



MEDICAL CHECK UP SUMMARY / CERTIFICATE

فحص اللياقة الطبية والشهادة

TO: _____ DATE: 20:35 25/12/2024

FILE NO. 8934000 CATEGORY New BLOOD GROUP O -negative

PERSONAL DETAILS					
NAME	SAID RAHMAN MUAMBAR				سعيد الرحمن معمر
NATIONALITY	PAKISTAN	AGE	40 Years	SEX	Male
PASSPORT / IQAMA	2568934000	DATE OF BIRTH	10/03/1985		

EMPLOYMENT DETAILS		
SPONSOR / COMPANY		
JOB DESCRIPTION		CITY

MEDICAL EXAMINATION					
HEIGHT	173	CM	WEIGHT	63	KG
PULSE	72 b/Min.		B.P.	130 / 90 mmHg	TEMP 36.6 °C
LUNGS & CHEST	Normal				
CARDIO VASCULAR	Normal		BLOOD SUGAR LEVEL	100 - 135 mg/dl	A1c 5.5%
NEUROLOGICAL	Normal				

VISION	N6 = NORMAL		N6=NORMAL		
	NEAR LEFT	6/6=NORMAL	RIGHT	6/6=NORMAL	
	FAR LEFT	6/6=NORMAL	RIGHT	6/6=NORMAL	
			WITHOUT GLASSES		

HEARING	LEFT	NORMAL	RIGHT	NORMAL
---------	------	--------	-------	--------

GENERAL HEALTH CONDITION	NO COUGH-NO FEVER-NO BREATHING DIFFICULTY NO COVID-19 SYMPTOMS
--------------------------	---

APPEARANCE	NORMAL
------------	--------

IF SUFFERING FROM ANY CHRONIC DISEASES	NIL
--	-----

ADDITIONAL COMMENTS IF ANY :	FIT FOR WORK
------------------------------	--------------

NOTE : This Medical Fitness Report is Valid till December 2025

د / شريف حبيب
DR. SHERIF HABIB
Medical Director

الترخيص رقم : 1146841/9/3
License No. 1146841/9/3
Dr. Shahid Hussain
Attending Physician

Dr. Saeed Abdul Khalig
Medical Director

د / شريف حبيب
DR. SHERIF HABIB
Medical Director