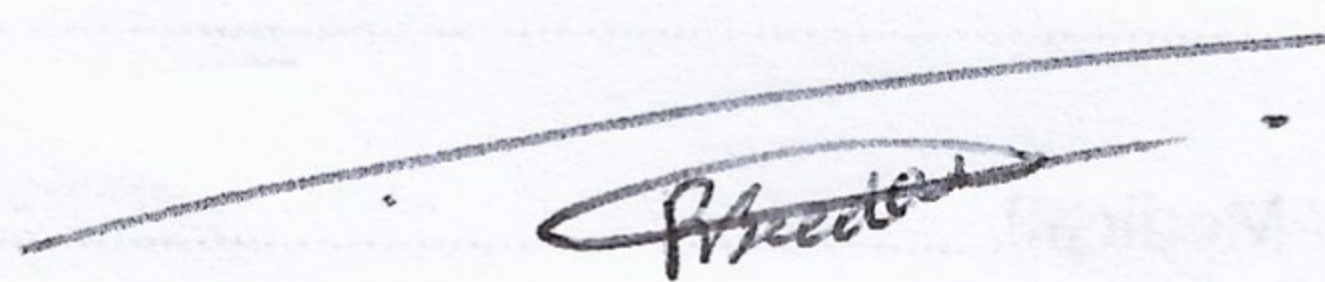



PRESCRIPTION FORM

Patient's Name _____	Dr Priyanka BEEDASY FC NEUROLOGY [South Africa] MMed Neurology [Durban] MbChB [Cape Town] Registration No. 02234	Date 05 / 06 / 2021
Doctor's Name _____	TO HIGH COMMISSION OF INDIA	
THIS IS TO CERTIFY THAT MR MAHENDRA KAJROLKAR IS TRAVELLING TO INDIA FOR MEDICAL TREATMENT FOR BRAIN LESION AND I RECOMMEND THAT HE HAS TO BE ACCOMPANIED BY HIS WIFE, MRS NANDEETA KAJROLKAR (NIC J25 06744102195) FOR TRAVEL BY PLANE.		
		
		

Specialities

Cardiac Sciences, Critical Care, General Surgery, Minimal Invasive Surgery, Obstetrics & Gynaecology, Neonatology, Paediatrics, Orthopaedics, Endocrinology, Internal Medicine, Renal Sciences, Neuro Sciences, Ophthalmology, Oncology, Cosmetic & Maxillo-Facial Surgery, ENT, Chest Medicine, Dental, Dermatology, Gastroenterology, Psychiatry, Radiology, Rheumatology