

AL ZAYYANA POLYCLINIC

CR No.: 1203807, Tel.: 25694478, P.O. Box:

Certificate of Sick Leave for a Patient Attending in OPD/Emergency Dept.

Date of Issue: 09/02/2022

Detail Of Patient:

Patient Name: AMAL SULTHAN AL MAQURSHI

Age: 29 Yrs

Sex: F

Job And Place Of Work: lecturer

Hospital No: OM042100008

O.P Department: DENTIST 2

Clinic:

Date /Time Of Attendance: 09/02/2022

From Time: 09:30:43

To Time: 10:29:39

((This is to certify that the above mentioned Patient was examined and treated as outpatient and found to suffer from.K02.52-Dental caries on pit and fissure surface penetrating into dentin))

This is to certify that the patient is authorized to get a sick leave for 1 days From:09/02/2022 To 09/02/2022.

Doctor's Name: DR. ASIYA TARANNUM

Signature & Rubber Stamp of Doctor

(If Sick leave exceeds Three days it should be counter signed Hospital Director/Concerned Consultant/Head of Health Center))

Name of Hospital Director/Head of H.C.:

Signature:

