

PATIENT NAME : KAMRUN NESSA.

PASSPORT NO : A08064482.

ATTENDANT NAME : KAMRUL ISLAM KHAN.

PASSPORT NO : EG0740524.

ATTENDANT NAME : MD.SHAKIL AHMED

PASSPORT NO : A11416454.

WHATSAPP NO : +8801743833916.

EMERGENCY CONTACT : +8801711056774.

DEPARTMENT : ONCOLOGY(CANCER).

DISEASE : BREAST CANCER.

EMAIL ID : [khanairconbd@gmail.com](mailto:khanairconbd@gmail.com).

NEW / OLD PATIENT : NEW PATIENT. .

APPROXIMATE DATE :VISA PROCESSING APPROPRIATE DATE .

NEED INVITATION FROM : TATA MEMORIAL CANCER HOSPITAL KOLKATA OR ANY OTHER CANCER HOSPITAL IN KOLKATA.

DOCTOR NAME :

HOSPITAL NAME :

VISA TYPE : MEDICAL VISA (MULTIPLE ENTRY).