

MEDICAL EXAMINATION RECORD

Annual Physical Examination

Pre-Employment

Last Name PISCADERO First Name JOHN DAVID M.I. K Date 08/28/2018
 Address CEBU CITY Age 26 Civil Status SINGLE Sex MALE
 Place of Birth CEBU CITY Date of Birth 12-11-1991 Insurance Provider MAXICARE
 Occupation JR. BUILDER Name of Company CML MOPPO INC Tel. / Mobile no. 09258727266

PHYSICAL EXAMINATION

Temp.: 36.4°C PR: 64 bpm RR: 13 cpm BP: 110/90 mmHg Ht.: 163 cm Wt.: 68 kg
 Visual Acuity: Right Eye: 20/20 Left Eye: 20/20 BMI: 25.6 Underweight: Overweight:
 no eyeglasses Normal Weight: Obese:

MEDICAL HISTORY

Past Medical History: (-) allergies - shrimp, crabs (P) BA - no maintenance (-) HPN (-) DM: smoker x 5 pack yrs, occasional alcohol
 Family History: HPN - maternal
 Previous Hospitalization: Amnesia - Cerebral, 2011
 Menstrual History: Parity: _____ LMP: _____ Contraceptive Use: _____

Review of Systems	Normal	Findings	Review of Systems	Normal	Findings
Head & Scalp	/		Lungs	/	
Eyes & Ears	/		Heart	/	
Skin / Allergy	/		Abdomen	/	
Nose & Sinuses	/		Genitals	/	
Mouth / Teeth / Tongue	/		Extremities	/	
Neck / Nodes	/		Reflexes	/	
Chest/ Breast	/		BPE	/	

Laboratory	Normal	Findings	Laboratory	Normal	Findings
Chest X-Ray			ECG		
HBC			Other Procedures:		
Urinalysis					
Stool Analysis					
Drug Test					

I certify that I have examined and found the employee to be physically Fit Unfit for employment.

Classification:

CLASS A Physically fit for all types of work

CLASS B Physically fit for all types of work
 Has minor ailment/ defect. Easily curable or offers no handicap to job applied.
 Needs treatment/ correction anemia
 Treatment optional for: _____

CLASS C Physically fit for less strenuous type of work. Has minor ailments/ defects.
 Easily curable or offers no handicap to job applied.
 Needs treatment/ correction _____
 No treatment needed for: _____

CLASS D Employment at the risk and discretion of the management

CLASS E Unfit for employment

PENDING For further evaluation of: _____

Remarks: _____

Patient's Signature

08/28/2018
Date Examined

Medical Examiner, M.D.
License No.: 0405201