



Suite 1601, Medical Plaza Makati, Amorsolo Corner
Dela Rosa Sts., Legaspi Village, Makati City
Contact #: 8867-1140; 0998-5517815

DIAGNOSTIC PROCEDURE REQUEST

Name: FRANCIS SAN GABRIEL

Age: 37

Address: _____

Date: Sep 26, 2025

Requested Tests:

- CBC
- Lipid Profile
- FBS
- HbA1c
- BUN
- Creatinine
- SGPT
- SGOT
- Blood Uric Acid
- Sodium
- 2D-Echo
- BRAIN MRI WITH CONTRAST

Clinical Impression / Diagnosis:

T/C DIABETES


T/C DYSLIPIDEMIA

T/C BRAIN PATHOLOGY

Remarks / Special Instructions:

FASTING FOR 8 HOURS

Follow-up Date: _____


MARY YENTL Q. BORAZON, MD

License No.: 126597

Requesting Physician