

Informed Consent For Veneers								
Patient Name	:	MOHAMMAD KAUNAIN TAUFIQUE			Ø"Ø·Ø§Ù,Ø© Ø§Ù,,Ù±Ù^ÙŠØ© Ø§Ù,,Ø¥Ù...Ø§Ø±Ø§ØªÙŠØ©	:	784-1996-5685117-9	
Ø±Ù,Ù... Ø§Ù,,Ù...Ù,,Ù	:	7000318	ØªØ§Ø±ÙŠØ© Ø§Ù,,Ù...ÙŠÙ,,Ø§Ø´	:	1996-07-08	Ø¬Ù+Ø³ÙŠØ©	:	Indian
Ø¬Ù+Ø³	:	Male	Ø§Ø³Ù... Ø§Ù,,Ø·Ø´ÙŠØ´	:	Bahrain_Doctor xcxc	ØªØ§Ø±ÙŠØ©	:	2023-10-13

Ù,Ù... Ø"Ø§Ù,,ØªÙ^Ù,ÙŠØ¹ Ù±Ù+Ø§Øœ ÙÙ,Ø· Ø¥Ø°Ø§ ØªÙ...Øª Ø§Ù,,Ø¥Ø¬Ø§Ø´Ø© Ø¹Ù,,Ù%º Ø¬Ù...ÙŠØ¹  
Ø£Ø³Ø¹Ù,,ØªÙ¸ Ø´Ù...Ø§ ÙŠØ±Ø¶ÙŠÙ¸

PATIENT WITNESS DENTIST  
MOHAMMAD KAUNAIN TAUFIQUE  
Date  
2023-10-13  
Date  
2023-10-13 Bahrain\_Doctor - Dental (GT17520)  
  
Date  
2023-10-13

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Patient Name