

# BASMAT NIZWA MEDICAL COMPLEX

P.O.BOX:1726 Postal Code:611 NIZWA  
Sultanate of Oman C.R:5/13155/3  
TEL:25432103



مجمع بسمة نزوى الطبي

ص.ب: ١٧٢٦ الرمز البريدي: ٦١١ نزوى  
سلطنة عمان س.ت: ٥/١٣١٥٥/٣  
هاتف: ٢٥٤٣٢١٠٣

## Sick Leave Certificate

Date Of Issue: 18/09/2022

REF No: 0490696

Name of the Patient	Designation/Place of Work	File No.	Resident Card	DOB
SAMIYA SALIM AL RIYAMI		140491	17918238	29/11/1990

This is To certify that the above mentioned person was examined/treated by me and found to suffer from tosillitis as an Out Patient on 18/09/2022 at 09:59

He/She is authorized sick leave from 19/09/2022 to 19/09/2022 for 1 days.

### Remarks :

To be countersigned by Consultant if sick leave exceeds THREE days.

*This certificate is not valid without doctor's signature and stamp of Clinic/Polyclinic/Hospital*

Patient Signature

مجمع بسمة نزوى الطبي  
BASMAT NIZWA MEDICAL COMPLEX  
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Postal Code : 611 الرمز البريدي : ٦١١  
C.R : 5/13155/3 س.ت : ٥/١٣١٥٥/٣  
Licence No : 1812 رقم الترخيص : ١٨١٢



Doctor's Signature with seal

د. اناس حليم ابو حمزة  
بسمة نزوى  
٢٠٠٨٢

DR. ENAS ABOU HAMZEH  
GENERAL PRACTITIONER

Office seal

Countersigned by Directorate of Private Health Establishment, Affairs





Leave Certificate

Date : 20-SEP-22  
Name of Patient : Samiya Salim Sulaiyam Al Riyami  
Age : 31 Year(s) Sex : Female  
Patient Id. : 102311  
Department : GENERAL PRACTICE  
Unit : G. PRACTICE

This is to Certify that SAMIYA SALIM SULAIYAM AL RIYAMI(#102311 - . - work) was examined / treated by me/my department and found to suffer from  
Acute pharyngitis, unspecified  
She attended the clinic as an Out Patient on 19/09/2022.

She is authorised to get the sick leave on 20/09/2022.

To be countersigned by medical office in-charge or his deputy or the concerned consultant, if leave exceeds 3 days.

HOSPITAL STAMP



IBRAHIM ABDEL RAOUF

Signature and Rubber Stamp of Doctor

\* This certificate is not valid without the HOSPITAL STAMP.