

MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
 b. Attach this certificate to original appointment, transfer and reemployment.
 c. The results of the following pre-employment medical/physical/**psychological** must be attached to this form:


- ☒ Blood Test
☒ Urinalysis
☒ Chest X-Ray
☒ Drug Test
☐ Psychological Test
☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name)			AGENCY / ADDRESS
ECLEO, JESSAMINE			PROCUREMENT
ADDRESS			
PROV. PANGASUGAN, MARBAX COZ 1#17			
AGE	SEX	CIVIL STATUS	PROPOSED POSITION
37	Female	MARRIED	AO IV

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically ☒ FIT / ☐ UNFIT for employment.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
 Christelle Venus F. Capuno, M.D. Lic. No. 0156881			
AGENCY/Affiliation of Licensed Government Physician:			
VEN INFIRMARY HOSPITAL			
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG) Stripped	BLOOD TYPE
0156881	156	79.9kg	A+
OFFICIAL DESIGNATION	DATE EXAMINED		
MEDICAL OFFICER III	8/1/2024		



SLIMM Immaculate Clinic and Laboratory

Zone 9 #1 D. Veloso St., Baybay City, Leyte



SLIMM Laboratory



slimmlabinc@gmail.com

Name: **Ecleo, Jessamine**

Date: **07.30.2024**

Age/Sex: **37/F**

Lab. No.: **054**

Physician:

URINALYSIS

Gross Appearance:	Dark Yellow, Hazy
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Chemical Examination		Microscopic Examination	
Specific gravity	1.030	Casts/LPF	
Reaction: pH	5.0	Finely Granular Cast	
Albumin	Negative	Coarsely Granular Cast	
Sugar	Negative	Hyaline	
Leukocytes	Negative	Waxy	
Nitrite	Negative	RBC cast	
Urobilinogen	Normal	Crystals	
Blood	Negative	Amorphous Urates	Rare
Ketones	Negative	Amorphous Phosphates	
Bilirubin	Negative	Calcium Oxalate	
		Uric Acid Crystals	

Other Findings:

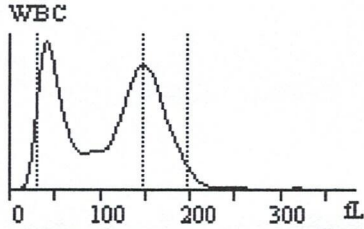
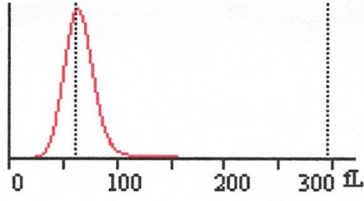
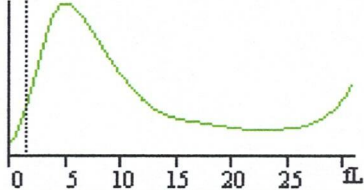
WBC/hpf	0-2	Mucus Threads	Moderate
RBC/hpf	0-2		
Epithelial Cells	Few		
Bacteria	Few		

Faith Gay S. Fernandez, RMT
Clinical Laboratory Scientist
License #0076304

Ma. Cecilia D. Samosa, M.D.
Pathologist
License #85607

SLIMM IMMACULATE LABORATORY Report

Name: Ecleo, Jessamine Dept.: Patient Type: Sample ID: 25
 Gender: Female Sickroom: Patient ID: 054 Diagnosis:
 Age: 37 Year Bed No.: Sample Type: Test Time: 7/30/2024 11:45 AM
 Card ID: Charge Type: Remark(Sample Evaluation):
 Comments:

Parameter	Result	Unit	Ref.range	
WBC	5.3	10 ³ /uL	4.0-11.0	
Lymph#	1.8	10 ³ /uL	1.0-5.0	
Mid#	0.4	10 ³ /uL	0.1-1.0	
Gran#	3.1	10 ³ /uL	2.0-8.0	
Lymph%	34.6	%	25.0-50.0	
Mid%	6.9	%	2.0-10.0	
Gran%	58.5	%	50.0-80.0	
RBC	4.93	10 ⁶ /uL	4.00-6.20	
HGB	L 11.0	g/dL	12.0-18.0	
HCT	L 32.4	%	37.0-47.0	
MCV	L 65.8	fL	80.0-100.0	
MCH	L 22.3	pg	26.0-34.0	
MCHC	34.0	g/dL	31.0-35.5	
RDW-CV	15.0	%	10.0-16.0	
RDW-SD	35.1	fL	35.0-56.0	
PLT	208	10 ³ /uL	150-400	
MPV	8.8	fL	7.0-11.0	
PDW	16.5		9.0-17.0	
PCT	0.184	%	0.108-0.282	

Delivery Time: Deliverer: Validator:
 Print Time: 7/30/2024 11:39:02 AM Tester: admin *The result applies to this sample!

Faith Gay S. Fernandez, RMT
 Clinical Laboratory Scientist
 License #0076304

Ma. Cecilia D. Samosa, M.D.
 Pathologist
 License #85607





RO960987

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**DEPARTMENT OF HEALTH
CDU DRUG TESTING LABORATORY**

MAGSAYSAY AVE., POBLACION ZONE 22, BAYBAY , LEYTE,

Phone Number 053-335-2849

DRUG TEST REPORT

CCF No: 202407300006

Name: ECLEO, JESSAMINE CUEVAS

Birthdate: 07/09/1987 Age: 37 Gender: F

Transaction Date Time: 7/30/2024 12:03:00PM

Report Date Time: 7/30/2024 12:06:43PM

Test Method TEST KIT**Purpose**

Government Employment

Requesting Parties

VISAYAS STATE UNIVERSITY

Result

Drug/Metabolite	Result	Remarks
METHAMPHETAMINE	NEGATIVE	passed
TETRAHYDROCANNABINOL	NEGATIVE	passed

Test Conducted By

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CRESELDA DUMAGUING UY

Analyst

Approved By

DR. REYNALDO P. ESQUIVEL

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Head of Laboratory

Valid Within 12 Month/s from Transaction Date*This is a DOH-DDB IDTOMIS generated report*