

**CHRISTIAN MEDICAL CLINIC INC.**

22 A Madison St. New Manila Quezon City

Mobile No. 02-79015090

Accredited by: Dept. of Health (DOH), POEA, MARINA, TESDA, PRC & DDB

Member: Accredited Medical Clinics for Overseas Workers, Inc. (AMCOW)

QR, R & C.PIS2

REV. 0 05.02.19

**Patient Information Sheet**

Date: _____

Px No	✓ Last Name	✓ First Name	✓ M.I.
✓ Age	✓ Sex (M/F)	✓ Civil Status	✓ Address
✓ Occupation	✓ Contact No	✓ Office Contact No:	
✓ Company	✓ Company Address		

I declare under the penalties of perjury that all information stated above have been accomplished in good faith verified by me and to the best of my knowledge and belief are and correct

✓ (Patient's signature over printed name)**Please do not fill below this line (FOR CLINIC use only- check****Part II - Check List**

Cashier	
<input type="checkbox"/> Paid	Amt.
<input type="checkbox"/> Charged	

Laboratory	
<input type="checkbox"/> Regular	
<input type="checkbox"/> Others	

Radiology	
<input type="checkbox"/> Chest PA	
<input type="checkbox"/> Others	

Optical	
Vision	

ECG	
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Audio	
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Medical	
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Dental	
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PED	
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NURSE REMARKS	
INITIAL FINDINGS	FINAL FINDINGS



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Requirement Need:

- 2 Valid ID'S (1 photo copy each)
Identification (Valid Passport, Driver's License, or other government-issued ID.)
- 2x2 Picture (3 copies with white background)
- Ballpen
- Printable Patient Information Sheet Form

“Kindly make sure that all (✓) indicated information on the information sheet is filled-out and all requirements are attached before visiting Christian Medical Clinic. inc”

Physical and Preparatory Steps:

- **Fasting** - Do not eat or drink (except water) for 8-12 hours before blood test.
- **Rest** - Get 6-8 hours of sleep; avoid alcohol / caffeine beforehand.