SHIFA AL-JUBAIL MEDICAL CENTER CO.
C.R. 205500612

شركة مجمع عيادات شفاء الجبيل الطبي
س.ت. ٢٠٥٥٠٠٦٦١٢



# SAUDI ARAMCO / CONTRACTOR MEDICAL EXAMINATION
# OPERATOR HEAVY EQUIPMENT OPERATOR RIGGER & SCAFFOLDING
# WORK PERMIT RECEIVER PHYSICIAN'S EXAMINATION FORM

[UPON COMPLETING FORM, PHYSICIAN SHALL SIGN IN THE BOX
AT THE BOTTOM & VERIFY SIGNATURE WITH HIS PERSONAL STAMPL AND HIS FACILITY STAMP]

**EMPLOYEE NAME : AbdulMajjeed - SeerMuhammed**
**عبد المجيد - - شير محمد**

**SAUDI BADAGE NO. : 2171990399**
**DATE : 29-12-2025 11:45 AM**

| | NORMAL | ABNORMAL |
|---|---|---|
| **VISION :** | | |
| 1. The vision shall not be less than 20/40 in each eye separately with or without the use of eye glasses or contact lenses. | ■ | ☐ |
| 2. Color vision and visual fields should be normal. | ■ | ☐ |
| 3. Diplopia is UNACCEPTABLE. | ■ | ☐ |
| **HEARING :** | | |
| 4. Hearing shall be adequate for normal speech communication with of without a hearing aid. | ■ | ☐ |
| **POTENTIAL SUDDEN INCAPACITY :** | | |
| 5. Any condition likely to cause sudden incapacity in UNACCEPTABLE. This includes, but not limited to, a history of seizures after the age of 5 years, vestibular disorders, heart disease and diabetes mellitus. | ■ | ☐ |
| **MISCELLANEOUS - The Following Must Be Considered :** | | |
| 6. Impairment of musculo-skeletal capacities. | ■ | ☐ |
| 7. Co-Ordination and progressive or disabling neurlogical disease. | ■ | ☐ |
| 8. Ahistory of Psychiatric illness or emotional instability. | ■ | ☐ |
| 9. Substance abuse. | ■ | ☐ |
| 10. Medication and it's side effects. | ■ | ☐ |
| **FIT to WORK ?** | | |
| 4. Hearing shall be adequate for normal speech communication with of without a hearing aid. | ■ YES | ☐ NO |

FIT FOR WORK

**Blood Group : O +ve**

**Dr. HIRA IMMAD**
**General Physician**
**SHIFA AL JUBAIL**

**Physician 's Signature**

**Facility Name**

د/ شريف حبيب
DR. SHERIF HABIB
Medical Director

**Facility Location (City)**
**JUBAIL**

Shifa Al Jubail Medical Center Co.
Jubail - Kingdom of Saudi Arabia

**Facility Telephone**
**013-3611777**

تقرير اللياقة البدنية صالح لمدة ٣ أشهر فقط من تاريخ الفحص، وفقاً لقواعد المجلس الصحي.
Fitness Medical Report is Valid For 3 Months Only From Date of Examine, According to Rules of Health Concil.