

Date : 25-12-2021

SICK LEAVE CERTIFICATE

IR No.	:	BH211987	Age / Gender	28 / M
Patient Name	:	Mr. KHALIFA ABDUL RAHMAN KHALIFA ALSHUKAILI		
Institution /Company	:			
Designation	:		Department :	

This is to certify that above mention person was examined / treated by me and found to suffer from (Diagnosis) fever ,, respiratory tract infection as an

Outpatient on 25-12-2021 He/She authorized sick leave from 26-12-2021 to 26-12-2021

No. of days 1 . He/She is advised to report back to the clinic for follow up on

Others



Dr. Mustafa Abduljabbar Othman Al I

