




### MEDICAL FITNESS REPORT تقرير اللياقة الطبية

#### SECTION 1 : Personal Data

	<b>Name</b> Muhammad Naeem Sajjad Hussain Khan محمد نعيم حسين خان	<b>Age</b>	25 Yrs.	
	<b>Nationality</b>	PAKISTAN	<b>IQAMA No.</b>	2566054371
	<b>DOB</b>	10-06-2001	<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>	سائق شاحنة ثقيلة

#### SECTION 2 : Vital Data

<b>Blood Pressure</b>	80 - 122	<b>Height</b>	172 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>	67 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

##### Clinical Examination

##### Cardiovascular Examination

<b>General Appearance</b>	N/	AB
<b>Auscultation</b>	N/	AB

##### Respiratory Examination

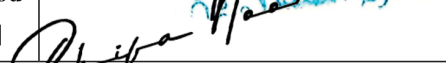
<b>Auscultation</b>	N/	AB
<b>Chest X-Ray</b>	N/	AB

#### NOTE :

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

تم إجراء التقرير الطبي في 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  مجمع الغد المتخصصة الطبي ature Medical Specialized Group التقارير الطبية			
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 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.bh](http://www.Imra.bh).
- \* Polio vaccination mandatory in reported country / MMR is must for expatriates from endemic area.