




### MEDICAL FITNESS REPORT تقرير اللياقة الطبية

#### SECTION 1 : Personal Data

	<b>Name</b>	Jobayer Mia	زوبير ميا	<b>Age</b>	23 Yrs.
	<b>Nationality</b>	بنجلاديش - Bangladesh		<b>IQAMA No.</b>	2638535894
	<b>DOB</b>	01-11-2003		<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>	A +ve	<b>Job Title</b>	مؤسسة سلوى خالد فرز الشمري عامل تنظيف مركبات	

#### SECTION 2 : Vital Data

<b>Blood Pressure</b>	80 - 118	<b>Height</b>	169 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>	57 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


المرضى لا تقبل للمعمل والسفر

#### NOTE :

MEDICAL REPORT CONDUCTED ON June 2026, VALIDATION OF REPORT TILL June 2027.

تم إجراء التقرير الطبي في 2026 ، والتحقق من صحة التقرير حتى 2027

#### Laboratory Investigation

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

#### DECLARATION

I hereby Dr. Tayyab Mustafa Bhopal have no objection to release any information content in this request to the concerned Authority.

I Dr. Sameera Ahmed declare that all information given is true.

Signature

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