

# مجمع عيادات الغد المتخصصة الطبي

## Al-Ghad Specialized Clinics Complex



### MEDICAL FITNESS REPORT

#### تقرير اللياقة الطبية



SECTION 1 : Personal Data				
	<b>Name</b>	Suman Mia / سومان مياء سومان مياء	<b>Age</b>	23 Yrs.
	<b>Nationality</b>	Bangladesh - بنغلاديش	<b>IQAMA No.</b>	2615334493
	<b>DOB</b>	06-09-2003	<b>Sex</b>	Male
	<b>Marital Status</b>	<input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widow		
	<b>Blood Group</b>	B +ve	<b>Job Title</b>	عامل تحميل و تنزيل

SECTION 2 : Vital Data					
<b>Blood Pressure</b>	80 - 115	<b>Height</b>	168 CM	<b>ECG</b>	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Abnormal
<b>Pulse</b>	<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Irregular	<b>Weight</b>	54 Kg	<b>Color Vision</b>	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Abnormal RT : 6/6    LT: 6/6

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

**NOTE :**  
 MEDICAL REPORT CONDUCTED ON May 2026, VALIDATION OF REPORT TILL May 2027.  
 تم إجراء التقرير الطبي في مئى 2026 ، والتحقق من صحة التقرير حتى مايو 2027.

Laboratory Investigation							
STOOL		SEROLOGY			RESULT		
Normal	Abnormal	RESULTS			<input checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/>	Albumin	<input checked="" type="checkbox"/>	Blood	<input checked="" type="checkbox"/>

DECLARATION	
I hereby <u>Dr. Tayyab Mustafa Bhopo</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 : 30-05-2026

\* Kindly refer to the pre-employment examination general rules for expatriates [www.Imra.bh](http://www.Imra.bh).  
 \* Polio vaccination mandatory in reported country / MMR is must for expatriates from endemic area.