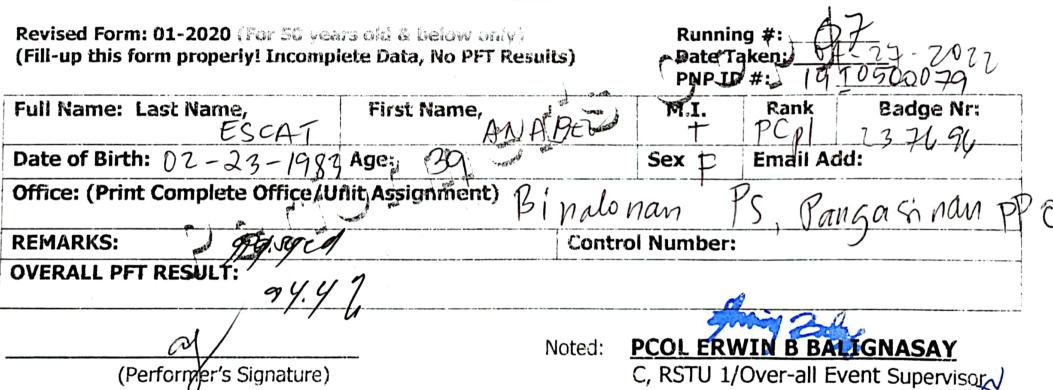


Republic of the Philippines NATIONAL POLICE COMMISSION PHILIPPINE NATIONAL POLICE

POLICE REGIONAL OFFICE 1

Regional Special Training Unit 1







PNP Physical Fitness Test Month of February 2020



Revised Form: 01-2016 (Form (Fill-up this form properly!	-	
Full Name: Last Name,	First Name,	M.I. Rank Sex Female
Date of Birth: $\sqrt{3} - 23 - 10$	Acc	PNP Badge Number: 23769w
Office: (Print Complete Office/	Unit Assignment) Brun U	NAN POLICE STATION PANGACINAN
REMARKS:	"NO GO"	Control Number: 301
(Performer's Signatur	e)	Noted: PLTCOL ARTIQUE D BAYBAYAN TM, RSTU1/Over-all Event Supervisor



PNP Physical Fitness Test 1st Quarter CY 2019



2. Measurement: Height: /6 V c h Weight Result: 20-14 90 3 BP: 1 BP: 10 90 4 PC ROX, HITTUR: NP 5. GO No GO.	at Name & Signature (Obese over 2 8 P: A	Results: e) ne: 29 " 15 lbs;	Running = Date Taken: Je Sign PNP ID =: 16 B 6	16 y 16 y 28, 70 / 9 16 017 4 ne & Signature
Full Name Less Name ESCAT Date of Birth 12 - 23 - 1 Office (Print Complete Office	ANA BET 1983 Age: 31	"† 	Rar POI PNP Badge No WLICE STATION	Sex <i>FEMALE</i> umber: 237694
Events	Raw Score	Rating	Member/Scorer's Name	Team Leader's Name
	39	84	& Signature (PNCO)	& Signature (PCO)
Sit-up (1 minute) Push-up (1 minute)	40	85	0	C /
300 Meter Sprint				PSINSP SAMUEL GAMALIEL S
(for 34 years old & below only) Kilometer Run			1	ARCANO
() 3% for 34 years old & below 2% for 35-44 years old 1) 14 for 45 years old & above	19:01	100		
TOTAL		39.66	REMARKS:	
(Performer's/Signat	ure)	Note	d: PSUPT ARTHUR I TM, RSTU1/Over-all	BAYBAYAN Event Supervisor
	PNP Phy	ysical Fitnes: uarter CY 20	s Test	
Revised Form: 01-2016 (Form (Fill-up this form properly! Incom	nplete Data, No PFT Re	esults)		164 Jasovany 24, 2019 165240174
Full Name: Less Name ESCAT Date of Birth: ()2 - 23 - Office: (Print Complete Office)	An lone	bEV.	HI Ran	Sex FEMPLE
Date of Birth: 02 - 23-	1983 Age 31		- PNP Badge Nu	mber: 237694
Office: (Print Complete Office)	Unit Assignment)	May andr	POWLE STATION	V
REMARKS:				
		Ri	inning Number:	
01/			1	
(Performer's Synatu	re)	Notec		D BAYBAYAN
V			TM, RSTU1/Over-all	Event Supervisor



Physical Fitness Test For the Month of Filmay 2018

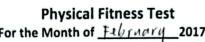


						OAL	
Revised Form: 01-2014(Fo					rol Number_	90	
				Runni Date 1	Taken: , tes	Mary 27, 2	
iteps: 1. Registration:	91				- , -	8.65	
2 Measurement:	retariat Name 8			Exam	iner's Name	& Signature	
Height: 142 We	eight: 57 W	aistline: 21 C	hest_37	92.402.5	ark		
Result: 21.3 3. BP: 1 st BP: 10/8		se over 15ibs)			<i>A</i> -		
4. ECG No GO:	1 :-/		and the second of the second o	•			
\ <i>_</i> -	sician Name & S	Signature)					
Full Name: last Name ESCAT	Fir	si Name NA BET	M.1 7		Rank P01	Sex PGHAUG	
Date of Birth: 02-2			PN	P Badge N	umber: o	237696	
Office: (Print Complete C	Office/Unit Assig	nment) DNIACE	STATION				
	TIME HONG	100.00					
Events	Raw Score	Rating	Member/Score & Signature		e Team Leader's Name & Signature (PCO)		
Sit-up (1 minute)	69	99	f.				
Push-up (1 minute) 300 Meter Sprint (for 34 yrs old and below)	60	100	g			,	
2.5 Km Run/jog Walk (3k for 34 yrs old and below) (2K for 35 – 44 years old) (1k for 45 years lod and above)	19:20	166	1		Program and the control of the contr		
TOTAL		99	Remarks:		4		
(Performer's Signature)			No	P(ted: <u>0</u> 1	EILANI MAE I		
		Physica For the Month	of The I want				
Revised Form: 01-2014 (F F®-up this form properly! In				nning #:_ ote Taken:_ //0 B V/		27, 7018	
Full Name: last Name	FSCAT	rst Name ANABEU	M.		Rank P01	Sex PEHAU	
		ge: 35		NP Badge	Number:	237694	
Office: (Print Complete	Office/Unit Assi	gnment)					
RFMARKS:			Control Number	r:			

LEILAHI MAE N MACANAS POLICE SENIOR INSPECTOR (Performer's Signature) OIC PPHRDB Noted:_

Name & Signature Over-all Event Supervisor







For the Month of February 2017 **Control Numbe** Revised Form: 01-2014 (Fill-up this form properly! Incomplete Data, No PFT Results) Running #: Date Taken: PNP ID #: SPO4 LEAH C NOBLE Steps: Registration: 1. Examiner's Name & Signature (Secretariat Name & Signature) Measurement: Height: 77", Weight: 158 Result: 22. When O (Obese over 15lbs) BP: 1st BP: 100 70 ECG: (Physician Name & Signature Full Name: last Name First Name Rank Sex M.I P01 FEMALE ESCAT Date of Birth: FBRUARY 23, 1983 Age: PNP Badge Number: Office: (Print Complete Office/Unit Assignment) MANADAG STATION **Events Raw Score** Rating Member/Scorer's Name Team Leader's Name & Signature (PCO) & Signature (PNCO) τtθ Sit-up (1 minute) Push-up (1 minute) 33 300 Meter Sprint 2.5 Km Run/jog Walk Remarks: DASSED TOTAL POLICE SEMIOR INSPECTOR Noted: YC PROV'L PERSONNEL & HROI Name & Signature Over-all Event Supervisor



Physical Fitness Test For the Month of <u>FEBRUARY</u> 2017



Full Name:	last Name ES CAT		First Na				М	.I	Rank Þ0/		Sex FE MALE
	h.teBruary	23, 1983	Age:	34	,		P	NP Bad	ge Number:	23	76 96
Office: (Prin	nt Complete Of		_			_		۸			
REMARKS:	PAS	MANA	0 HG	PC	LIC		STAT rol Numb	_	}		

(Performer's Signature)

SHERYLL C BUZMAN POLICE SEN OR INSPECTOR Noted: OLC PROY'L PERSONNEL & HRDI

Name & Signature Over-all Event Supervisor



PNP Physical Fitness Test
For the Month of #EBRUARY 2016

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OT.	

AAA .
Revised Form: 01-2014 (Fill-up this form properly! Incomplete Data, No PFT Results)

2010	A STEWN INT POP
Control Number:	W
	1011

Running #:	141	
Date Taken:	75BPUARY 13C 040021	18,2016

	1111
Steps:	
1. Registration:	
(Secretariat Name & Signature)	Examiner's Name & Signature
2. Measurement:	•
Height: $5'4''$ Weight: 60% Waistline: 30	
Result: (Obese over 15 lbs)	·
3. BP: 1 st BP: (
4. EEG: (DECG) //	
5. / GO / No GO:	
(5)	

	(Physician Name & Signature)				
Full Name:	Last Name,	First Name,	M.I.	Rank P01	Sex FEHALE
Date of Birth	12-23-1983	Age: 32	PNP Ba	adge [/] Number:	237696
	Complete Office/Unit A				

Events	Raw Score	Rating	Member/Scorer's Name & Signature (PNCO)	Team Leader's Name & Signature (PCO)
Sit-up (1 minute)	65	100	2	
Push-up (1 minute)	57	97	1	
300 Meter Sprint	120	80	James 3	
2.5 Km Run/jog Walk	1830	100	Mossing	
TOTAL	/	94	REMARKS:	PASSED

	/	/		/	PASSES	
S			SHERY	LLCB	MZMAN	
(Performer's Signature)					NSPECTOR	
, 0		Noted	i: <u>OIC, Prov</u>	'L PERS	ONNEL & HRDB	
			Na	me & S	ignature	
			Over-	all Ever	nt Supervisor	

PNP Physical Fitness Test
For the Month of FEBRIAR 2016



Full Name:	Last Name,		Name,		M.I.	,	Rank	Sex
	ES	CAT	ANABE	ν			PUI	FEMALE
Date of Birth	1: 02-2	3 - 1983 Age:	32		PNP	Badge	e Number:	
Office: (Print		office/Unit Assignm		Police	5	TAT	ron	
REMARKS:		PKSED		Control Nur	nber: _	(t8	
	1	-		SF	IERYI	LC	ZOZMAN	1
	10/			PA	TOF S	NIOD	INSPECT	NP.
(Perfo	rmer's Signa	ture)		06			RSONNEL &	
	U		No	oted:VI				
							Signature	
				(Over-a	II Eve	nt Supervi	sor

Revised Form: 01-2014 (Fill-up this form properly		Control Number: 20 (
			Running Date Ta PNP ID	g #: aken: #:	·			
Steps: 1. Registration:	γ_{MQ}	NA A			-			
(Secreta	riat Name & Signatu	P(6)	Examiner's Nan	ne & Signat	ure			
z. Measurement:			1	io a oigila.				
Height: 15'4" Weight: Result	(Obese over		_~					
3. BP: 1 BP: /20/00	2 nd BP:	150105)	ao	/				
4. ECG: WUL	C/03							
5. GOV NO GO: (Physicial	an Name & Signature	<u>,</u>	0					
2 (1.11)	-y manio a orginatari	9)						
Full Name: Last Nam	e First Name	M.I	Ra	ink	Sex			
ESCAT	ANABE	Z T	P01		Tomale			
Date of Birth:		Ago:		e Number:	72 male 2376 96			
Office: (Print Complete C	23 - 1983 Office/Unit Assignment	3 2			2376 96			
		MANADAG	POLICE	STA	π 0 N			
Events	Raw Score							
	Maw Scole	Rating	Member/ Name & S	ignature	Team Leader's Name & Signature (PCO)			
Sit-up (1 minute)	53.	88	-					
Push-up (1 minute) 300 Meter Sprint	1:15	32						
2.5 Km Run/jog Walk	1630	100	XVI.					
TOTAL	,	91-	REMARKS	: D,	45 SED			
. /				The state of the s	And the second s			
W/								
(Performer's Sig	gnature)		MAR	10401	CAMAN			
U			POLI		EY CANAM			
		Noted:	CHIE		R			
			Over-all	lame & Sig event Supe	nature			
			Over-alk)	event Supe	n visor			
	PNP	Physical Fitnes	e Tast					
	For the Mor	illi of Jebruan	2014					
	We I of the mor	Territory C	2014	A STATE OF THE STA				
Full Name: Last Name	First Name	M.I	Ran	k T	Sox			
ESCAT			POI		_			
Date of Birth:					Lemale			
02 - 2				Number:				
AU and Color Barrette City	13-1983	Age: 32	PNP Badge	Number:	2376 96			
Office: (Print Complete Offi	13-1983	Age: 32	PNP Badge		2376 96			
Office: (Print Complete Offi	23 - 1983 Ice/Unit Assignment)	Age: 32		STAT	2376 96 10N			
Office: (Print Complete Offi	13-1983	Age: 32	PNP Badge	STAT	2376 96			
Office: (Print Complete Office: Print Complet	23-1983 Ice/Unit Assignment)	Age: 32	PNP Badge	STAT	2376 96 10N			
Office: (Print Complete Offi	23-1983 Ice/Unit Assignment)	Age: 32	PNP Badge	STAT	2376 96 10N 201			
Office: (Print Complete Office: Print Complet	23-1983 Ice/Unit Assignment)	Age: 32	PNP Badge	STAT	2376 96 10N 201			
Office: (Print Complete Office: Print Complet	23-1983 Ice/Unit Assignment)	Age: 32	PNP Badge POUCE Control Num MARLE POLICE CHIEF	STAT ber:	2376 96 10N 201 CANAM VENT			
Office: (Print Complete Office: Print Complet	23-1983 Ice/Unit Assignment)	Age: 32 MANADAU	PNP Badge POUCE Control Num MARLU POULS CHIEFINA	STAT	2376 96 10N 201 CANAM NENT			





Republic of the Philippines Department of the Interior and Local Government NATIONAL POLICE COMMISSION

PHILIPPINE NATIONAL POLICE HEALTH SERVICE





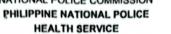
ENHANCED MONITORING OF POLICE OVERALL WELLNESS (EMPOw) CONSULTATION REPORT FORM

RANK/CATEGORY					AGE		SEX	,	UNIT		
PSSg				40		FEMALE PRO		RO 1			
PREVIOUS DIAGNOSIS					PREVIOUS MEDS ATIN 20MG TAB ONCE A DAY (BEFORE BEDTIME);						
	HYPERCHOLEST		ROSUVASTA	TIN 20MG T	AB OI	NCE A DAY	(BEFORE E	SEDTIME);			
DYS	LIPIDEMIA;PRE-DI										
PREVIOUS WEIGHT	PREVIOUS BMI	PREVIOUS ATT	ATTENDING MEDICAL OFFICER DATE OF LAST PREVIOUS EMPOWED CLASSIFICATION CLASSIFICATION								
62.00 kgs		ES, NIĀ'A CHERY		JUN 30		P3					
DATE: SEP 20, 20	23.6 (N)										
SUBJECTIVE:		NO	SUBJECTIV	E COMPLAINTS							
BP						SSESSMENT:					
100/80		LY NORMAL		NEW LABORATORY RESULTS (IF ANY):				IMPROVING			
HR	LOGENTIAL	ET HORMAL		FBS (102/NORMAL); TOTAL CHOLESTEROL (178/NORMAL);				COMPLIANCE TO DIETARY ADVICE			
72			J	JEEG TERROE (TA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Scale of 1-10 w	with 10 as the high	nest:		
WEIGHT						COMPLIANCE	TO EXERCISE F	REGIMEN			
61.00 kgs								vith 10 as the high	nest:		
BMI							OTHERS:				
23.2											
	23.2					OLOGIC	MANAGEMENT				
DATE OF NEXT FOLLO	W UPNISIT DEC 07, 20	23		MEDICINES							
				NAME			DETAILS		QUANTITY		
		_	-								
			_	<u>ተ</u>							
									1		
	LABORATORY		1								
TYPE	DATE	INSTRUCT	ION	1	1						
-6				1					1		
Ļ											
ľ									1		
				1					1		
					1						
		-							1		
						_		EVISION:			
FINAL DIAGNOSIS:	E/N AT	THE TIME OF EXA	MINATION	•							
		the same of the						P2			
		SEE	N AND E	VALUATED B	Y:						
		-				_					
		P <u>CPT SEÑ</u>	AR, MAI	RK ANTHO	NY D, M	D		_/			
		Signature	over printed	name of Medical	Officer			D			





Republic of the Philippines Department of the Interior and Local Government NATIONAL POLICE COMMISSION







Camp Rafael T Crame, Quezon City

ENHANCED MONITORING OF POLICE OVERALL WELLNESS (EMPOW) **CONSULTATION REPORT FORM**

RANK/CATEGORY	NAME				AGE	1	SEX	"	NIT		
PSSg		ESCAT, ANABEL T				40 FEMALE			RO 1		
			PREVIO	US MEDS							
OTHERS;											
1				1							
PREVIOUS WEIGH	TENDING MEDICAL OFFICER DATE OF LAST PREVIOUS EN CASSIFICATION CLASSIFICATION										
62.00 kgs	PREVIOUS BMI 23.6 (N)	PREVIOUS PHYSICAL PROFILE P2		AR, MARK ANTHONY D MAR 2				ROLLED			
DATE: JUN 30	, 2023										
SUBJECTIVE: NO SUBJECTIVE COMPLAINTS.											
BP	PERTINENT PHYSIC	CAL EXAMINATION:	NE	EW LABORATORY RESULTS (IF ANY):			A SSESSMENT:				
90/60	ESSENTIAL	LY NORMAL	FB	S (107.5/NORMA	AL); TOTAL		NOT IMPROVING				
HR			(CHOLESTEROL (230/UP);			COMPLIANCE TO DIETARY ADVICE				
68							Scale of 1-10 v	vith 10 as the high	est:		
WEIGHT							COMPLIANCE TO EXERCISE REGIMEN				
62.00 kgs								with 10 as the high	est:		
ВМІ							OTHERS:				
23.6											
	PLAN			INTERVENTION:	TREATMENT IN	NITIATED					
DATE OF NEXT FOL				MEDI	CINES						
FOR REFERRAL TO	SPECIALIST: ADVISED ANN		NAME		DETAILS QUA						
				ROSUVASTATIN 20MG	ONCE A DA	ONCE A DAY - BEFORE BEDTIME - AFTER MEALS 30 TAE			30 TABLETS		
			-	100							
TYPE	DATE INSTRUCTION				*:						
TOTAL CHOLESTEROL	SEP 22, 2023	FASTING FOR 9 HOURS.;									
FBS	SEP 22, 2023										
TRIGLYCERIDES	SEP 22, 2023										
HDL	SEP 22, 2023 SEP 22, 2023										
	SEP 22, 2023										
1											
ĺ											
FINAL DIAGNOSIS:				Т	R	EVISION:	-				
	HYPERCHOLESTEROLEMIA / DYSLIPIDEMIA; IMPAIRED FA										
GLUCOSE;OTHERS - G2P2 (1102) MYOMA UTERINE;;								P3T			

SEEN AND EVALUATED BY:

PMAJ REYES, NIÑA CHERY

Signature over printed name of Medical Officer

