



**SPARSH**

Multispeciality Hospital & I.C.C.U.

Sudama Arcade,  
Dr. R. P. Road, Tilak Nagar,  
Dombivli (E) 421 201.  
Tel.: 0251 - 2445044, 2448044

## Medical Certificate

Sr. No. **4466**

IPD No.

Date: **21/9/23**

*This is to Certify that*

Mr./Ms. **Omkar Niwadkar** Age: **32y (M)**

is/was suffering from **Dengue fever**.

He/She is/was admitted to this hospital has/taken treatment on outpatient basis  
from Date **9/9/23** to Date **15/9/23**.

He/She is/was advised a period of rest.

from Date **15/9/23** till further advice/Date **22/9/23**

He/She is fit to resume duties from Date **20/9/23**

He/she is given following special advise .....

Consultants  
Name & Stamp with  
Registration No.

Resident Doctor's  
**Dr. Hemant S. Wahane**  
M.D. (Medicine)  
Reg. No. 2001/06/2425  
Signature & Name