

	Annual Phys	ical Examination [1	Pro	e-Employment [
Last Name		First Name	Michelle Faith	M.I.	Budiong an Date 09/05/19		
Address &o. Panganiban	St. Panina Cen	tral Age 72		Civil Sta	tus Single Sex F		
Place of Birth Pinamung ajan cebu Date of Birth September 4, 1994 Insurance Provider Prime Care							
Occupation CSR		Name of Co	ompany Iploy		Tel. / Mobile no. 094536143 13		
		PHY	SICAL EXAMINAT	ION			
Temp.: 168 °C PR: Go bpm RR: B bpm BP: 100 170 mmHg Ht: 147 cm Wt: 40 kgs.							
Visual Acuity: Right Eye: 20/20 BMI: 18/8 Underweight: Overweight: Overweight: Obese:							
Past Medical History:	(-)						
Family History:	nm						
Previous Hospitalization	n: While	huard -	AUE				
Menstrual History: 10 y.o Parity: Gofo LMP: 7-10-19 Contraceptive Use: 100 nc							
Review of Systems	Normai	Findings	Review of Systems	Normal	Findings		
Head & Scalp			Lungs	/	and the same of th		
Eyes & Ears			Heart	/			
Skin / Allergy			Abdomen		\sim		
Nose & Sinuses			Genitals				
Mouth / Teeth / Tongue			Extremities				
Neck / Nodes			Reflexes				
Chest/ Breast			BPE				
Laboratory	Normal	Findings	Laboratory	Normal	Findings		
Chest X-Ray			ECG	NA			
CBC			Other Procedures:	70.5			
Urinalysis							
Fecalysis	VA	Total A. A.					
Drug Test		FOR OID					
I certify that I have examin	ed and found th	ne employee to be p	ohysically [] Fit [] Unfit f	or employ	ment.		
Classification:							
[/] CLASS A Physically fit for all types of work							
[]CLAS	SS B	Physically fit for all	* ·				
			defect. Easily curable or o	offers no r	nandicap to job applied.		
		[] Needs treatment/ correction					
[1 CL AS	26.0] Treatment optional for:				
[]CLAS	55 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							
		(E) (E)					
[1 CL AS	SS D] No treatment needed for:					
		Infit for employment					
[] PENDING For further evaluation of:							
					01:		
Remarks:		1			- Gu		
m		oshotl			Mender Rame, M.D.		
Patient's Signature Date Examined Medical Examiner							
V			Lice	ense No.:	12014		



IMMEDIATE MEDICAL AND DENTAL CARE CENTER AND CENTRAL CARE CENTER AMABOLO, Cebu City, 6000 Philippines Tel Nos. (032) 292-2273 * (032) 266-3245

LABORATORY DEPARTMENT

License TO OPERATE No.: 07-065-17-AS-2

No.: 170122				SO No.: 00764257
Name: YU, MICHELLE I	FAITH BUDIONGA	Age: 22 yrs.	Date: 8/ 5/2019	
Requested by:	e			Sex: FEMALE
		Company:	IPLOY INC.,	
		Charge To:	IPLOY INC.,	
CO	MPLETE BL	OOD C	COUNT	
				mal Values
() WBC	6,200	/mm ³		,000 /mm ³
() RBC	4.10	x 10 ⁶ /mn		Adult
()1150	4.10	_	F: 4.2 - 5	.4 X 10 ⁶ / mm ³
			M: 4.7 - 6	5.10 X 10 ⁶ / mm ³
				Pedia
				.1 X 10 ⁶ / mm ³
			M: 4.0 - 5	5.3 x 10 ⁶ /mm ³
() Hemoglobin	12.30	gm%	F: 12-15g	ym% M: 14-17gm%
() Hematocrit	37.00	gm% *	F: 38-48v	ol% M: 40-50vol%
Differential Count				
Neutrophils	56	%	45-65%	
Lymphocytes	38	% *	20-35%	
Monocytes	3	%	2-9%	
Eosinophils	3	%	0-6%	
Basophils		%	0-2%	
Platelet Count	306,000	/mm ³	150.000-	450,000 /mm ³
Others			.00,000	100,000 //////
HBsAg				
Anti-HAV IgM				
Allu-liAV igivi				
NOTE: HEMATOC	RIT CHECKED M	ANUALLY		
1		_	_	
yen -		3		
REX YNAN G. PATALING Medical Technol		PETE		M.D., F.P.S.P.
/ Wiedical Technol	bylat		Patholog PRC #7241	



Medgruppe Polyclinics & Diagnostic Center, Inc.

IMMEDIATE MEDICAL AND DENTAL CARE CENTER
And Level, APM Centrale, A. Soriano Jr. Ave., N.R.A.
Mabolo, Cebu City, 6000 Philippines
Tel Nos. (032) 232-2273 * (032) 266-3245

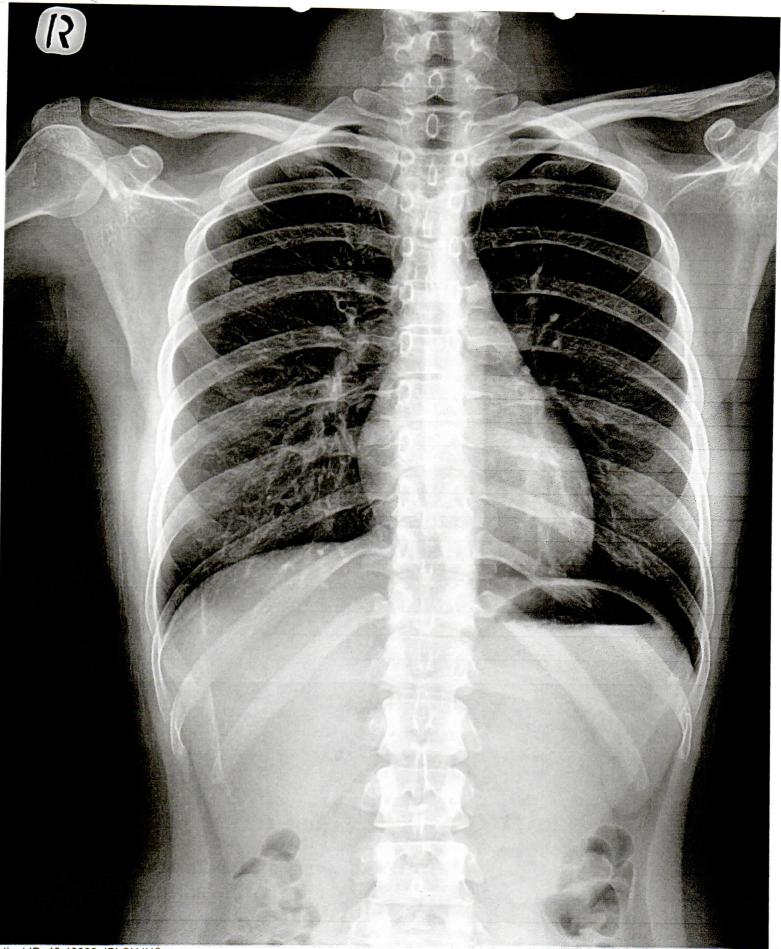
LABORATORY DEPARTMENT

No.:	167696	07-003-17-43-2	SO No.: 00764257
Name:	YU, MICHELLE FAITH BUDIONGAN	Age: 22 yrs.	Date: 8/ 5/2019
Physicia	n:		Sex: FEMALE
Compan	y: IPLOY INC.,	Patient Status:	
Charge 7	To: IPLOY INC.,	-	

: IPLOY INC., : IPLOY INC.,	Patient Status:	
	IALYSIS	
MACROSCOPIC:		
Color	Yellow	
Appearance	Slightly Hazy	
рН	6.0	
Specific Gravity	1.025	
Glucose	Negative	
Protein	Negative	
MICROSCOPIC:		
RBC / hpf	0-1	
WBC / hpf	0-2	
Epith. Cells / hpf	Few	
Casts		
Mucus Threads	Few	
Bacteria	Moderate	
Crystals		
Amorphous (Urates)	Moderate	
Amorphous (PO ₄)		
MISCELLANEOUS:		
Pregnancy Test	N/A	
OTHERS:		
NOTE:		

ALDETCHILLE D. RODRIGO, RMT Medical Technologist

AZNAR, M.D., F.P.S.P. Pathologist PRC #72410



atient ID: 19-13292 IPLOY INC atient Name: YU,MICHELLE FAITH tudy Date: 08/05/2019