

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

PATIENT'S CLINICAL CASE RECORD

Room:	Contact No:				Case No:		
33	09089786	5754			7		
Name:		Age:	Sex	CS:	Religion:		
Jasper Jake Mendoza			21	Male	2	Roman Catholic	
Address:		Birthdate:					
Maunlad Homes		2021-10-28					
Occupation:				PhilHealth No:			
Boxer	23445						
Mother's Name:			Father's Name:				
Ann B Mateo			Shehyee Mendoza				
Spouse's Name:		Date of Marriage:		Place of Marriage:			
Harold de Leon		2021-11-10		Maunlad Cathedral			
Date Admitted:	Time Admitted:		Admitted By:				
2021-11-10	20:25		lan Kenneth Gumatay				
Date Discharged:	Time Discharged: Discharged By:						
2021-11-10	20:27		lan Jordan				
Transferred To Room:	Date:		Time:				
2	2021-11-10		20:26				
Attending Physician: (FULL NAME)							
Jordan Cayanan Phd							
Admitting Diagnosis:							
Gun Shot					•		
Final Diagnosis:					ICD 10 CODE:		
Gun shot		9090					
			RVS CODE:				
					9085		
OPERATION(s):							
Bullet Removal							
DISPOSITION:		nsferred					
{ } Discharged	{ } HAMA	{ } Abs	conded	{/} DIED			