<u>Physical I</u>	Examination E	orm	
Patient's Name: SUSAN MI	. Ori	be	
D.O.B: 10-4-1973			
Physician State	ement of Hea	Ith Status	
The patient in reference from a mental and			le to perform his/her
duties. The patient is free of communicable			
 Is in reasonable good health and doe communicable diseases. 	ACCULATION TO THE PARTY NAMED IN COLUMN TWO IS NOT THE PARTY NAMED IN COLUMN TO THE PARTY NAMED IN COLU	to be at ris	k for transmitting
Mantoux Method TB Skin Test		Test Dat	e: <u>04-23-202</u> 4
Chest X-Ray		1	01 01 0004
Quantiferon® TB Gold Result:	NEGATIVE	Reading	Date: <u>M-26-202</u>
Signature	7 1	Omm	
Adolfo R. Martinez M.D.			01 01 0001
M.E.86711		Date:	04-26-2024
DEA: BM 8431455	THE PARTY		
NO CORONAVIRUS TESTING PERFORMED			
Employee Health Release	tor Denial of	TR Signs &	Symptoms

The early signs and symptoms of Tuberculosis are as follows:

Cough

Night sweats

Fever

Loss of weight

Loss of appetite

Bloody sputum

Martinez & Hernandez M.D.P.A. 8480 SW 8TH ST Miami, Florida 33144 (305)264-1131 fax (305)264-1134 martinezhernandez@aol.com

I have read the above information and do not have any of these symptoms at the time. If any of these symptoms develop; I will contact my supervisor immediately.

Patient's Signature

04-26-2024.

Date