



**ST. GERARD GENERAL HOSPITAL OF
ROSARIO BATANGAS INC.**

Masaya, Rosario, Batangas Philippines
"Caring for you the way we care for our loved ones"

Clinical Laboratory


PATIENT NAME: SUNTO, MARICEL CAPILA
ADDRESS: Timbugan, Rosario, Batangas
PHYSICIAN:
REQ PHYSICIAN:

AGE: 27Y8M21D **GENDER:** F
ROOM:
DATE: Oct-25-2024
Time: 10:47 am

CLINICAL MICROSCOPY

	RESULTS	REF-VALUE		RESULTS	REF
PHYSICAL			MICROSCOPIC		
Color	YELLOW		WBC (Pus cells)	2-4	0
Transparency	SLIGHTLY TURBID		RBC	8-12	0
CHEMICAL			Epithelial Cells	FEW	
Reaction	6.0	5.0-7.0	Bacteria	FEW	
Specific Gravity	1.020	1.005-1.025	Mucus Threads		
Protein	NEGATIVE	NEGATIVE	Yeast Cells		
Glucose	NEGATIVE	NEGATIVE	Renal Cells		
PREGNANCY TEST			Pus in Clumps		
MICRAL TEST			Trichomonas vaginalis		
URINE KETONE			Crystals:		
Others			Amorphous Urates	FEW	
			Amorphous Phosphates		
			Calcium Oxalate		
			Uric Acid		
			Cast:		
			Hyaline Cast		
			WBC Cast		
			RBC Cast		
			Coarse Granular Cast		
			Fine Granular Cast		

Remarks:


SHAINA JANE LEYESA SERADILLA RMT LIC. NO. 94610
Medical Technologist


MARITESS TERESITA M. TORIO, MD / PRC.LIC.: 706
Pathologist



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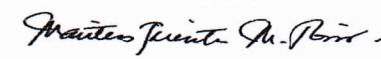
REQ PHYSICIAN:

Time: 10:47 am

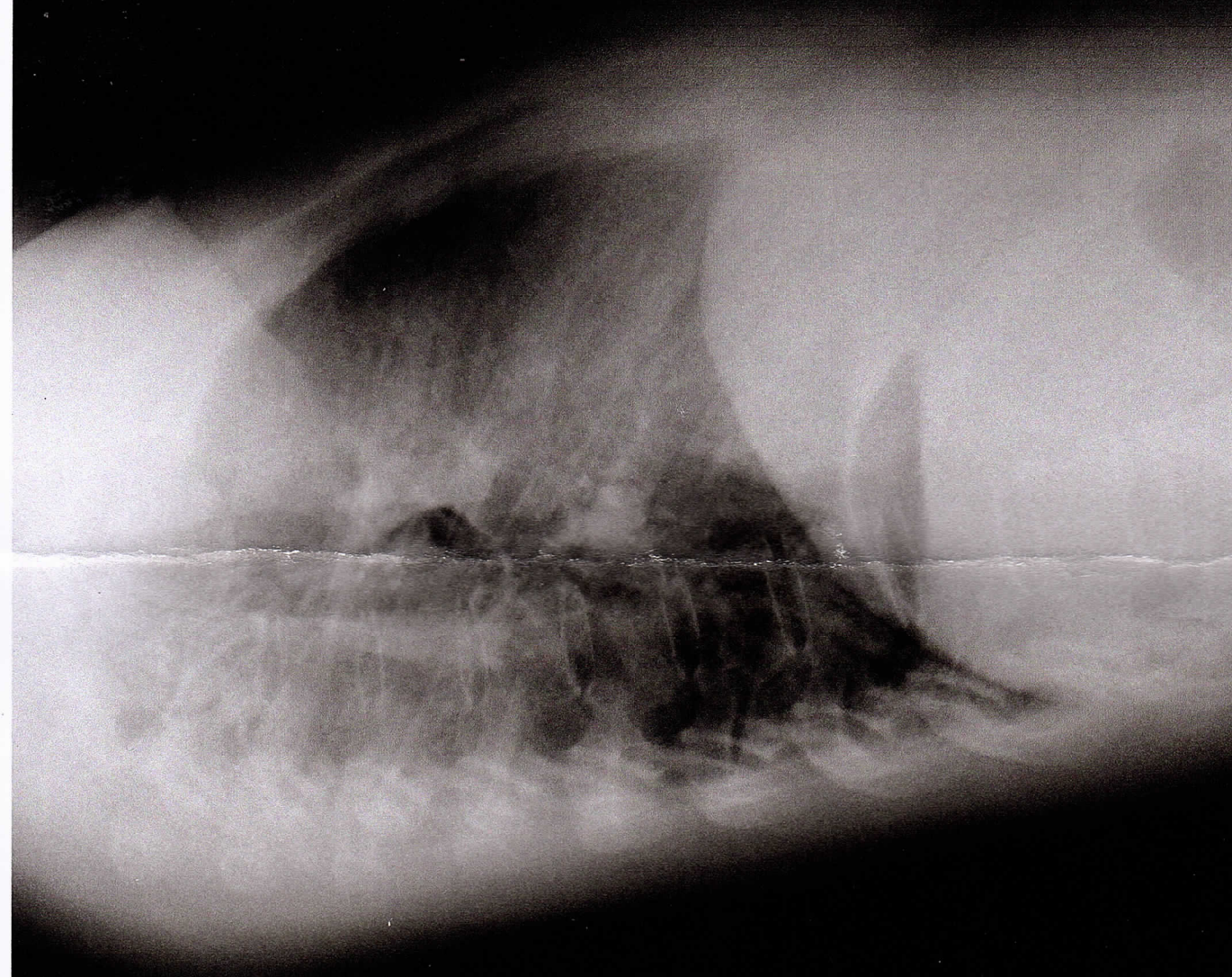
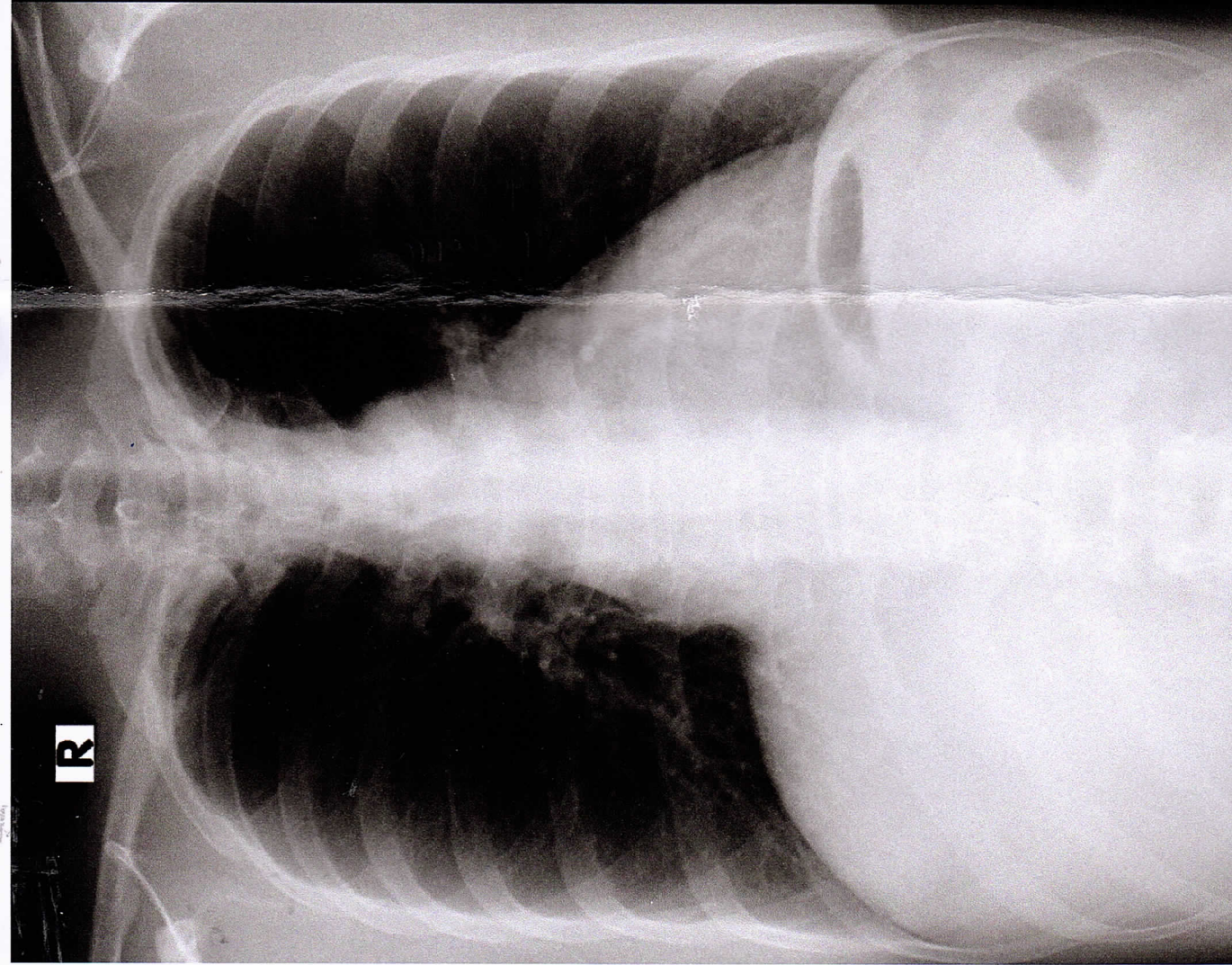
HEMATOLOGY

TEST	RESULT	REF. RANGE	TEST	RESULT	STANDARD REF. VALUES
WBC	6.50	4.00 - 11.00 10^3/L	Differential Leukocyte Count		
RBC	4.50	3.80 - 4.80 10^12/L	%Neut	64.1	40.00 - 70.00 %
HGB	14.0	11.50 - 16.50 g/dL	%Lymph	28.7	20.00 - 40.00 %
HCT	42.0	36.00 - 46.00 %	%Mono	7.2	2.00 - 10.00 %
MCV	93.2	80.00 - 100.00 fL	%Eos		1.00 - 6.00 %
MCH	31.1	27.00 - 32.00 pg	%Baso		0.00 - 2.00 %
MCHC	33.4	31.60 - 35.40 g/dL	OTHER TESTS:		
PLATELET	320	150.00 - 450.00 10^3/L	Prothrombin Time		10.00 - 16.00 Sec.
Blood Typing:	RH		%Activity		0.00 - 100.00 %
Malarial Smear:			INR		0.80 - 1.20 Sec.
Remarks:			Bleeding Time		1.00 - 6.00 Minutes
			Clotting Time		2.00 - 7.00 Minutes
			APTT		24.00 - 39.00 Sec.
			RETICULOCYTE COUNT		0.50 - 1.50 %
			ESR		0.00 - 12.00 mm/hr


GLENDA A. CATIBOG, RMT
PRC.LIC.NO.:34959
Medical Technologist


MARITESS TERESITA M. TORIO, MD / PRC.LIC.:70673
Pathologist

R



SUNTO, MARICEL C. 24-41277 CHEST, FRN P->A 25/10/2024

SAINT GERARD GEN. HOSPITAL



ST. GERARD GENERAL HOSPITAL OF ROSARIO BATANGAS INC.

Masaya, Rosario, Batangas

MEDICAL CERTIFICATE

OCTOBER 25, 2024

To Whom It May Concern:

This is to certify that MARICEL CAPILA SUNTO, 27 YEARS OLD, FEMALE, SINGLE residing at TIMBUGAN, ROSARIO, BATANGAS was seen and examined by the physician undersigned.

Diagnosis: PNEUMONIA, URINARY TRACT INFECTION

Remarks: MEDICATIONS PRESCRIBED. REST ADVISED. RE-ASSESSMENT ON OCTOBER 30, 2024.

This certification is being issued exclusively for whatever purpose it may serve except for medico-legal purposes.


EULA MILCAH PATRON, MD

License No. 0158059



ST. GERARD GENERAL HOSPITAL OF ROSARIO BATANGAS INC

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Masaya, Rosario, Batangas

DOCTOR'S PRESCRIPTION

Name: Manicel Gunto

Address: _____

Age: 27

Sex: F

Date: 10/30/24

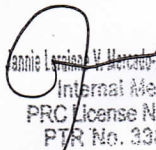
RX

To whom it may concern,

This is to certify that patient Manicel Gunto 27/F from Rosario, Batangas was seen today for follow up check up. Patient was managed as a case of Pneumonia. Uti still completing prescribed medications with note of resolving previous symptoms (fever, cough).

Patient is fit to go back to work on Nov 4, 2024 and advised to complete remaining medications.

DIAGNOSIS:


Jennie Linares, M.D.
Internal Medicine
PRC License No. 136748
PTR No. 33866513

LICENSE NO. _____

PTR NO. _____

S2 LICENSE _____



BANDAI WIREHARNES PHILIPPINES, INC.

Lot 2 First Industrial Township,
Brgy. Pagaspas, Tanauan City, Batangas
(0917)160-2698

TIME IN: _____

FIT TO WORK FORM

Series # _____

EMP NO.: <u>1191</u>	NAME: <u>Maricel Susto</u>	
DEPARTMENT: <u>Admin</u>	SECTION: _____	
REASON OF ABSENCE: <u>Fever & Cough</u>		
<input checked="" type="checkbox"/> FIT TO WORK	<input type="checkbox"/> NOT FIT TO WORK	
	need _____ day(s) rest	
<input type="checkbox"/> SIL APPROVED _____ DAYS	INCLUSIVE DATE: _____	
<input type="checkbox"/> SIL DISAPPROVED _____ DAYS	INCLUSIVE DATE: _____	
DIAGNOSIS: _____		

<u>[Signature]</u> NURSE ON DUTY	<u>[Signature]</u> DEPT. HEAD	_____ HR

FM-HR-001-01