



IZKI DENTAL CLINIC

C.R : 1095191
P.O Box : 1123
Postal Code : 611
Sultanate of Oman

SICK LEAVE CERTIFICATE

Date : 05-Jul-2021

Name of the Patient	Designation / Place of Work	Hospital No / Employee No
pritam keshavdas	tutor university	10285

This is to Certify that the above named person was examined / treated by me and found to suffer from

Diagnosis Pulp necrosis

As an Out Patient On 05-Jul-2021

He is authorized sick leave from 05-Jul-2021 to 05-Jul-2021 for 1 days



Signature & Rubber Stamp of Medical Officer

Dr. Shaju K. Hassan Kutty
Dental Surgeon

