

## HAQUE & SONS LTD.



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Accredited By BMDC
Accreditation No. A16713

PATIENT CONTROL NUMBER: <NO>

Revision Date: 24th July 2022

## MEDICAL EXAMINATION CERTIFICATE

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Have you ever had any of the following con	nditions?			<u>.</u>		
Condition	YES NO	Conditio		YES NO		
1 En Eye/vision problem		18 Sleep pro				
2 High blood pressure		19 Do you sr				
3 Heart/vascular disease	0 8	20 Operation				
4 Heart surgery		21 Epilepsy/s				
5 Varicose veins		22 Dizziness				
6 Asthma/bronchitis			onsciousness			
7 Blood disorder				~ P/ &		
		1	c problems	11/2/		
		25 Depression		11/1/1/20		
9 Thyroid problem		26 Attempted	- A A A			
10 Digestive disorder	. /	27 Loss of m		// 3.2		
11 Kidney problem	/	28 Balance p	4 4 5 7			
12 Skin problem		29 Severe he		/ B &		
13 Allergies			throet problems	The state of the s		
14 Infectious/contagious diseases		31 Restricted	Mability			
15 Hernia		Back prob				
16 Genital disorders		Amputatio				
17 Pregnancy	The William					
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Distant Near	6/6	6/1			780	Right			
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Head			Normal		nal Varicos	e veins		Ŋ	ormal Abnormal
Sinuses, nose	e, throat		A			r (inc. pedal	No. control of the co		B
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	BLOOD R/E		SGPT		37. 10	7/4	Altohol Test URINE R/E	Posi	tive Negative
DC(differential		NAD	SGOT	-	30.0	AH	VINE VE	OTHERS	NAD
HAEMOGLOB		14.8		RUG AN	ALCOHOLTE	8 1	HBsAg	□ Rea	ctiv Nonreactive
ESR (WESTE		25	Morphine .	1	Positive (A)	La Stive	HIV / AIDS Test	□ Rea	
WBC		6500	Amphetam	pe [	Positive D		VDRL		ctiv Nonreactive
	GLUCOSE	LÉVEL	hercyclidi	na 1	Rostive D	legative	Blood Type		1 DTVE
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Revision: 5.1