

MEDICAL EXAMINATION RECORD

Annual Physical Examination []

Pre-Employment [X]

Last Name WOLFE First Name JUSTIN M.I. L. Date 11-06-2019
 Address Sitio Upper Capaculan Tisa Age 21 Civil Status SINGLE Sex MALE
 Place of Birth Cebu City Date of Birth 05/24/1998 Insurance Provider N/A
 Occupation BPO Name of Company IPLOY Tel./ Mobile no. 09218158329

PHYSICAL EXAMINATION

Temp.: 36.7 °C PR: 98 bpm RR: 19 cpm BP: 120/80 mmHg Ht: 178 cm Wt: 113 kgs
 Visual Acuity: Right Eye: 20/70 Left Eye: 20/90 BMI: 31.64 Underweight: Overweight:
 (with/without eyeglasses) Normal weight: Obese:

MEDICAL HISTORY

Family History: +1 DM
 Previous Hospitalization: +1 2003-AGE
 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	/	
Mouth / Teeth / Tongue	/		Extremities	/	
Neck / Nodes	/		Reflexes	/	
Check / Breast	/		BPE		
			Rectal		

LABORATORY	Normal	FINDINGS	Review of Systems	Normal	FINDINGS
Chest x-Ray	/		EKG		
CBC	X		Other Procedures	NA	
Urinalysis	/				
Fecalalysis					
Drug Test	NA				

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 applied.
 Needs treatment/ correction EOR, Obesity
 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 _____
 Treatment optional for: _____
- CLASS D Employment at the risk and discretion of the management
- CLASS E Unfit for employment
- PENDING For further evaluation of: _____

Remarks: _____

[Signature] Patient's Signature
 11-6-2019 Date Examined
 [Signature] Medical Examiner, M.D.
 License No. 18014



Medgrupe Polyclinics & Diagnostic Center, Inc.

IMMEDIATE MEDICAL AND DENTAL CARE CENTER

2nd 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

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

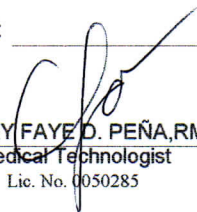
No.: 176285 SO No.: 00777599
 Name: WOLFE, JUSTIN LARENA Age: 21 yrs. Date: 11/6/2019
 Requested by: _____ Sex: MALE
 Patient Status: _____ Company: IPLOY INC.,
 Charge To: IPLOY INC.,


COMPLETE BLOOD COUNT

			Normal Values
() WBC	<u>11,300</u> /mm ³ *		4,000-10,000 /mm ³
() RBC	<u>5.36</u> x 10 ⁶ /mm ³		Adult F: 4.2 - 5.4 X 10 ⁶ /mm ³ M: 4.7 - 6.10 X 10 ⁶ /mm ³
			Pedia F: 4.0 - 5.1 X 10 ⁶ /mm ³ M: 4.0 - 5.3 x 10 ⁶ /mm ³
() Hemoglobin	<u>15.53</u> gm%		F: 12-15gm% M: 14-17gm%
() Hematocrit	<u>46.60</u> gm%		F: 38-48vol% M: 40-50vol%
Differential Count			
Neutrophils	<u>59</u> %		45-65%
Lymphocytes	<u>33</u> %		20-35%
Monocytes	<u>5</u> %		2-9%
Eosinophils	<u>3</u> %		0-6%
Basophils	_____ %	--	0-2%
Platelet Count	<u>360,000</u> /mm ³		150,000-450,000 /mm ³
Others	_____		

HBsAg _____
 Anti-HAV IgM _____

NOTE: _____


 CHERRY FAYE D. PEÑA, RMT
 Medical Technologist
 Lic. No. 0050285


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



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

No.: 174156

SO No.: 00777599

Name : WOLFE, JUSTIN LARENA

Age : 21 yrs.

Date: 11/ 6/2019

Physician : _____

Sex : MALE

Company : IPLOY INC.,

Patient Status: _____

Charge To: IPLOY INC.,

URINALYSIS

MACROSCOPIC:

Color	<u>Yellow</u>
Appearance	<u>Clear</u>
pH	<u>6.0</u>
Specific Gravity	<u>1.020</u>
Glucose	<u>Negative</u>
Protein	<u>Negative</u>

MICROSCOPIC:

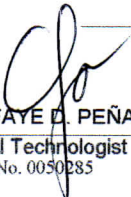
RBC / hpf	<u>0-1</u>
WBC / hpf	<u>1-3</u>
Epith. Cells / hpf	<u>Few</u>
Casts	_____
Mucus Threads	<u>Rare</u>
Bacteria	<u>Rare</u>
Crystals	_____
Amorphous (Urates)	<u>Rare</u>
Amorphous (PO ₄)	_____

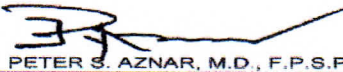
MISCELLANEOUS:

Pregnancy Test N/A

OTHERS:

NOTE:


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 Medical Technologist
 Lic. No. 0050285


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 PRC #72410



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DOH-POEA-MARINA ACCREDITED NO. RLS-584-08-04

Patient Name: WOLFE, JUSTIN LARENA X-Ray No./Case No.: 19-19502
Date of Birth: 5/24/1998 Age: 21 Sex: MALE Date: NOV 6,2019
Company: IPLOY INC., Examination/Procedure: CHEST PA
Referred by: IPLOY INC., Service Order No.: 0000777599

X-RAY REPORT

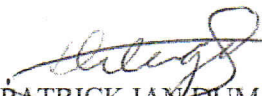
FINDINGS:


Both lungs are clear. The heart is not enlarged. The pulmonary vessels are within normal limits. The trachea is in the midline. Both hemidiaphragms are sharp and distinct. The included bones are unremarkable.

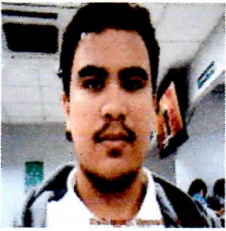
REMARKS:

> NORMAL CHEST

Finding is based on radiographic interpretation. Clinical correlation is suggested.


PATRICK IAN DUMALAGAN
Encoder


KAREN SITACA-DIÑO, MD FPCR PRC#0100318
Radiologist



DEPARTMENT OF HEALTH
MEDGRUPO POLYCLINICS AND DIAGNOSTIC CENTER, INC.
2L APM CENTRALE MALL, SORIANO AVENUE, MABOLO, CEBU CITY, CEBU

Phone Number 266 3245

DRUG TEST REPORT

QI942498
45

CCF No: 201911060032
Name: WOLFE, JUSTIN LARENA
Birthdate: 05/24/1998 Age: 21 Gender: M

Transaction Date Time: 11/8/2019 7:36:00AM
Report Date Time: 11/8/2019 3:23:19PM

Test Method TEST KIT

Purpose
Private Employment

Requesting Parties
IPLOY

Result

Drug/Metabolite	Result	Remarks
METHAMPHETAMINE	NEGATIVE	
TETRAHYDROCANNABINOL	NEGATIVE	

Test Conducted By

Approved By

65 JEZEBEL C. CAPIROL-CURATIVO

DR. PETER SANSON AZNAR 66

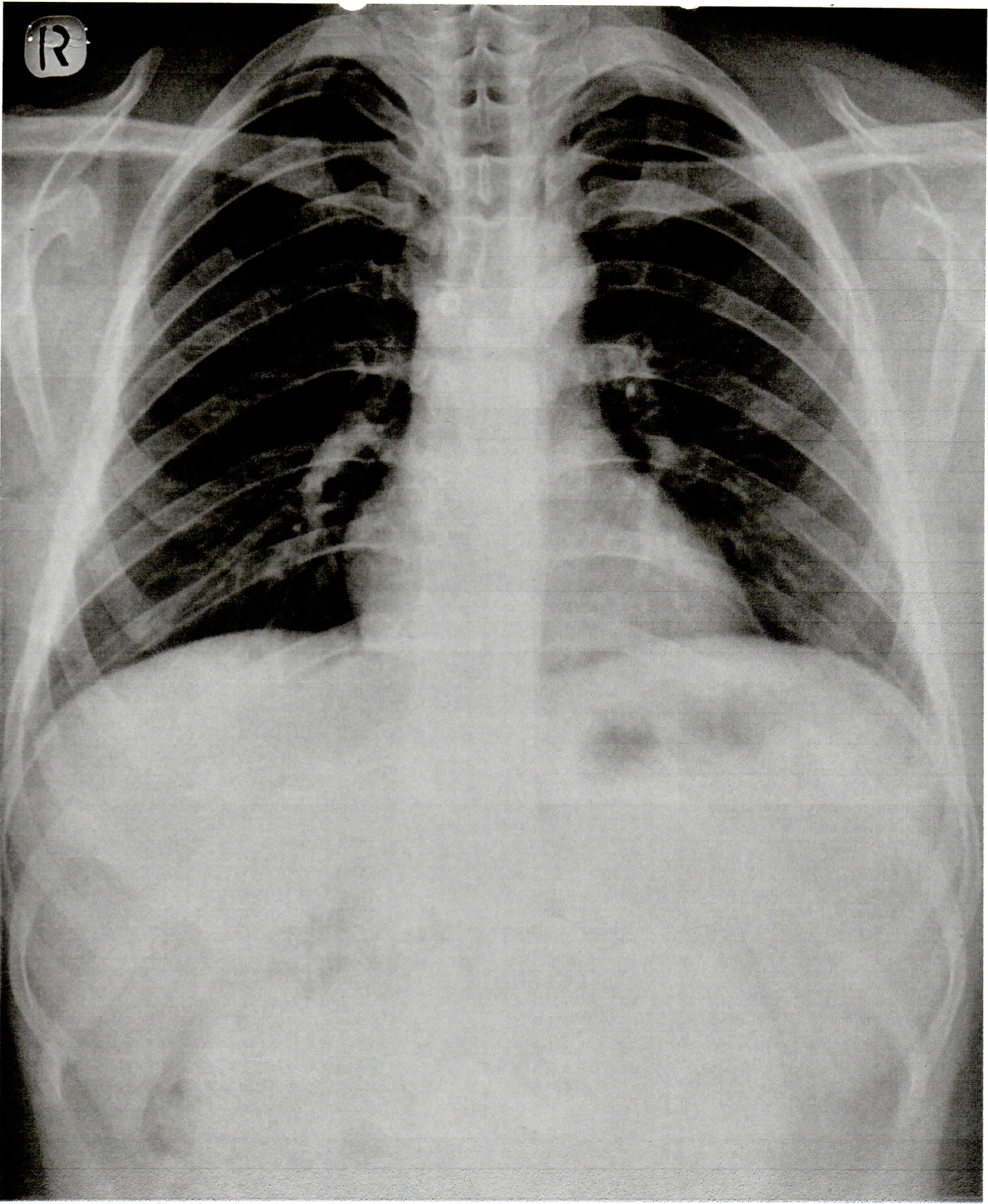
Analyst

Head of Laboratory

Valid Within 12 Month/s from Transaction Date

This is a DOH-DDB IDTOMIS generated report

PRIME CARE CEBU



Patient ID: 19-19502 IPLOY INC
Patient Name: WOLFE, JUSTIN
Study Date: 11/06/2019