STATEMENT: I have read the above questions.

The answers are correct and no information concerning my present or past state of health has been withheld.

Signed: ..... Date: 05/4/2018

FOR COMPLETION BY EXAMINING DOCTOR

Further details of medical history since last examination

(N = Normal, A = Abnormal please describe)			PHYSICAL EXAMINATION
N	A		
/		1. EYES & PUPILS	
/		2. E.N.T.	
/		3. TEETH & MOUTH	
/		4. LUNGS & CHEST	
/		5. CARDIOVASCULAR SYSTEM	
/		6. ABDO. VISCERA	
/		7. HERNIAL ORIFICES	
/		8. ANUS & RECTUM	
/		9. GENITO-URINARY	
/		10. EXTREMITIES	
/		11. MUSCULO-SKELETAL	
/		12. SKIN & VARICOSE VNS.	
/		13. C.N.S.	
		14.	
		15.	

HEIGHT cm	WEIGHT kg	B.P.	PULSE	HEARING	VISION	DISTANT		NEAR		Color Vision Blood Group
179.4 cm	74.9 kg	120/70	80/min	L N R N	Uncorrected	6/6	6/6	NJ	NJ	NORMAL
					Corrected					

N	A		LABORATORY AND SPECIAL INVESTIGATIONS	N	A	
/		1. Blood Type		/		7. Sickle Cell Screening (Pre – Emp)
/		2. Hb Blood count ESR & CBC		/		8. Spirometry
	/	3. Lipid Profile		/		9. Audiogram
/		4. Random blood sugar				10. Chest X-Ray
/		5. LFT		/		11. ECG
/		6. RFT		/		12. Drug Screen /Pre Emp

N	A			N	A	
		13. Framingham Risk Score (> 40)	2.0 %			14. CR Screen(HIV, HBsag & HCV)
		15. TMT (> 60 for Routine Medicals)				16. TMT (> 50 for Initial Med / Pre-Emp.)

ASSESSMENT AND RECOMMENDATIONS BY EXAMINING DOCTOR.

Pt should see a physician for deranged Lipid Profile

☑ Fit Worldwide ☐ FIT Restricted Service ☐ Temporarily Unfit (See correspondence)

Signature ..... Doctor/Sister

Dr. S. Zaheer Ahmed (MBBS, PGDCC)
Cardiologist
MOH License No. : 14483
SAGAR POLYCLINIC LLC, MUSCAT, OMAN

C.M.O.'s Initials..... Date 7/4/18
Name (Block Capitals)

مجمع صاغر الطبي ش.م.م
س.ت: ١٢٥٢٨٣٦
ص.ب: ٨٨٩، مسقط
الرمز: ١٠٠
سلطنة عمان
C.R. : 1252836
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