



کراچی یونیورسٹی

University of Karachi

FACULTY OF MEDICINE
Bachelor of Medicine and Bachelor of Surgery

کلیہ طب

ایم۔ بی۔ بی۔ ایس

Whereas

SAIMA FAROQUI

D/O

MUHAMMAD MUHAMMAD FAROQUI

فائرڈ قلم
مقتدر
محمد

بنت

فائرڈ قلم
صائمہ

ہرگاہ

has pursued a course of study prescribed
in this University for the Degree of
Bachelor of Medicine and Bachelor of
Surgery in Faculty of Medicine and
has passed the requisite examination
held in MARCH 2003

نے کلیہ طب کے تحت ایم۔ بی۔ بی۔ ایس کی سند
کے لیے اس جامعہ کے منظورہ نصاب کی تکمیل کرنی ہے اور مطلوبہ
امتحان منعقدہ مارچ ۲۰۰۳ میں
کامیابی حاصل کر لی ہے،

It is hereby certified that he/she has
been duly admitted to the degree of
Bachelor of Medicine and Bachelor of Surgery
in this University.

لہذا تصدیق کی جاتی ہے کہ انھیں اس جامعہ میں
ایم۔ بی۔ بی۔ ایس کے درجہ پرفائز کیا گیا۔

Registrar

28/11/03

Vice-Chancellor

Dated Karachi, the 24TH NOVEMBER 2003

ظفر حسین
شیخ الجامعہ

فہم الدین
مسجل

کراچی بتایخ ۲۴ نومبر ۲۰۰۳

امتحان کے مضامین اور حاصل کردہ نشانات کی تفصیلات علیحدہ جاری کی گئی ہیں۔

Detailed transcripts of examination results have been issued separately.

PAKISTAN MEDICAL AND DENTAL COUNCIL

G-10/4, Mauve Area, Islamabad

Website : www.pmdc.pk



CERTIFICATE OF PERMANENT MEDICAL REGISTRATION

Registration Number : 45195-S
CNIC/Passport : 4200004620166
Name : SAIMA FAROOQUI
Father Name : MUHAMMAD MUQTADI FAROOQUI
Present Address : R168 RAINBOW SWEET HOMES MAYMARMORE
SHAHNAWAZ CHS SECTOR 51 A SCHEME 33 KARACHI,
KARACHI, PAKISTAN
Contact Number : 03342056487
Permanent Address : HOUSE NO A-115, SECTOR 14-B SHADMAN TOWN
NORTH KARACHI KARACHI



Registration Date : 16/08/2003 Valid Up to : 04/10/2028

Qualification	Institute/University	Year
1 MBBS	KARACHI UNIVERSITY	2003

It is hereby certified that the Permanent license holder is authorized to treat all ordinarily recognized common medical ailments and as permissible under section 42 of the Pakistan Medical & Dental Council Act 2022. The license holder shall not represent himself/herself as a specialist/consultant or practice as a specialist until his/her postgraduate qualification in the relevant field is registered by the Council.

IMPORTANT NOTICE

1. A copy of this certificate has to be displayed prominently in the place of practice.
2. The Issuing Authority reserves the right to recall, correct or cancel this Certificate.



Signature of Registrar

REGISTRAR

No. 14322



Know all men by these Presents, that we the
President and Council of the College of Physicians

and Surgeons Pakistan admit *Verified From The College
Record And Certified To Be True*

Dr. Saima Farooqui

DR. MUHAMMAD SHARIF
Chief Controller of Examinations
College of Physicians & Surgeons Pakistan

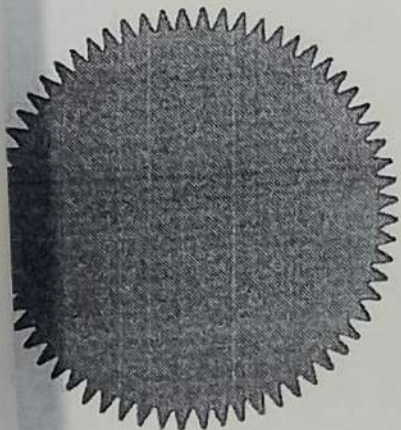
★ ★

a Member of the College

★ ★

in the subject of Family Medicine

In witness thereof, we have subscribed our names
and caused the seal of the College to be hereunto
affixed this 5th day of August 2023



[Signature] President

[Signature] Member
Executive Committee

[Signature] Registrar
of the College