



**OLJABET HOSPITAL**

**PO BOX 543-20300**

**NYAHURURU**

**0703333111**

**DEAR SIR/MADAM**

The Above Named Person has been diagnosed with Gastritis/PUD and has been advised to avoid acidic diet and that may trigger Acid Formation, kindly give him/her the required dietary support.

**NUTRITIONIST IN-CHARGE**

Name: .....

Sign: .....