




Republic of the Philippines
Department of Education
Region IV-A CALABARZON

CITY SCHOOLS DIVISION OFFICE OF ANTIPOLO



MEMORANDUM

TO: OIC- Assistant Schools Division Superintendent
OIC Chief, Curriculum Implementation Division
Chief, School Governance and Operation Division
Public School District Supervisors
Elementary School Heads/TIC/OIC
Junior and Senior High School Heads/TIC/OIC
Elementary, Secondary and Senior High School Clinic Teacher/Nurse
All other concerned

FROM: *fw:* 
DR. ROMMEL C. BAUTISTA, CESO V
Schools Division Superintendent

SUBJECT: SUBMISSION OF HEALTH COMPLAINT IN SCHOOL CLINIC FROM JUNE 2018-JANUARY 2019

Date: February 11, 2019

This is to inform the need to submit the health complain received by the Clinic teachers/Nurse to elaine.calacday@deped.gov.ph on February 13, 2019.

Attached here is the template for your information and guidance.

For strict compliance

UM 76 s. 2019
@HNUeac



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School: _____

School Year: 2018-2019

Principal: _____

Total number of Learners: _____

Health Complain	Total Number							
	June	July	Aug	Sept	Oct	Nov	Dec	Jan.
Head Ache								
Dizziness								
Eye Pain								
Red Eyes								
Ear Pain								
Tooth Ache								
Sore Throat								
Vomiting								
Colds								
Cough								
Difficulty of Breathing								
Muscle Pain								
Stomach Ache								
Diarrhea								
Dysmenorrhea								
Wounds								
Insect Bites								
Animal Bites								
Itchiness of the skin								
Fever								
Dengue								
Mumps								
Chicken Pox								
Others								
Total:								

Remarks: _____

Prepared by:

Checked by:

Principal