DR. A. MURPHY

M.B.B.S (GENERAL MEDICINE) | REGD. NO. 000000 (IMC)

doctor@getmedicalcertificate.com

MEDICAL CERTIFICATE - SICK LEAVE

ISSUE DATE: DD/MM/YYYY **DOCUMENT NO.: SAMPLE-000000**

This is to certify that I, Dr. A. Murphy, after examining Mr. John Sample, aged 34 years, gender-male, has diagnosed the patient with an acute upper respiratory tract infection.

I do consider patient unfit to work for 2 days from DD/MM/YYYY to DD/MM/YYYY. It is necessary for the restoration of the patient's good health.

Submitting at - John Sample, 1 Example Street, Sampletown

Patient Address :- 1 Example Street, Sampletown, Sample County, Ireland.

Patient's Name :- John Sample

A. Murphy

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Dr. A. Murphy
Doctor's Name