**CERTIFICATE OF TREATMENT**

***SURAT KETERANGAN BEROBAT***

Visit ID: ………………

That the undersigned/*Yang bertandatangan di bawah ini*: dr %NameDoctor%

Explains clearly that/ *Menjelaskan dengan jelas bahwa*:

Name/ *Nama* : %NamePatient%

Age/ *Umur* : %AgePatient% %genders%

Occupation/ *Pekerjaan* :

Address/ *Alamat* : %AddressPatient%

He has indeed come for treatment/health consultation on :

*Nama di atas betul datang untuk pengobatan/konsultasi kesehatan pada*

|  |  |
| --- | --- |
| Day/Hari : %Days% | Date/Tanggal : %Dates% |

Hours/Jam : %Times% WIB

Hopefully, This Certificate is made that it can be used properly

*Sertifikat ini dibuat agar dapat digunakan sebagaimana mestinya*

Batam, %Date%

(%NameDoctor%)

SIP: %SIPDoctor%

Name and Signature

*Nama dan TTD*