

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

## **DIAGNOSTIC PROCEDURE REQUEST**

Age: 65

Date: Aug 12, 2025

JOSE PATRICIO

Name: Address:

Requested Tests:			
<ul><li>CBC</li><li>Lipid Profile</li><li>FBS</li><li>HbA1c</li><li>Creatinine</li></ul>	<ul><li>SGPT</li><li>SGOT</li><li>Blood Uric Ac</li><li>Potassium</li><li>FT3</li></ul>	• FT4	
Clinical Impression / Diagnosis:			
Remarks / Special Instruc	ctions:	MARY YENTL Q. BORAZON, MD	
Follow-up Date:		License No.: 126597  Requesting Physician	