



## Slimming Sheet Consent

|              |   |                |               |   |                    |
|--------------|---|----------------|---------------|---|--------------------|
| Patient Name | : | Alston Rebello | Emirates ID   | : | 111-1111-1111111-1 |
| File No      | : | 17             | DOB           | : | 1996-06-20         |
| Nationality  | : | Indian         | Date          | : | 2023-12-19         |
| Gender       | : | Male           | Doctor's Name | : | Ahmad Irfan        |

| Date                   | Session Type | Covered Area | Patient Measurment |       | Power Degree |
|------------------------|--------------|--------------|--------------------|-------|--------------|
| 12/22/2023 12:00:00 AM | Normal       | Single       | Before             | After | Multi        |
|                        |              |              | s                  | s     |              |

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