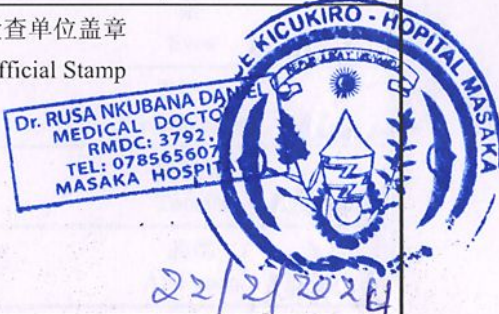


外国人体格检查记录 Physical Examination Record for Foreigner

姓名 Name	Dufayimwen Claude Jean Prince	性别 Sex	<input checked="" type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	出生日期 Birth Day-Month-Year	21/1/1982																																						
现在通讯地址 Present Mailing Address	Kigali / Kicukiro			血型 Blood																																							
国籍 Nationality	Rwandeese	出生地址 Birth Place	Karongi	type	O+																																						
<p>过去是否患有下列疾病（每项后面请回答“否”或“是”） Have you ever had any of the following diseases? (Each item must be answered "Yes" or "No")</p> <table border="0"> <tr> <td>斑疹伤寒 Typhus fever</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>菌痢 Bacillary dysentery</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>小儿麻痹症 Poliomylitis</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>布氏杆菌病 Brucellosis</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>白喉 Diphtheria</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>病毒性肝炎 Viral hepatitis</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>猩红热 Scarlet fever</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>产褥期链球菌 Puerperal streptococcus infection</td> <td></td> </tr> <tr> <td>回归热 Relapsing fever</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> <td>感染</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td colspan="2">伤寒和付伤寒 Typhoid and paratyphoid fever</td> <td colspan="2"><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td colspan="2">流行性脑脊髓膜炎 Epidemic cerebrospinal meningitis</td> <td colspan="2"><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> </table> <p>是否患有下列危及公秩序和安全的病症：（每项后面请回答“否”或“是”） Do you have any of the following diseases or disorders endangering the public order and security? (Each item must be answered "Yes" or "No")</p> <table border="0"> <tr> <td>毒物瘾 Toxicomania</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>精神错乱 Mental confusion</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>精神病 psychosis: 躁狂型 Manic Psychosis</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>妄想型 Paranoid Psychosis</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> <tr> <td>幻觉型 Hallucinatory Psychosis</td> <td><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</td> </tr> </table>						斑疹伤寒 Typhus fever	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	菌痢 Bacillary dysentery	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	小儿麻痹症 Poliomylitis	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	布氏杆菌病 Brucellosis	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	白喉 Diphtheria	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	病毒性肝炎 Viral hepatitis	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	猩红热 Scarlet fever	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	产褥期链球菌 Puerperal streptococcus infection		回归热 Relapsing fever	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	感染	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	伤寒和付伤寒 Typhoid and paratyphoid fever		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		流行性脑脊髓膜炎 Epidemic cerebrospinal meningitis		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		毒物瘾 Toxicomania	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	精神错乱 Mental confusion	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	精神病 psychosis: 躁狂型 Manic Psychosis	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	妄想型 Paranoid Psychosis	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	幻觉型 Hallucinatory Psychosis	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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身高 Height	172 cm	体重 Weight	69 kg	血压 Blood pressure	110/75 mmHg																																						
发育情况 Development	Normal	营养情况 Nourishment	Normal	颈部 Neck	Normal																																						
视力 左 L Vision 右 R	} Normal	矫正视力 左 L Corrected vision 右 R	} OK	眼 Eyes	Normal																																						
辨色力 Colour Sense	Normal	皮肤 skin	Normal	淋巴结 Lymph nodes	Normal																																						
耳 Ears	Normal	鼻 Nose	Normal	扁桃体 Tonsils	Normal																																						
心 Heart	Normal	肺 Lungs	Normal	腹部 Abdomen	Normal																																						



脊柱 Spine	Normal	四肢 Extremities	Normal	神经系统 Nervous system	Normal
其它所见 Other abnormal finding					
胸部 X 线 检查 Chest X-ray exam.	Normal CXR		心 电 图 E C G	Normal	
化验室检查 包括血清学诊断 Laboratory exam. (Serodiagnosis)	HIV : Negative Hbsag : Negative Hcv : Negative Tuberculosis : Negative				
未发现患有列检疫传染病和危害公共健康的疾病: <i>None of the following diseases or disorders found during the present examination.</i>					
霍 乱	Cholera	性 病	Venereal Disease		
黄 热 病	Yellow fever	开放性肺结核	Opening lung tuberculosis		
鼠 疫	Plague	艾 滋 病	AIDS		
麻 风	Leprosy	精 神 病	Psychosis		
意见 Suggestion	Healthy patient		检查单位盖章 Official Stamp 		
医师签字 Signature of Physician		日期 Date 22/2/2024			