | | | 50 | 50 |
| Allergy Clinic | | * | | * | | | | | * | | * | | | |
| Burns unit | | | | | | | | | | | | | | |
| Cardiology | * | * | * | | * | | * | * | * | * | | * | * | coming |
| Cardiothoracic Surgery | | * | * | | | | | | | | | * | | |
| Critical Care/ (CCU)Intensive Care (ICU) and/or High Dependency Unit (HDU) | * | * | * | | * | | | | | * | | * | * | * |
| Dermatology | * | * | * | | * | * | * | * | * | * | * | * | * | |
| Diabetes | * | * | * | | * | | | * | | * | | * | * | * |
| Electrophysiology | | | | | | | | | | | | | * | |
| Endocrinology | * | | * | | * | | | * | * | * | | * | * | * |
| ENT - Ear, Nose & Throat | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Gastroenterology | | | * | | * | | | * | | | | | * | |
| Hepatology | | | | | | | | | * | | | | * | |
| Infectious diseases | | | | | | | | | | * | | | * | * |
| Internal Medicine | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| IVF | | | * | | coming | * | | * | | | | * | | |
| Neonatology and/or PICU | * | * | * | | coming | | | * | | * | | | | * |
| Neurology | * | * | * | | | | * | | * | * | * | * | coming | * |
| Neurosurgery | * | * | * | | | | * | | | | * | * | * | * |
| Nutrition | | * | * | | | * | | * | * | * | | * | | * |
| Obesity Clinic | * | | * | | * | | * | * | | | | * | * | * |
| Obstetrics & Gynaecology | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Oncology | | | * | | | | | | | | | * | | |
| Ophthalmology | * | * | * | | * | | * | | * | * | * | * | * | * |
| Orthodontics | * | * | * | * | * | | | * | * | * | | * | | |
| Orthopaedics | * | * | * | | * | | * | * | * | * | * | * | * | * |
| Paediatrics (and/or Paediatric Surgery) | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Pain management clinic | | * | | | * | | | * | | | | | | * |
| Physiotherapy | * | * | * | | * | | * | * | * | * | | * | * | * |
| Plastic surgery | | * | * | | | * | | * | | * | | * | | |
| Psychiatry/Psychology | * | * | * | | | | | | | | | * | | |
| Renal | | * | | | * | | | * | | | | | | * |
| Respiratory medicine | * | * | | | | | | * | | * | * | | | |
| Rheumatology | | * | * | | * | | | * | | * | * | * | | |
| Sleep Studies Unit | * | | * | | | | | * | | * | | coming | | |
| Speech therapy | | | | | | | | | | | * | | | * |
| Sports medicine/Rehabilitation | * | * | | | * | | | * | * | * | * | | * | |
| Strokes | * | | | | | | | | | | | | | |
| Urology | * | * | * | * | * | coming | * | | * | * | * | * | * | * |
| Vascular Surgery | | * | * | | | * | * | * | | | | * | * | |
| Dental | * | * | * | * | * | * | | * | | * | * | * | * | |
| Cosmetic | | * | * | | | * | | * | * | | * | | | |
| Complementary | | | * | | | | | * | * | | | * | | |
| medicine | | | | | | | | | | | | | | |