

## JEE MEDICAL CLINIC

L. Ezpeleta St., Igbaras, Iloilo Tel. No. (033)3156147

## MEDICAL CERTIFICATE

WILDICAL CURIT	ICAIL
	1/13/2
	Date
THIS IS TO CERTIFY that Calas Nom	y B
(Name)	
(Sex) (Age) (Civil Status) of Jewy,	Codo
(Sex) (Age) (Civil Status)	(Address)
had consulted me on/lastbecause	se of Scopen
	<del></del>
Pertinent Physical Examination Findings: BP:	T: Weight:
(7) Importa	l almag
Neurological Examination Findings:	
Diagnosis/Impression: Mposfel Cerum	en, both ear
Medication/s :	
nedicationys:	
demarks: In Studium	1
Ja / Com	5
	Truly Yours
	JAIME E. ESMERALDA, M.D.
	Physician
	Lig. No. 0077575
	S <sub>2</sub> No