

BADR AL SAMAA HOSPITAL NIZWA LLC

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Sultanate of Oman

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Sick Leave Certificate

Date Of Issue: 23/10/2021

REF No: 0467732

Name of the Patient	Designation/Place of Work	File No.	Resident Card	DOB
JIJINLAL G A	NATIONAL LIFE INSURANCE	3020026		03/01/1983

This is to certify that the above mentioned person was examined/treated by me and found to suffer from **B30.9 Viral conjunctivitis, unspecified** as an Out Patient on **23/10/2021**

He/She is authorized sick leave from **24/10/2021** to **26/10/2021** for **3** 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

Doctor's Signature with seal



Dr. BLESSY THANKOM MATHEWS
OPHTHALMOLOGIST

Office seal

Countersigned by Directorate of Private Health Establishment, Affairs