



# MADONNA AND CHILD HOSPITAL

J.V. Serifa St., Carmen, Cagayan de Oro City 9000

Tel. No.: (088) 8584105; (08822) 724925

## MEDICAL CERTIFICATE

Date: Dec. 5, 2023

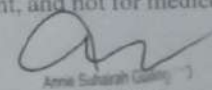
This is to certify that Ayenia Lago 30 / F  
Resident of Zme 1, Buena Bayatas, CDO  
Had been attended to in this hospital on Cat Bite catg II  
For the diagnosis of: \_\_\_\_\_

Treatment was (circle or underline appropriate letter):

- A. Office Consultation = \_\_\_\_\_
- B. Emergency Room Care = \_\_\_\_\_
- C. Hospital Admission = \_\_\_\_\_
- D. Operation Performed = \_\_\_\_\_

Date: \_\_\_\_\_

This certificate is issued upon the request of the above-named patient, and not for medico-legal purposes.



Anne Subarath Guinto  
Attending Physician

M.D.

# RABIES POST EXPOSURE TREATMENT RECORD

CATEGORY OF EXPOSURE:  I  II  III DATE OF EXPOSURE: 11/20/23

WITH PREVIOUS RABIES VACCINATION: (IF YES, PROVIDE DETAILS)

DATE TREATMENT STARTED: 12-5-2023

WEIGHT: 77.5 lbs VACCINE USED: \_\_\_\_\_

INTRAMUSCULAR REGIMEN  INTRADERMAL REGIMEN

MANUFACTURED BY: \_\_\_\_\_ LOT NO. \_\_\_\_\_

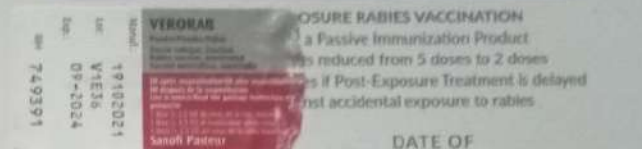
HRIG \_\_\_\_\_ ML \_\_\_\_\_

ERIG \_\_\_\_\_ ML \_\_\_\_\_

TETANUS TOXOID GIVEN:  ATS  HTIG 250 IU  Delt IM  
0.5ml  Delt IM 12/5/23

	DATE GIVEN:	RABIES VACCINE LOT NO.:	DATE OF RABIES VACCINE NEXT DOSE:	SIGNATURE:
DAY 0	<u>12/5/23</u>	<u>VIE36</u>	<u>Delt IM</u>	<u>[Signature]</u>
DAY 3	<u>12/8/23</u>			
DAY 7	<u>12/12/23</u>			
DAY 14	<u>12/19/23</u>			
DAY 28	<u>/</u>			

# RABIES PRE-EXPOSURE VACCINATION RECORD



DATE GIVEN: \_\_\_\_\_ RABIES VACCINE LOT NO.: \_\_\_\_\_ DATE OF RABIES VACCINE NEXT DOSE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DAY 0 \_\_\_\_\_  
 DAY 7 \_\_\_\_\_  
 DAY 21 \_\_\_\_\_

REMARKS: Keep doc cases  
Medication Compliance  
Observe biting animal per Malaya.

OTHER MEDICATIONS: Tetanus vaccine

Source: Department of Health, Administrative Order 2018-0013, Revised Guidelines for the Management of Human Exposure, April 2018.

