

NAAF MARINE SERVICES NMS/F-04 TITLE:- PRE-JOINING MEDICAL EXAMINATION REPORT/CERTIFICATE

 Date
 1 July 2012

 Issue No
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 Page No
 5 of 6

Appendix 1

Medical Exam Form

CONFIDENTIAL FORM

		CONTIDE	VIIALIONN	
Sight				
Use of alone	as an agnitudi land	sec. Ves / No (if yes	specify which type and	for what purpose)

Use of g	lasses or	contact l	enses: Yes /	No (if y	es, spe	cify which	type	and for	what purp	oose)	
	Visual acuity						1		Visua	al fields	
Unaided		1	Aided						Normal	Defective	
	Right	Left	Binocular	Right	Left	Binocular	7 [Right	V		
	eye	eye		eye	eye		_	eye		- x x	
Distant	619	619	619	616	616	616		Left eye	V		
Near	VVV			V	V	V ,					
Color vision: Not tested Normal Doubtful Defective									fective		
Hearing											
	Pure to	ne and a	udio metry	(thresho	ld value	es in dB)	Spe	ech and		test (metres)	
	500	4,000		3,000	4,000	6,000			Normal	Whisper	
2	Hz	Hz	Hz	Hz	Hz	Hz	D:	-1.4	1		
Right e	ear V	V	V	V	~	N	Kış	ght ear	V		
Left ea	r v	/ v	V	V	~		Le	ft ear	V		
Height:	Height:(cm)										
Pulse rate: 88 (/minute) Rhythm: REGOLAR.											
Blood p	Blood pressure: Systolic: 140 (mm Hg) Diastolic: 90 (mm Hg)										
Urinaly	Urinalysis: Glucose: WCC Protein: WCC										
			rmal Abno						Norma	Abnormal	
Head		* ₂	Y [Skin				4		
Sinuses,	nose, thro	Varicose veins									
Mouth/t	eeth	1	\mathbf{Y}		Vascular (inc. pedal puls				W.		
Ears (general)					Abdomen and viscera						
	Tympanic membrane					Hernia					
Eyes					Anus (not rectal exam.)						
Opthalmoscopy					G-U system				P		
Pupils					Upper and lower extremities						
Eye movement					Spine (C/S, T/S and L/S)						
Lungs and chest					Neurologic (full brief)				9		
Breast examination () (A Psychiatric											
Heart					-	ral appearai	nce				
Chest Y	ζ-ray: [Not p	erformed			on (day/mo	nth/y	ear): _	0 1 FE	B 2023	
Results	:	Si ta di Santa di Sa	WORLA	e 2	che	AR	,				