



CAPITOL UNIVERSITY MEDICAL CENTER

San Pedro, Gusa, Cagayan de Oro City

TEL: 723215; 728457; 712417; 712621; 8564970; 8564730

CUMC-ANC-MRS-QF-02-00

Date: 10/15/2015

MEDICAL CERTIFICATE

TO WHOM IT MAY CONCERN:

This is to certify that the person named hereunder has the following record of confinement/consultation and treatment in this hospital.

NAME: Panaba, Karen AGE: 38 SEX: F CS: _____

ADDRESS: _____ NATIONALITY: _____
OCCUPATION: _____

RECORD OF CONFINEMENT/CONSULTATION

In-Patient record No. _____

Period of Confinement: _____

Date of Consultation and treatment: _____

_____ TO _____
10/15/2015

Final Diagnosis:

Allergic rhinitis, moderate, persistent

Services/Operation Performed:

BP: 140/90 nasal endoscopy
unm Hg

Probable Disability/Healing Period:

Remarks:

fit to work

Issued upon request of:

Purpose:

patient

CERTIFIED TRUE & CORRECT:

Jayemae B. Revilla-Licandula, MD, FRCO-HNS
Otorhinolaryngology - Head & Neck Surgery
License No. 0124478

Attending Physician

Medical Certificate Released to

Date Released:

NOTE: THIS CERTIFICATE IS INVALID UNLESS SIGNED BY THE ATTENDING PHYSICIAN...

JAYREMAE B. REVILLA-LACANDULA, MD, FPSO-HNS

Otorhinolaryngology-Head & Neck Surgery
Capitol University Medical Center | Room 214
Clinic Hours: Mon - Fri 10am-3pm; Sat 10am-1pm
Contact number (Secretary): +639754270052



Name: Reyes, Karen Date: 10/18/2015
Age/Sex: 34 F Address: _____

Rx ① Mucinase nasal spray #1
2 puffs 3x a day
7 days

② Sterix w/s #30
1 tab once a day,
30 days

③ Mometair nasal spray #1
2 puffs 2x a day,
1 month

Your next appointment is on:

Jayremae B. Revilla-Lacandula, MD, FPSO-HNS

Lic. No. 0124478

PTR No.

(4) Murtan say / fas # 30

/ fas one a day