

## MEDICAL CERTIFICATE

(For Employment)

## INSTRUCTIONS

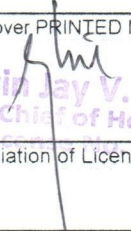
- a. This medical certificate should be accomplished by a licensed government physician.  
 b. Attach this certificate to original appointment, transfer and reemployment.  
 c. The results of the following pre-employment medical/physical/psychological must be attached to this form:

- ☐ 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) <b>LORETO, EPIFANIA GARCIA</b>			AGENCY / ADDRESS <b>VSH</b>
ADDRESS <b>Apt. 89, Kilbourne St. Visca</b>			
AGE <b>59</b>	SEX <b>F</b>	CIVIL STATUS <b>M</b>	PROPOSED POSITION <b>Assoc. 5</b>

## 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 <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> UNFIT for employment.			
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  <b>Elwin Jay V. Yu, M.D.</b> Chief of Hospital License No. 34337		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician:			
LICENSE NO.	HEIGHT (M) Bare Foot <b>146 cm</b>	WEIGHT (KG) Stripped <b>60.8 kg</b>	BLOOD TYPE <b>O+</b>
OFFICIAL DESIGNATION	DATE EXAMINED <b>11/14/14</b>		

BP - 120 / 80 mmHg

TQ900660  
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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: 201911180007  
Name: LORETO, EPIFANIA G.  
Birthdate: 01/06/1960 Age: 59

Gender: F

Transaction Date Time: 11/18/2019 9:25:00AM

Report Date Time: 11/18/2019 9:26:00AM

**Test Method** TEST KIT**Purpose**

Others

**Requesting Parties**

VISAYAS STATE UNIVERSITY

**Result**

Drug/Metabolite	Result	Remarks
METHAMPHETAMINE	NEGATIVE	
TETRAHYDROCANNABINOL	NEGATIVE	

**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*