

CONFIDENTIAL
MEDICAL REPORT

Medical Report on Mr/Miss/Mrs _____
(Circle the one applicable to you)

a candidate for appointment in the service of the _____

Municipality, as _____
(State nature of post to which appointment refers)

1. Age and other particulars

a)

Age	Height (without shoes)	Weight kg.	Measurement of chest at nipple line
			(a) On full inspiration: cm
			(b) On full expiration: cm

(b) Do the foregoing particulars reveal any departure from the normal? _____
(Describe any abnormality in detail and indicate probable cause thereof)

2. Respiratory System

- a) State whether chest well developed _____
- b) State whether any evidence of an old or commencing disease _____
- c) Report on X-ray of chest
(ALL APPLICANTS TO HAVE X-RAY) _____

3. Circular Respiratory

- a) Are the impulses and sound of the heart natural and the organ, and also the arteries, normal in every respect? _____
- b) Blood pressure
Systolic _____
Diastolic _____

4. Genito-Urinary System

- a) State whether there is any disease or abnormality of the kidneys, bladder or bladder or other part of the genito-urinary system. _____
- b) Is albumen sugar, pus, blood or other abnormal constituent present in the urine? _____

5. a) Is the applicant suffering from any of the following complaints: _____
Rheumatism, new growths, tubercle, syphilis, epilepsy, paralysis, fits, asthma, spitting blood, hernia, haemorrhoids, varicocele, flatfoot or any other complaint of the alimentary, nervous or endocrine system? (Where possible describe nature and/or extent of complaint).

b) If the answer to 5 (a) is "YES" a summary of diagnostic criteria and treatment received should be attached to this form.

6. Is the applicant maimed, deformed or physically defective or disfigured in any way? _____

7. Has the applicant any defect of: 1. Hearing? _____ 2. Sight? _____

3. Speech? _____ 4. Teeth? _____

8. From your examination and observations do you consider that the applicant is in good health and free from any physical or mental defect, disease or infirmity which would be likely to interfere with the proper performance of duty or to necessitate retirement therefrom earlier than the prescribed age of retirement (65 years)? YES NO

9. (If your answer to Question 8 be "NO" state fully the reason for your opinion).

Date: _____

Place: _____

(Name and qualifications of Medical Practitioner)