Doctor Agreement

Date: 04/10/2025

This agreement is made between:

Doctor Details	Information
Name	Suryakala Yadav
Registration No.	51277
Specialty	Urologist
Email	suryakala.softwaredevloper@gmail.com
Mobile	6364238063

Terms and Conditions

Doctor's Signature: _

Date: 04/10/2025

1.	The doctor agrees to provide medical services as per the agreed terms.
2.	The agreed compensation amount is Rs. 200000.00.
3.	The doctor confirms their credentials and qualifications as stated above.
4.	The doctor agrees to maintain patient confidentiality and follow medical ethics.
5.	This agreement is valid from the date of signing.

This is a computer-generated document and does not require a physical signature.