



May 2, 2024

MEDICAL CERTIFICATE

TO WHOM IT MAY CONCERN:

THIS IS TO CERTIFY that <u>BELONIAS</u>, <u>BEATRIZ S</u>, of <u>ViSCA</u>, <u>Baybay City</u>, <u>Leyte</u> <u>was examined</u> and treated/ confined in this hospital on/from <u>April 19</u>, <u>2024</u> to <u>April 29</u>, <u>2024</u> with the following findings and/or diagnosis:

Fracture 2nd, 3rd, 4th Metatarsals Left Foot

nothing follows

and would need medical attention for	(-)	days baring complications.
REMARKS:		
Seen at USHER ER from 11:15am to 03	3:00pm on A	pril 19, 2024.

CHRISTELLE VENUS F. CAPUNO, M.D.

Medical Officer:

III

License No.

0156881

Paid w/ O.R No.

Email: usher@vsu.edu.ph Website: www.vsu.edu.ph Phone: (053) 565-0600 LOCAL 1047 Page 1 of 1 FM-UHS-13 v2 03-04-2024

No 24-902