



OFELIA L. MENDOZA MATERNITY AND GENERAL HOSPITAL
MOJON, CITY OF MALOLOS, BULACAN
TEL NO. (044)794-7113

PATIENT'S CLINICAL CASE RECORD

| | | | | | |
|---|----------------------------------|------------------------------|---------------------------------|----------------------------|------------------------------------|
| Room: asd | Contact No: 0989786731 | | Case No: asd | | |
| Name: Jasper Alvaro Mendoza | | Age: 21 | Sex Male | CS: asd | Religion: Roman Catholic |
| Address: Maunlad Homes | | | Birthdate: 2021-12-01 | | |
| Occupation: Rapper | | | PhilHealth No: | | |
| Mother's Name: | | Father's Name: | | | |
| Spouse's Name: | | Date of Marriage: | | Place of Marriage: | |
| Date Admitted: 2022-01-23 | Time Admitted: 01:01 | Admitted By: asd | | | |
| Date Discharged: 2022-01-23 | Time Discharged: 01:01 | Discharged By: asd | | | |
| Transferred To Room: | Date: | Time: | | | |
| Attending Physician: (FULL NAME) asd | | | | | |
| Admitting Diagnosis: asd | | | | | |
| Final Diagnosis: asd | | | | ICD 10 CODE: sad | |
| | | | | RVS CODE: asd | |
| OPERATION(s): asd | | | | | |
| DISPOSITION: { } Discharged { } Transferred {/} HAMA { } Absconded { } DIED | | | | | |