

# 外国人体格检查表

## FOREIGNER PHYSICAL EXAMINATION FORM

姓名 Name	ALI RAZA	性别 Sex	<input checked="" type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female	出生日期 Birthday	01-01-1992
现在通讯地址 Present mailing address		CHAK NO 280 R-B THESIL AND DISTRICT FAISALABAD			
国籍或地区 Nationality (or Area)	PAKISTANI	出生地 Birth place	FAISALABAD	血型 Blood type	Dr. M. A. MBR Senior DHQ Hos.



过去是否患有列疾病：(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")

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	Poliomyelitis	<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	Puerperal streptococcus infection	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
回 归 热	Relapsing fever	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	菌 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			

是否患有列危及公共秩序和安全的病症：(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")

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 <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

身高 Height	175 cm	厘米 CM	体重 Weight	64 kg	公斤 Kg	血压 Blood pressure		毫米汞柱 mmHg
发育情况 Development			营养情况 Nourishment			颈部 Neck		
视力 左 L	6/6		矫正视力 左 L			眼		
Vision 右 R	6/6		Corrected vision 右 R			Eyes		
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	

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