



## Pre-Employment Medical Examination

## فحص اللياقة الطبية والشهادة

TO: DATE 08:16 PM 21/02/2026

FILE NO. 7412713 CATEGORY New BLOOD GROUP O +

| PERSONAL DETAILS |                          |               |                      |     |      |
|------------------|--------------------------|---------------|----------------------|-----|------|
| NAME             | Zuhaib Liaqat Liaqat Ali |               | زهيب لياقت لياقت علي |     |      |
| NATIONALITY      | PAKISTAN                 | AGE           | 35 Years             | SEX | Male |
| PASSPORT / IQAMA | 2597412713               | DATE OF BIRTH | 03-04-1991           |     |      |

| EMPLOYMENT DETAILS |        |
|--------------------|--------|
| SPONSOR / COMPANY  |        |
| JOB DESCRIPTION    |        |
| CITY               | RIYADH |



| MEDICAL EXAMINATION |           |    |        |          |      |    |
|---------------------|-----------|----|--------|----------|------|----|
| HEIGHT              | 172       | CM | WEIGHT | 73       | KG   |    |
| PULSE               | 72 b/Min. |    | B.P.   | 80 - 129 | TEMP | °C |
|                     |           |    |        | mmHg     |      |    |
| LUNGS & CHEST       | Normal    |    |        |          |      |    |
| CARDIO              | Normal    |    |        |          |      |    |
| VASCULAR            | Normal    |    |        |          |      |    |
| NEUROLOGICAL        | Normal    |    |        |          |      |    |

| VISION          | N6 = NORMAL |            | N6=NORMAL  |            |
|-----------------|-------------|------------|------------|------------|
|                 | NEAR LEFT   | 6/6=NORMAL | RIGHT      | 6/6=NORMAL |
| FAR LEFT        | 6/6=NORMAL  | RIGHT      | 6/6=NORMAL |            |
| WITHOUT GLASSES |             |            |            |            |

| HEARING | LEFT | NORMAL | RIGHT | NORMAL |
|---------|------|--------|-------|--------|
|---------|------|--------|-------|--------|

| GENERAL HEALTH CONDITION | NO COUGH-NO FEVER-NO BREATHING DIFFICULTY<br>NO COVID-19 SYMPTOMS |
|--------------------------|---|
|--------------------------|---|

| APPEARANCE | NORMAL |
|------------|--------|
|------------|--------|

| IF SUFFERING FROM ANY CHRONIC DISEASES | NIL |
|--|-----|
|--|-----|

| ADDITIONAL COMMENTS IF ANY : | FIT FOR WORK |
|------------------------------|--------------|
|------------------------------|--------------|

| NOTE : This Medical Fitness Report is Valid Till 6 Month  |
|---|
| <p>د / شريف حبيب<br/>DR. SHERIF HABIB<br/>Medical Director<br/>الترخيص رقم : 1146841/9/3<br/>License No. 1146841/9/3</p> <p>Dr. Saeed Abdul Khaliq<br/>Medical Director</p> |

المرضى لا يقبلون للعطلة والسفر

د / شريف حبيب  
DR. SHERIF HABIB  
Medical Director