

**REPORT OF THE MEDICAL EXAMINATION**

(By Civil Surgeon of District Hospital)

1. Name of the Candidate : \_\_\_\_\_
2. Category of the Post : \_\_\_\_\_
3. General Development : Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_
- Nutrition : Thin \_\_\_\_\_ Average \_\_\_\_\_ Obese \_\_\_\_\_
- Mark of Identification : \_\_\_\_\_
- Height \_\_\_\_\_ Cms. Weight \_\_\_\_\_ Kgs.
- Girth of Chest : After full inspiration : \_\_\_\_\_ Cms.
- After full expiration : \_\_\_\_\_ Cms.
- Girth of Abdomen (At Naval) : \_\_\_\_\_ Cms.
4. Skin : Any obvious disease :
- (a) Whether the vision is normal : Yes / No
- If not, is it capable of being :  
corrected to 6/6 with glasses(not  
with contact lenses)
- (b) If the candidate was referred to an eye surgeon what are surgeon's observations in respect of the following – :
- (1) Any disease :  
(2) Night Blindness :  
(3) Defect in color vision :  
(4) Field of vision :  
(5) Visual Acuity :  
(6) Fundus Examination :

| Acuity of vision   | Naked eyes | With glasses | Strength of Glasses |      |      |
|--------------------|------------|--------------|---------------------|------|------|
|                    |            |              | Sph.                | Cyl. | Axis |
| Distant Vision     |            |              |                     |      |      |
| R.E.               |            |              |                     |      |      |
| L.E.               |            |              |                     |      |      |
| <b>Near Vision</b> |            |              |                     |      |      |
| R.E.               |            |              |                     |      |      |
| L.E.               |            |              |                     |      |      |

5. **Ears** : Inspection \_\_\_\_\_
- Hearing : Right Ear \_\_\_\_\_
- Left Ear \_\_\_\_\_
6. **Condition of teeth** \_\_\_\_\_
7. **Respiratory System**

Does physical examination reveal anything abnormal in the respiratory organs ?

\_\_\_\_\_

If yes, explain fully

\_\_\_\_\_

\_\_\_\_\_

**8. Circulatory System**

- (a) Heart : Any organic Lesion ?  
Pulse Rate /Minute.
- (b) Blood Pressure : Systolic mm of Hg.  
Diastolic

**9. Abdomen**

- (a) Tenderness Hernia
- Palpable : Liver Spleen
- Kidneys Tumor
- (b) Hemorrhoids Fistulas

10. **Nervous System** : Indication of nervous of mental disabilities.

11. **Loco-Motor System** : Any abnormality

12. **Any Physical disability** (Mention details)

13. **Genitor Urinary System** : Any evidence of Hydrocoele, Varicocoele etc.

**Urine Analysis** :

- (a) Physical appearance (b) Sp.Gr.
- (b) Albumin (d) Sugar
- (c) Cast (f) Cells

14. **Report of X-Ray examination of chest** :

15. **Report of the Blood examination**

|            |                   |         |                      |     |   |
|------------|-------------------|---------|----------------------|-----|---|
| Hb %       | gm%               | ECR     | mm fall after 1 hour |     |   |
| TLC        | /cu.mm            |         |                      |     |   |
| DLC        | P                 | L       | E                    | M   | B |
| Sugar      | Fasting           | mg%, PP | mg%, Random          | mg% |   |
| Blood Urea | mg%               |         | S.Creatinine         | mg% |   |
| Lipid      | Total Cholesterol |         | mg%, Triglycerides   | mg% |   |
| SGPT       | IU/L.             | H.I.V.  |                      |     |   |

**16. ECG**

17. Is there anything in the health of the candidate likely to render his/her unfit for the efficient discharge of his/her duties in the service for which he/she is a candidate ?

18. The Medical Examination report should record the findings under one of the following categories :

- (i) Fit
- (ii) Unfit on account of

NOTE : In the case of female candidate, if it is found that she is pregnant, she should be declared temporarily unfit. **Mention pregnancy period** - -----

Palce :

Date

(Signature of Candidate)

Signature of the Civil Surgeon  
 Name : \_\_\_\_\_  
 (Designation) : \_\_\_\_\_  
 (Seal)