Prime Care CEBU

IMMEDIATE MEDICAL & DENTAL CARE CENTER

MEDICAL EXAMINATION RECORD

Annual Physical Examination [ ] Pre-Employment [✓]

Last Name	MIQUILA	**First Name**	JOHN CARLO	**M.I.**	A	**Date**	10/18/2019
Address	43-C GREYHOUND SUBD., KIPASANG-AN, CEBU CITY	**Age**	24	**Civil Status**	SINGLE	**Sex**	MALE
Place of Birth	SIPALAY CITY, NEG. OCC.	**Date of Birth**	10/12/1995	**Insurance Provider**			
Occupation	CSR	**Name of Company**	JPMOY INC.	**Tel. / Mobile no.**	09493481693		

PHYSICAL EXAMINATION

Temp. 37.6 °C PR: 100 bpm RR: 19 bpm BP: 120/70 mmHg Ht: 165 cm Wt: 55.4 kgs.

Visual Acuity: Right Eye: 20/20 Left Eye: 20/20 (With/ Without eyeglasses) BMI: 20.4 Underweight: [ ] Normal Weight: [✓] Overweight: [ ] Obese: [ ]

MEDICAL HISTORY

Past Medical History: (-) @ Fever, colds since 1y PTC.

Family History: (-)

Previous Hospitalization: Sept. 2019 - NUD

Menstrual History: y.o 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		NV
Mouth / Teeth / Tongue	✓		Extremities	✓	
Neck / Nodes	✓		Reflexes		
Chest/ Breast	✓		BPE		

Laboratory	Normal	Findings	Laboratory	Normal	Findings
Chest X-Ray	✓		ECG	NA	
CBC	X		Other Procedures:		
Urinalysis	✓				
Fecalysis	NA				
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: Viral URTI

[ ] 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:

KIMMAX O. VAPOROSO, M.D.
Lic. No. 0147533
PTR No. 1114182

Remarks:

Patient's Signature

10/18/2019
Date Examined

Medical Examiner, M.D.

License No.: 1049