

Medical Checkup Sheet

Name John BROWN

Date of Birth 11 / June / 1982
Day Month Year

Sex Male ~~Female~~ (Please circle one)

Current Address 1 Main Avenue, Newbridge, Main Province, Canada

1. Weight 70Kg

10. Hearing Normal

2. Height 185cm

11. Blood Sedimentation

3. Abdominal Palpation/
Stethoscope Test
Normal

None

4. X-Ray Normal

12. Tuberculin Reaction

Positive Negative

5. Chest Problems
None

13. Past Illnesses

None

6. Eyesight
~~With glasses~~
Left Right
~~Without glasses~~

14. Chronic Illnesses

None

7. Color Blindness
Left 1.0 Right 1.0

15. Allergies Milk, pollen

16. Dietary restrictions

Cannot eat pork

8. Blood Pressure
None

17. Blood type

O positive

120 /80

9. Urine Test Normal

18. Other

None

19. Alcohol Yes No (Amount: 350ml per day/week/month)

20. Cigarette Yes No (Amount: per day/week/month)

I hereby certify that the above details are correct.

Hospital Newbridge General Hospital

Address 100 Average Avenue, Newbridge, Main Province, Canada

Date 1 / January / 2017
Day Month Year

Certified by Dr. Sarah Smith

Signature Dr. Sarah Smith