



MEDICAL CHECK UP SUMMARY / CERTIFICATE

فحص اللياقة الطبية والشهادة

TO: _____ DATE: 11:09 PM 11/10/2025

FILE NO. 1719994 CATEGORY New BLOOD GROUP B +ve

PERSONAL DETAILS					
NAME	ABDELRAHMAN MOHAMED KAMEL IBRAHIM				عبدالرحمن محمد كامل ابراهيم
NATIONALITY	EGYPT - مصر	AGE	33 Years	SEX	Male
PASSPORT / IQAMA	2611719994	DATE OF BIRTH	20-02-1992		

EMPLOYMENT DETAILS			
SPONSOR / COMPANY			
JOB DESCRIPTION		CITY	DAMMAM

MEDICAL EXAMINATION					
HEIGHT	171	CM	WEIGHT	92	KG
PULSE	72 b/Min.		B.P.	130 / 90	TEMP °C
				mmHg	
LUNGS & CHEST	Normal				
CARDIO	Normal				
VASCULAR					
NEUROLOGICAL	Normal				

VISION	N6 = NORMAL		N6=NORMAL		WITHOUT GLASSES
	NEAR LEFT	6/6=NORMAL	RIGHT	6/6=NORMAL	
	FAR LEFT	6/6=NORMAL	RIGHT	6/6=NORMAL	

HEARING	LEFT	NORMAL	RIGHT	NORMAL
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GENERAL HEALTH CONDITION	NO COUGH-NO FEVER-NO BREATHING DIFFICULTY NO COVID-19 SYMPTOMS
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APPEARANCE	NORMAL
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IF SUFFERING FROM ANY CHRONIC DISEASES	NIL
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ADDITIONAL COMMENTS IF ANY :	FIT FOR WORK
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NOTE : This Medical Fitness Report is Valid Till 6 Month

د / شريف حبيب
DR. SHERIF HABIB
Medical Director
الترخيص رقم : 1146841/9/3
License No. 1146841/9/3
Dr. Shahid Hussain
Attending Physician

Dr. Saeed Abdul-Khalig
Medical Director
د / شريف حبيب
DR. SHERIF HABIB
Medical Director
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