

## Medical Examination Report by MBBS Doctor

**(For Graduate & Technician Apprenticeship 2023-24 in BHEL Haridwar)**

Name of the Candidate \_\_\_\_\_

Father's Name \_\_\_\_\_

Age: \_\_\_\_\_ Years, Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Sight: RE \_\_\_\_\_ LE \_\_\_\_\_ Colour Vision \_\_\_\_\_

Chest on full Inspiration: \_\_\_\_\_ Difference (on expansion): \_\_\_\_\_

Chest is well formed: Yes/No

Lungs: \_\_\_\_\_ Heart: \_\_\_\_\_ BP: \_\_\_\_\_

Hearing: \_\_\_\_\_ Speech: \_\_\_\_\_ Teeth: \_\_\_\_\_

Congenital Mal Formation or Defects:

Identification Marks:

1. \_\_\_\_\_

2. \_\_\_\_\_

Varicose Veins:

Vaccination Marks: Present/Absent

Urine Examination:

Sugar: \_\_\_\_\_ Albumin: \_\_\_\_\_ Blood Group: \_\_\_\_\_

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It is certified that Mr./Mrs./Ms. \_\_\_\_\_ was examined by me & he/she is in good bodily health and free from any physical defect likely to interfere with his Apprentice Training.

Signature of Apprentice

Date: \_\_\_\_\_

Signature of Medical Officer

(With seal)

MBBS Reg. No.: \_\_\_\_\_