

Suite 1601, Medical Plaza Makati, Amorsolo Corner Dela Rosa Sts., Legaspi Village, Makati City Contact #: 09985517815

DIAGNOSTIC PROCEDURE REQUEST

Age: 38

Date: May 31, 2025

ROEL RIVERA

Address: San Miguel, Manila

Name:

Requested Tests:		
FT3FT4AmylaseKUB	Chest X-ray2D-EchoECG	
Clinical Impression / E	Diagnosis:	
Remarks / Special Instructions:		MARY YENTL BORAZON, MD License No.: 126597