

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

PATIENT'S CLINICAL CASE RECORD

Room: 1	Contact No: 09089786754			Case No: 1	
Name: Dindy Costales de Jesus		Age: 19	Sex Female	CS: qweqe	Religion: Roman Catholic
Address: Malolos, Bulacan			Birthdate: 1999-09-15		
Occupation: Streamer			PhilHealth No: qweqwe		
Mother's Name: qweqweqw		Father's Name: qweqweqwe			
Spouse's Name: qweq		Date of Marriage:		Place of Marriage:	
Date Admitted: 2021-11-15	Time Admitted: 08:17	Admitted By: eqwe			
Date Discharged: DATEDISCHARGED	Time Discharged: TIMEDISCHARGED	Discharged By: DISCHARGEDBY			
Transferred To Room: TRANSFERREDTOROOM	Date: TRANSDATE	Time: TRANSTIME			
Attending Physician: (FULL NAME) qwe weq weq we					
Admitting Diagnosis: adwdqwe					
Final Diagnosis: FINALDIAGNOSIS				ICD 10 CODE: ICD10CODE	
				RVS CODE: RVSCODE	
OPERATION(s): OPERATIONS					
DISPOSITION: { } Discharged { } Transferred { } HAMA { } Absconded { } DIED					