





Medical Checkup Requirement
For permission work visa in kingdom of Bahrain


This Form is applicable in countries with no GCC accredited medical center

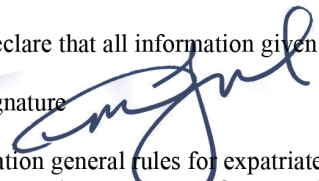
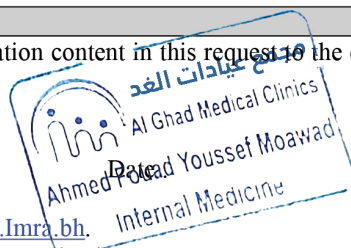
SECTION 1 : Personal Data			
 	Name Mohammed Abdullah Mohammed Saif		Age 48 Yrs.
	Nationality Turkey	Passport No. U36190493	
	DOB 14 JAN. 1977	Sex Male	
	Marital Status <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widow		
	Job Title Businessman رجل اعمال	CPR/IF applicable	

SECTION 2 : Vital Data					
Blood Pressure	100 - 130	Height	172 CM	ECG	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Abnormal
Pulse	<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Irregular	Weight	62 Kg	Color Vision	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Abnormal RT : 6/6 LT: 6/6

SECTION 3 : Clinical Examination / Lab Investigation					
Clinical Examination					
Cardiovascular Examination			Respiratory Examination		
General Appearance	N/	AB	Auscultation	N/	AB
Auscultation	N/	AB	Chest X-Ray	N/	AB

NOTE :

Laboratory Investigation						
STOOL		SEROLOGY			RESULT	
Normal	Abnormal	RESULTS			FIT	UNFIT
OVA	✓	HbsAG	<input checked="" type="checkbox"/> Negative	<input type="checkbox"/> Positive	Hospital Stamp 	
CYST	✓	HCV	<input checked="" type="checkbox"/> Negative	<input type="checkbox"/> Positive		
Amoebae	✓	HIV	<input checked="" type="checkbox"/> Negative	<input type="checkbox"/> Positive		
Flagyal	✓	VDRL	<input checked="" type="checkbox"/> Negative	<input type="checkbox"/> Positive		
RBC	✓	URINE				
WBC	✓	Sugar	Albumin	Blood		
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		

DECLARATION	
I hereby <u>Dr. Tayyab Mustafa Bhopal</u>	have no objection to release any information content in this request to the concerned Authority.
I Dr. <u>Sameera Ahmed</u>	declare that all information given is true.
Signature 	 Date <u>10/10/2020</u> Dr. <u>Ahmed Youssef Moawad</u> Internal Medicine
* Kindly refer to the pre-employment examination general rules for expatriates www.lmra.bh . * Polio vaccination mandatory in reported country / MMR is must for expatriates from endemic area.	