

Km. 4, J.P. Laurel Ave., Bajada, Davao City Tel. No.: (082)287-7777 Fax No.: (082)287-7773 Email address: mdmrcdavao@yahoo.com.ph

# **MEDICAL CERTIFICATE**

## TO WHOM IT MAY CONCERN:

SINGLE wa		s treated in this hospital on/from		JUNE 22, 2022	_ to
OPD		for the follow	ing:		
inal Diagnosis:	Sprained	Ankle Secon	ndary to Fall		
Procedure:	NONE				
Remarks:		IPANY PURP			
Issued this	22ND	_ day of	JUNE	, 2022 at Davao City, Phili	ppines
			RIE ADELAME OKING  Physician/Resident On	, <b>M.D.</b> Duty	
Note: Not to be used for Medito Legal Cases		LIC. NO.: PTR:	048440	ALMA C. RATR Medical Records S	

"At the Heart of Care"

Email address: mdmrcdavao@yahoo.com.ph

Patient Name:

Ledesma, Sharmaine Rose

Amante

Age:

Date&Time Performed:

June 22, 2022 | 9:05AM

Requesting Physician:

Gender:

Chief Complaints:

**Ankle Sprain** 

Room No.:

Patient ID:

212583

**OFFICIAL** £

## X-RAY IMAGING RESULT

28

E

(This report is based on radiographic findings and should be correlated with clinical and laboratory data and other imaging modalities.)

#### LEFT ANKLE APL:

No fracture nor dislocation. There is good alignment of the osseous structure. The cortical outline and trabecular pattern are not unusual. No lytic nor sclerotic bone changes. The included joint spaces are intact. No other significant findings.

### IMPRESSION:

NO LOCALIZING SIGNS. SUGGEST FOLLOW-UP STUDY AFTER 4 WEEKS TO RULE OUT OCCULT FRACTURE, IF CLINICALLY WARRANTED.

> Junrey P. Mancha, RRT Radiologic Technologist

Vernette Lorca Jardinel, MD, FPCR

RadiologIst

FUSP, FCT-MRIS

"Healthcare with a Heart"