

Doctor's Excuse for Work

Patient Name

Age

Gender

To whom it may concern,

_____ applied to me on _____ with a
complaint of _____.

As a result of the examinations and tests, _____ was diagnosed with
_____.

Kindly allow _____ to rest and be excused from work for
_____ days. This patient has a medical condition listed below with the
suggested treatment.

Diagnosis

Treatments



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