



Medical Checkup Requirement for permission work visa in kingdom of Bahrain

SECTION 1 : Personal Data				
	Name		Age	
	Nationality		Passport No.	
	DOB		Sex	
	Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Single	<input type="checkbox"/> Divorced <input type="checkbox"/> Widow
	CPR/IF applicable		Job Title	

SECTION 2 : Vital Data					
Blood Pressure		Height		ECG	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal
Pulse	<input type="checkbox"/> Regular <input type="checkbox"/> Irregular	Weight		Color Vision	<input 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 type="checkbox"/> Negative <input type="checkbox"/> Positive	Hospital Stamp		
CYST			HCV	<input type="checkbox"/> Negative <input type="checkbox"/> Positive			
Amoebae			HIV	<input type="checkbox"/> Negative <input type="checkbox"/> Positive			
Flagyal			VDRL	<input 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 _____ have no objection to release any information content in this request to the concerned Authority.	
I Dr. _____ declare that all information given is true.	
Signature	Date :
* Kindly refer to the pre-employment examination general rules for expatriates <a href="http://www.Imra.bh">www.Imra.bh</a> .	
* Polio vaccination mandatory in reported country / MMR is must for expatriates from endemic area.	

