# MYVIE P. GALON, MD, FPCP, DPSMID Adult Infectious Deseases Specialist

Internal Medicine

Tuesday and Thursday: 9 -12 AM

Wednesday Moming by appointment Contact Number 09690381321

Maria Reyna Xavier University Hospital Room 57, 3<sup>rd</sup> floor, Medical Arts Bldng Hayes St., Pinikitan, CDOC Tuesday and Thursday: 2 -7 PM

Saturday Afternoon by appointment Contact Number 09690381321

Saint Francis Doctors' Hospital & Medical Center Room 3, 2<sup>rd</sup> ficor Masterson Ave, Upper Canitoan, CDOC Wednesday & Fri: 9 -11 AM

Monday Morning by appointment Contact Number 09690381321

Madonna and Child Hospital Room 206, 2<sup>rd</sup> floor, Medical Arts Bldng UV Serina St., Carmen, CDOC

Other Hospital Affiliation: Polymedic Plaza Medical Center

Name: Syru R. Pahilma Date: 12/1/22 Age:
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License No. 0116675
PTR 99(52)

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Name:	Syrel	R. Pa	amlera	Date: _	12/15/2
Age:	1	17			
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#### SAINT FRANCIS DOCTORS' MEDICAL AND DIAGNOSTIC FACILITY

Upper Canitoan, Fr. Masterson Avenue, Cagayan de Oro City, 9000 Misamis Oriental, Philippines

SaintFrancis.laboratory@gmall.com

0917-627-2975

#### **Department of Laboratories**

Patient Name:

Age:

F

0

Sex:

Room No.:

Physician:

PABILONA, SYREL ROSALES

Birth Date:

Jan-24-1998

Rendered Date:

Dec-15-2022

Release Date:

Admission No.:

Patient Type:

Ward:

#### **URINALYSIS**

	Result		Result	Unit	Reference Range
PHYSICAL EXAMINATION		MICROSCOPIC			
Color	Yellow	Red Blood Cells	TNTC	/hpf	0-2
Clarity	Hazy	→ White Blood Cells	50-55	/hpf	0-1
		Epithelial Cells	Few	/lpf	
CHEMICAL ANALYSIS		Hyaline Cast		/lpf	0-2
Protein	+2	Bacteria	Moderate	/hpf	
рН	6.5	Mucus Threads	Few	/lpf	
Specific Gravity	1.015	Amorphous Urates		/lpf	
Glucose	Negative	Amorphous Phosphates		/lpf	
Ketone					
Micral test					

Comments:

- END OF REPORT -

ERRO BORJA - LIC NO. 0107055 VANESA MAY Technologist

GERARD LEAÑO LAMAYRA, MD, FPSP - LIC NO. 0083764

**Pathologists** 

DONNA RIA ROXANNE D. LAPINID - LIC NO. 0070696 Medical Technologist

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Other Hospital Affillation Polymedic Plaza Medical Center

## **Medical Certificate**

#### To Whom It May Concern:

This is to cert	ify that	ùrel	R. 1	ahi luna	)	
Age/sex 24 /F	of	ashmo	ið, (	1100		
was seen and examir	ned on	Decemb	or 15	20n	and was diagno	osed to have
Univ	any 7	nact	Myc	how		
He	unoum	98.s				<del></del> .
herefore recommend	KUB	Ulara	sound		x a day	n 7 days
	NIST	for	1-2	days		

This certification is being issued upon his/her request for whatever purpose it may serve but Excluding legal matters.

Myvie P. Galon, MD, FPCP, DPSMID

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