PAKISTAN MEDICAL COMMISSION

(SUCCESSOR OF PAKISTAN MEDICAL & DENTAL COUNCIL)
G-10/4, Mauve Area, Islamabad
Website : www.pmc.gov.pk

FULL LICENSE MEDICAL

Registration Number	:	44468-S
CNIC/Passport	:	4540106058473
Name	:	MUKHTIAR AHMED
Father Name	:	HAJI KHAN ABRO
Present Address	:	MEDICAL UNIT 1 PMCH HOSPITAL NAWABSHAH, PAKISTAN
Contact Number	:	03003041691
Permanent Address	:	SAFFAN MUHALA NEAR HABIB BANK P.O DAULAT PUR TALKA QAZI AHMED DISTRICT NAWABSHAH

Registration Date : 30/06/2003 **Valid Upto** : 31/12/2027

Qualification	Institute/University	Year
1 MBBS	LIAQUAT UNIVERSITY OF MEDICAL & HEALTH SCIENCES	2003
2 FCPS Medicine	CPSP	2014

Remarks
THE ABOVE QUALIFICATION(S) ARE SUBJECT TO THE CLASSIFICATION OF POST GRADUATE, ALTERNATIVE, ADDITIONAL, QUALIFICATIONS AS NOTIFIED BY THE COMMISSION.

It is hereby certified that the Full License has been duly issued by the National Medical Authority of the Pakistan Medical Commission. The Full License holder is authorized to treat all ordinarily recognized common medical ailments and as permissible under Section 29(2) of the Pakistan Medical Commission Act, 2020. The License Holder shall not represent himself as a specialist / consultant or practice as a specialist in the absence of the name of the License Holder having been entered in the Higher Medical Specialist Register.

IMPORTANT NOTICE

1. The Licensed Medical Practitioner shall apply for the revalidation of this License three months prior to the date stipulated for revalidation by the Medical & Dental Council.
2. The Licensed Medical Practitioner shall apply for renewal of this License at least one month prior to its expiry.
3. The issuing Authority reserve the right to recall, correct or cancel this License.

MEMBER LICENSING