

### CANDIDATE INFORMATION



Name  
**MUHAMMAD ILYAS AKRAM**  
Marital status  
Unmarried

Passport No.  
**JU1328561**  
Age  
**19**

Height  
**160.0 cm**  
Weight  
**53.0 kg**  
BMI  
**20.7**

Gender  
**Male**  
Passport expiry  
date  
**12/6/2030**  
National ID  
**8120244528567**

Nationality  
**Pakistani**  
Phone  
**+3444001675**

Traveling to  
**UAE**  
Profession  
**Servant**

### MEDICAL EXAMINATION: GENERAL

Blood pressure  
**120/80**  
RR/min  
**18**  
Pulse/min  
**77**

### VISUAL ACUITY AIDED AND UNAIDED

Colour vision  
**Normal**  
Comments

#### DISTANT/AIDED

Left eye 6/ - Right eye 6/ -

#### DISTANT/UNAIDED

Left eye 6/ 6 Right eye 6/ 6

#### NEAR/AIDED

Left eye 20/ - Right eye 20/ -

#### NEAR/UNAIDED

Left eye 20/ 20 Right eye 20/ 20

### HEARING

Left ear  
**Normal**  
Right ear  
**Normal**

### SYSTEM EXAMINATION

General appearance  
**NAD**  
Cardiovascular  
**NAD**  
Respiratory  
**NAD**  
ENT  
**NAD**

### GASTRO INTESTINAL

Abdomen (Mass, tenderness)  
**NAD**  
Hernia  
**NAD**

### GENITOURINARY

Genitourinary  
**NAD**  
Hydrocele  
**NAD**

### MUSCULOSKELETAL

Extremities  
**NAD**  
Back  
**NAD**  
Skin  
**NAD**  
C.N.S.  
**NAD**  
Deformities  
**NAD**

### MENTAL STATUS EXAMINATION

#### APPEARANCE

Appearance  
**NAD**  
Behaviour  
**NAD**

#### COGNITION

Cognition  
**NAD**  
Memory  
**NAD**  
Mood  
**NAD**  
Others

Speech  
**NAD**

Orientation  
**NAD**  
Concentration  
**NAD**  
Thoughts  
**NAD**  
Remarks

### INVESTIGATION

Chest X-Ray  
**NAD**  
Comment

### LABORATORY INVESTIGATION

#### BLOOD

Blood group  
**B+**  
Haemoglobin  
g/dL  
**14.3**

#### THICK FILM FOR

Malaria  
**Absent**  
Micro filaria  
**Absent**

#### BIOCHEMISTRY

R.B.S  
**74.0**  
Creatinine  
**0.7**  
L.F.T  
**Normal**

#### SEROLOGY

HIV I&II  
**Negative**  
Anti HCV  
**Negative**  
TPHA (if VDRL  
positive)  
**Negative**  
HBs Ag  
**Negative**  
VDRL  
**Negative**

#### URINE

Sugar  
**Negative**  
Albumin  
**Negative**

#### STOOL

#### ROUTINE

Helminthes  
**Absent**  
CYST  
**Absent**  
OVA  
**Absent**  
Others

### VACCINATION STATUS

Polio  
**Yes**  
Date  
MMR 1  
**Yes**  
Date  
MMR 2  
**Yes**  
Date  
Meningococcal  
**Yes**  
Date  
COVID-19  
**Yes**  
Date

### Remarks



Mentioned above is the medical report for Mr./Ms.  
**MUHAMMAD ILYAS AKRAM** who is Fit for the above  
mentioned job according to the GCC criteria

**DR. SHAHIDA**

Doctor's name

Signature

