



RIVERSIDE MEDICAL CENTER, INC.

Owner and operator of the Dr. Pablo O. Torre Memorial Hospital
A proud member of the Metro Pacific Hospital Holdings, Inc.

Date: _____

Name: _____

ABO Blood Type: _____ **RH:** _____

Medical Technologist

Pathologist

DPOTMH-LAB-F008

Unauthorized duplication of this form is strictly prohibited

Effective Date: 02-01-2020