

# ENROULLEMENT

Matricule **MED-1522-911**

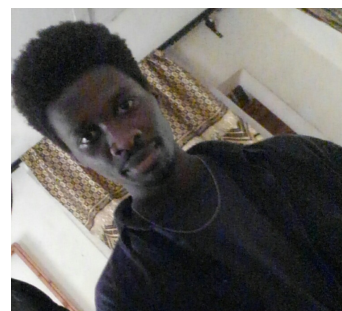
Prenom **Saliou**

Nom **sene**

Email **gningahmed01@gmail.com**

Telephone **775983257**

Fonction **MEDECIN**



-----