

Republic of the Philippines Department of Health

TONDO MEDICAL CENTER

BALUT, TONDO, MANILA ISO CERTIFIED 9001:2015



Certificate No.:	04047740		
Health Record No.: _			
Date: _	March 28, 2025		
MEDICAL CERTIFICATE			

To Whom It May Concern: Age 38 ABAYABAY, MARIA FARAH VISCARA According to the record of the hospital, Gender F residing at 209 H. DOMINGO ST BARANGAY 81, PASAY CITY has been confined/treated in this hospital on/from March 19, 2025 to March 26, 2025 with the following circumstances: DIAGNOSIS: PAPILLARY THYROID CARCINOMA; S/P TOTAL THYROIDECTOMY OPERATION: TOTAL THYROIDECTOMY NATURE OF ILLNESS: MASS ANTEIOR NECK DISPOSITION: IMPROVED/DISCHARGED PATIENT This certification is issued upon the request of purposes. WORK to be used exclusively for DIANE DIAMANTE LAO M.D. VALCIMAR CALAYCAY AGOSTO ENT HEAD & NECK SURGERY LIC. 0132955 License No. Attending Physician

Received Original Copy: By: _____ Date:



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Republic of the Fifflippines Department of Health

Center of Health Development - Metro Manila

TONDO MEDICAL CENTER

Balut, Tondo, Manila Telefax: PhilHealth Accredited E-mail address:



DISCHARGE SUMMARY

Date of Admission:	MARCH 19, 2025	Date of Discharge:	MARCH 26, 2025	Harris and
	SALUE BEALANTER ON HE	REPORT OF PROPER CHARVE		And the Control
the superition of				
Chief Complaint:		O VIC GOLDATIV TO BAR &		
MASS ANTEIOR N	ECK THE BAYS AND TOTAL DEST-			
History /Relevant Phy	sical Examination:			
BRIFF HISTORY	6 YEARS PTA, PATIENT MANIFE	STED SMALL MASS ON HER	ANTERIOR NECK NOT ASSOC	IATED WITH
DIEERCHTY OF	SWALLOWING, DIFFICULTY OF E	REATHING SOUGHT CONSU	LT AND WAS REQUESTED WIT	TH
	EVEALING EUTHYROID.	Graffic Tolors		
DUILDING THE IN	NTERIM, STILL WITH THE ABOVE	SIGN AND SYMPTOMS, PATIE	NT'S MOTHER NOTICE GRAD	UAL
ENI ADGEMENT	OF THE MASS, ASSOCIATED WI	TH INTERMITENT DIFFICULTY	OF SWALLOWING, SOUGHT O	CONSULT AT A
DDIVATE MD ANI	D LABORATORY WAS DONE AGA	AND WAS SUGGEST FOR	BIOPSY REVEALING PAPILLAR	RY CA.
	OVISE FOR OPERATION, UNTIL.	MIN. AND WAS SOCIETY SI	Same as to the same 2.400E	
A MONTH DIA	PATIENT SOUGHT CONSULT IN C	UP INSTITION AND WAS SCH	DULED FOR OPERATION TOT	AL 100000 TOLUT
TUVDOIDECTO	MY. PATIENT WAS REQUESTED F	FOR CLEARANCE FOR OPERA	TION O BOOK A SECTORY	
THYROIDECTOR	A, PATIENT CAME IN FOR THE C	ONTEMPI ATED PROCEDURE	TOTAL THYROIDECTOMY, HEN	ICE
FEW HOURS PT	ENT: (+) ANTERIOR NECK MASS	APPROX 2X3CM MOVES WIT	H DEGLUTITION, FIRM, NONOT	ENDER
ADMITTED. /HEI	ESSENTIALLY NORMAL /CVS:	ESSENTIALLY NORMAL /ABD	OMEN: ESSENTIALLY NORMAL	/GU (IE):
CHEST/LUNGS:	ORMAL /SKIN EXTREMITIES: E	SSENTIALLY NORMAL /NEUR	D-FXAM: ESSENTIALLY NORMA	
ESSENTIALLY N	URIVIAL /SKIN EXTREMITIES. L.	HALL AC 1802 SURCH & M.	TARTER POR BENEVE HELDER	

Admitting Diagnosis:

PAPILLARY THYROID CARCINOMA

Laboratory Exams:

BIOPSY (SMALL), CROSSMATCHING, IONIZED CALCIUM, LEUKOREDUCED PRBC FROM PBC

Medications:

0.9 % SODIUM CHLORIDE SOLUTION 1L(IV FLUIDS), 1.00, 1.00, LITER, EVERY Q8HOURS, FOR STAT, IV / 0.9 % SODIUM CHLORIDE SOLUTION 1L(IV FLUIDS) , 2.00 , 2.00 , LITER , EVERY STAT , FOR STAT , IV / 0.9 % SODIUM CHLORIDE SOLUTION 1L(IV FLUIDS), 3.00, 1.00, BOTTLE, EVERY Q8HOURS, FOR 1 DAY, IV / CEFUROXIME 500MG TABLET, 1.00, 500.00, MG, EVERY BID , FOR 1 DAY , PO / CEFUROXIME 500MG TABLET , 2.00 , 1.00 , TAB , EVERY BID , FOR 1 DAY , PO / CEFUROXIME 500MG TABLET , 2.00 , 500.00 , MG , EVERY BID , FOR 1 DAY , ORAL / CEFUROXIME 500MG TABLET , 2.00 , 500.00 , MG , EVERY BID , FOR 1 DAY , PO / CEFUROXIME 750 MG VIAL W/ DILUENT , 1.00 , 1.00 , VIAL , EVERY Q8HOURS , FOR 1 DAY , IV / CEFUROXIME 750 MG VIAL W/ DILUENT , 2.00 , 1500.00 , MG , EVERY STAT , FOR 1 DAY , IV / CEFUROXIME 750 MG VIAL W/ DILUENT , 3.00 , 750.00 , MG , EVERY Q8HOURS , FOR 1 DAY , IV / CELECOXIB 400 MG CAP , 1.00 , 400.00 , MG , EVERY OD , FOR 1 DAY, PO / DEXAMETHASONE NA PO4 8MG/2ML AMP, 1.00, 5.00, MG, EVERY OD, FOR 1 DAY, IV / EPINEPHRINE HCI 1 MG/ML AMP , 1.00 , 1.00 , AMPULE , EVERY STAT , FOR 1 DAY , IV / FENTANYL CITRATE 50 MCG/ML, 2ML AMP , 5.00 . 5.00 , AMPULE, EVERY STAT, FOR STAT, IV / KETOROLAC TROMETAMOL 30MG/ML AMP, 1.00, 1.00, AMPULE, EVERY STAT, FOR STAT , IV / KETOROLAC TROMETAMOL 30MG/ML AMP , 2.00 , 30.00 , MG , EVERY Q8HOURS , FOR 1 DAY , IV / LACTATED RINGERS SOLUTION 1L, 1.00, 1.00, LITER, EVERY STAT, FOR STAT, IV / LACTATED RINGERS SOLUTION 1L, 2.00, 120.00, CC PER HR, EVERY Q12HOURS, FOR 1 DAY, IV / LIDOCAINE HCL 2% POLYAMP, 2.00, 2.00, AMPULE, EVERY STAT, FOR 1 DAY , IV / MIDAZOLAM 5MG/ML, 3ML AMPULE, 1.00, 1.00, AMPULE, EVERY STAT, FOR STAT, IV / MUPIROCIN OINTMENT 2% 5G , 2.00 , 10.00 , GRAMS , EVERY STAT , FOR 1 DAY , TOPICAL / OMEPRAZOLE 40MG CAPSULE , 1.00 , 1.00 , CAP , EVERY OD FOR 1 DAY . PO / OMEPRAZOLE 40MG CAPSULE , 1.00 , 1.00 , CAP , EVERY STAT , FOR STAT , PO / OMEPRAZOLE 40MG

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TMC-MED-04-34-02



Name: M	ARIA FARAH VISCARA. ABAYABAY	Age: 3	8 Sex	" <u>F</u>	Health Record No.:	01247740
Date of Admission:	MARCH 19, 2025	Date of Disc	harge:	MARCH 26, 2025	j	
CAPSULE, 1.00,	40.00 , MG , EVERY OD , FOR 1 DA' PR STAT , INHALATIONAL / PARA	Y, ORAL / OXY	GEN TANK	(1 POUND INHA	LER , 500.00 , 500.00	POUND,
PARACETAMOL 1	G/100ML , 4.00 , 1.00 , GRAMS , EVE	ERY O6HOURS F	OR 1 DAY	IV / PROPOF	FOL AMPAS OIL IN V	IAI,IV /
EMULSION 10MG	/ML, 20ML AMP , 2.00 , 2.00 , AMPUL	E, EVERY STAT,	FOR STAT	.IV / ROCUR	ONIUM BROMIDE 1	OMG/ ML 5ML
VIAL, 1.00, 1.00,	VIAL, EVERY STAT, FOR STAT, IV	/ ROCURONIL	M BROME	DE VL , 1.00 , 1.00	, VIAL , EVERY STA	AT , FOR STAT
	URANE LIQ. INHALATION PER CC,					
	ECTION 10ML POLYAMPULE , 2.00 , 2					
	VIAL , EVERY STAT , FOR STAT , IV					/ERY STAT,
ourse in the Ward:	TRAMADOL HCL 100MG2/ML AMP	, 2.00 , 50.00 , MG	, EVERY C	ISHOURS, FOR	I DAY , IV	
	SE ADMIT PATIENT TO INFIRMARY	Y WARD UNDER	THE SER	VICE OF ENT.;	PLEASE SECURE	CONSENT FOR
ADMISSION AND N	MANAGEMENT.;DIET: DIET AS TOLER	RATED THEN NPO	AT 12 MIC	NIGHT ON 03/21	/25;IVF PNSS 1L TO	RUN FOR 8
HOURS ONCE ON	NPO;DIAGNOSTIC: PLEASE SEE L	AB RESULT ATTA	CHED ON	CHART;THERAPE	EUTICS: CEPUROXIN	AE 1500MG IN
AFTER NEGATIVE POSSIBLE OR USE	SKIN TEST 1 HOUR PRIOR TO OR; E;FOR TOTAL THYROIDECTOMY UND	FOR CROSSMAICH	OF Z ON 5 AT 8AM:	PLEASE INFORM	ANESTH ROD AND	OR STAFF OF
THIS ADMISSION:F	PLEASE PREPARE THE FOLLOWING	FOR OR USE;1.	1 CC S	YRINGE #1;2. 10	OCC SYRINGE #1;3	. EPINEPHRINE
AMPULE #1:4. 2%	LIDOCAINE POLYAMP #2:5, CHROM	IC 3.0 ROUND # 3;	6. SILK 3	.0 CUTTING #5;7.	SILK 2.0 CUTTING	#5; 8. SILK 2.
STRAND #5;9. SILI	K 3.0 STRAND #5;10. MUPIROCIN O	INTMENT #2;1. BI	.ADE 15 #	1;12. JP DRAIN 1	#1;13. PENRUSE DE	WHI #1,FEEASI
MONITOR VS QSHIF	FT;PLEASE MONITOR I&O QSHIFT ;REFI ENT SECURED;NPO 8 HOURS PRIO	ERACCORDINGLY R TO OR:SECURE	IV LINE	WITH GOOD FL	OW;MONITOR VS P	PRIOR TO OR;
UNITS PRBC PROPE	ERLY TYPED AND CROSSMATCHED FO	R POSSIBLE OR USE	AS PREVIO	OSLY ORDERED;R	EFER	
DOLONOSE CONTINI	HE DESENT MANAGEMENT WELL ADV	JISED				DIET C/O MAII
03/21/2025: TO PA	CU;MONITOR VS Q15 X 2 HOURS, 1L X 8 HOURS;KETOROLAC 30MG T	Q30 UNTIL TRANS	OUT;O2 S	OSE TO BE GIVE	EN AT THE PACU;TF	RAMADOL 50M
CIVID OR V 2 DOS	ES FIRST DOSE GIVEN AT THE PA	CLL PARACETAMOL	1G TIV C	6 AS NEEDED F	OR PANA, NODERAL	L - MON BAO
REST:WATCH OUT	FOR HYPOTENSION, DOB, O2 DI	ESATURATION, BLE	EDING;RE	-ER ; MED: KE	TOROLAC TROMET	AMOL 30MG/M
AMP - 2,30 MG,Q8HC	DURS,1 DAY,IV;MED: TRAMADOL HCL 10	00MG2/ML AMP - 2,50	MG,Q8HO	URS,1 DAY,IV		
- VALL 30001 1100	UE PRESENT MANAGEMENT;MAY TRAN ESUME DAT DIET;DAILY WOUND C	ARE DONE START	CEFUROXI	ME 750MG TIV	Q8;START DEXAME	THASONE 5M
	COLEAGE MAINTAIN ID DRAIN ON	NEGATIVE PRESSU	JRE AND	RECURD DUTPU	USHIFT, FLEASE	CIVIOVE I OLL
CATHETER AFTER	3 BLADDER URGES; FOR REPEAT	ICA 6 HOURS PO	ST OP TH	IEN Q8;CONTINU	E PRESENT MANA	GEMENT;REFER
ACCORDINGLY ; LAI	B: IONIZED CALCIUM (TO BE EXTARCTE NIZED CALCIUM (TO BE EXTRACTED ON	:DAI 9PM) N 03/22/25 AT 5AM)			To the second second	
			IOURS;MAII	NTAIN JP DRAIN	ON NEGATIVE PR	CTRACTION AT
	QSHIFT; CONTINUE PRESENT MANA	AGEMENT REFER	ACCORDIN	GET , EAD. 1014	(ZEB 6/ Z6/6/// (Z	Tri e e e
9PM)	NIZED CALCIUM (FOR EXTRACTION TON	M 3/23/25 AT 5AM)				SO THEN DON
			S;2) CELE	COXIB 400MG/CAI	P PO OD X 2 DOSI THING EXERCISES:B	ES THEN PRIN
X PAIN SCALE >/	/= 4/10, START TOMORROW AT 6AM	MED CELECOVIR 40	OLATION A	2 400 MG OD 1 DA	Y.PO	
PARACETAMOL 1G/	100ML - 4,1 GRAMS,Q6HOURS,1 DAY,IV; ORDER;CONSUME IV PAIN MEDICAT	TION; CONTINUE CE	LECOXIB 4	OOMG/CAP PO C	D X 2 DOSES TH	EN PRN FOR
03/23/2025: ANES	ABOVE AS PREVIOUSLY ORDERED, REF	ER	1. 11. 10		UDOWNE FORMOTA	D 4 TAD DID
			XIME 750	MG TIV TO CEFT	UROXIME 500MG/TA	UE PRESENT
:HOLD ICA MONI	ITORING;MAINTAIN JP DRAIN AI I	NEGATIVE PRESSU	RE AND	RECORD COTT	or gom noonn	right being
MANAGEMENT; REF	A TOLE 40MAC/CAR 4 CAR OR FOR 14 DA	YS:CONTINUE PRES	ENT MANA	GEMENT;REFER A	CCORDINGLY	
						HET CONTINUE
03/25/2025: DAILY	WOUND CARE DONE; MAINTAIN JP	DRAIN ON NEGA	IVE PRES	SURE AND REC	CORD OUTPUT QSF	HFT;CONTINUE
PRESENT MANAGEM	MENT ;REFER ACCORDINGLY	OVE MAY GO HON	F TODAY:	HOME MEDICATION	ON;1. CEFUROXIME	500MG/TAB, 1
03/26/2025; DAILY	WOUND CARE DONE; JP DRAIN REM AYS; 2. CELEXOB 200MG/CAP, 1 CA	AP BID PRN X F	AIN;3. MU	PIROCIN OINTME	ENT, APPLY BID (ON AFFECTED
AREA: FOLLOW UP	ON 03/28/25 AT ENT OPD, 10AM; REFER A	CCORDINGLY				1

Surgical Procedure Done; TOTAL THYROIDECTOMY

Disposition: IMPROVED