

| Slimming Sheet Consent | | | | | | | | | | |
|------------------------|---|-----------|----------------|---|-------------|-------------|---|-------------------|--|--|
| Patient Name | : | Alston Re | Alston Rebello | | | Emirates ID | : | 111-1111-111111-1 | | |
| File No | : | 17 | DOB | : | 1996-06-20 | Nationality | : | Indian | | |
| Gender | : | Male | Doctor's Name | : | Ahmad Irfan | Date | : | 2023-12-19 | | |

Patient Measurment

| Session No | Date | Session Type | Covered Area | Before | After | Power Degree |
|------------|---|--------------|--------------|--------|-------|--------------|
| 1 | 12/6/2023 12:00:00 AM | | | 2010.0 | , | |
| | , | | | 1 | 1 | |

| Sign here, only if all of your questions have been answered to your satisfaction | | | | | |
|--|---|--|--|--|--|
| PATIENT | DOCTOR | | | | |
| | | | | | |
| Patient Name Alston Rebello Date 2023-12-19 | Doctor/Therapist Name Ahmad Irfan - Hijama (GD007) Date 2023-12-19 | | | | |