

Slimming Sheet Consent									
Patient Name	:	Vision Test P	Patient			Emirates ID	:	784-6987-5266587-7	
File No		2	DOB	:	2020-06-17	Nationality		Indian	
Gender		Female	Doctor's Name	:	Ahmad Irfan	Date		2023-12-07	

Date
Session Type
Covered Area

Session Type
Covered Area

Patient Measurment

Power Degree
Before After

Multi
5 5 5

Sign here, only if all of your questions have been answered to your satisfaction							
PATIENT	DOCTOR						
Patient Name Vision Test Patient Date 2023-12-07	Doctor/Therapist Name Ahmad - Hijama (GD007) Date 2023-12-07						