## **Doctor’s note for work**

Doctor/Clinic name

State/City/ Road

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender \_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_

Dear\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Kindly allow (patient’s name) to rest for the next two days from today. After my examination I have found out that they are yet to cure from a serious throat infection. I have prescribed proper medication besides recommending high intake of warm fluids. Thank you for your cooperation.

Doctor Carter

[Doctors signature]