



**KPJ SELANGOR**  
**SPECIALIST HOSPITAL**

Serial No : 539480

SELANGOR SPECIALIST HOSPITAL SDN. BHD. (216179-P)  
(formerly know as Selangor Medical Centres Sdn. Bhd.)  
(A Member of KPJ Healthcare Berhad Group)  
Lot 1, Jalan Singa 20/1, Section 20, 40300 Shah Alam, Selangor Darul Ehsan, Malaysia.  
Tel: +603-5543 1111 Fax: +603-5543 1722

**HOSPITALIZATION**

**MEDICAL CERTIFICATE**  
**SIJIL CUTI SAKIT**

This is to certify that I have examined

*Dengan ini saya mengesahkan bahawa saya telah memeriksa*

Mr / Madam / Miss ..... **MDHD ZAINURIN BIN MAT ARIP** .....  
Tuan / Puan / Cik

IC / Passport No. / ID No ..... **680428-06-5385** .....  
No. KP. / No. Passport / No. ID

Hospital MRN ..... **563892** .....

And I am of the opinion that:

*Dan mendapati bahawa:*

a) He / She is unfit for the proper performance of his / her duties / to attend school for  
*Beliau tidak sihat untuk menjalankan tugas atau persekolahan selama*  
..... days / from **5/10/2020** .....  
to **26/10/2020** ..... hari / dari  
*hingga*

b) He / She should return for follow-up examination on **20/10/2020** .....  
*Beliau perlu membuat rawatan susulan pada*

c) He / She is fit for regular / light duty on / form ..... to .....  
*Beliau boleh menjalani kerja seperti biasa / kerja ringan pada / dari hingga*  
(Delete (b) or (c) whichever is not applicable)

**DR. SHAHARUDDIN ABDUL RHANI** ..... **9/10/2020** .....  
*M.D. (UKM) M.S. ORTH. (UKM)*  
**CONSULTANT ORTHOPAEDIC AND SPINE SURGEON**  
Signature of Medical Practitioner ..... Date  
**MMO REG: 35139 & NSR REG: 131442**  
**KPJ SELANGOR SPECIALIST HOSPITAL**  
Lot 1, Jalan Singa 20/1, Section 20, 40300 Shah Alam, Selangor.

.....  
Name in Block Letters ..... Official Clinic / Hospital Chop

Date of Admission : .....  
Date of Discharge : .....  
Date of Operation : .....