Sample Medical Certificate of Illness

A medical certificate of illness issued by a medical institution must include the following information:

(Letterhead of Medical Institution)

Name of Medical Institution

Address and Phone Number

Medical Certificate of Illness

I hereby certify the medical condition of the following person:

This information must match the details on the applicant's Macao SAR Resident ID Card. If there is any discrepancy, additional supporting documents must be provided to confirm that both refer to the same person.

Full Name: Chan Tai Man

Macao SAR Resident Identity Card No.: 1234567(8)

Name of Illness: Lung cancer

Approach to Treatment: Surgery [Treatment Period:]

Chemotherapy [Treatment Period:]

Radiotherapy [Treatment Period:]

Period of Illness: 10 February 2025 to 28 October 2025

Medical Condition:

The illness must be described in detail, including its severity and its adverse impact on the applicant's health and daily life, such as the inability to live independently or the need for ongoing treatment.

Seal of Institution: **Seal of Institution**

Practitioner's Title: Chief Physician

Practitioner's Name: Lei Sei

Signature of Practitioner: *Lei Si*

Date of Signature: 1 April 2026

The medical certificate of illness must be issued after the period of illness.