



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

PATIENT'S CLINICAL CASE RECORD

Room: 3		Contact No: 09089786754		Case No: 21	
Name: Jasper Jake Alvaro Mendoza		Age: 21	Sex: Male	CS: 2	Religion: Roman Catholic
Address: Maunlad Homes			Birthdate: 2021-10-28		
Occupation: Boxers			PhilHealth No: 23445		
Mother's Name: Ann B Mateo		Father's Name: Shehyee Mendoza			
Spouse's Name:		Date of Marriage:	Place of Marriage:		
Date Admitted: 2021-11-26	Time Admitted: 22:15	Admitted By: Ian Kenneth Gumatay			
Date Discharged: 2021-11-26	Time Discharged: 22:16	Discharged By: Ian Jordan			
Transferred To Room:	Date:	Time:			
Attending Physician: (FULL NAME) Jordan Cayanan Phd					
Admitting Diagnosis: Headache					
Final Diagnosis: Headache				ICD 10 CODE: 9090	
				RVS CODE: 9089	
OPERATION(s): Head Surgery					
DISPOSITION: <input type="checkbox"/> Discharged <input type="checkbox"/> Transferred <input checked="" type="checkbox"/> Transferred <input type="checkbox"/> Absconded <input type="checkbox"/> DIED					