

## NAAF MARINE SERVICES

NMS/F-04

1 July 2012 Date 00 Issue No

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TITLE:- PRE-JOINING MEDICAL EXAMINATION REPORT/CERTIFICATE

Appendix 1 Medical Exam Form CONFIDENTIAL FORM

Other diagnostic test(s) and result(s):

Test 160, MIV, DQATEST-Result

c limitations:
Medical practitioner's comments and assessment of fitness, with reasons for any limitations:
Fit For Duty on Board Ship
Vaccination status recorded (optional, but recommended by Administrator): Yes No
Assessment of fitness for service at sea
On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the examinee medically:
☐ Fit for look-out duty☐ Not fit for look-out duty
Deck service Engine service Catering service Other services
Unfit
Without restrictions With restrictions Visual aid required Yes Yo
Describe restrictions (e.g., specific positions, type of ship, trade area)
Action taken by medical practitioner (e.g., referral):
Medical certificate's date of expiration (day/month/year):
Date of medical certificate issued (day/month/year):
Number of medical certificate: $\triangle 7 - 2023 - 0 \le 34$ Official stamp:  Signature of medical practitioner:
Name of medical practitioner: (Typed of The History Taher Chamber)  License number of medical practitioner: Taher Chamber Cham
Address of medical practitioner: Regn. No. As rock (competent authority)