MEDICAL EXAMINATION CERTIFICATE

(Attached with the Circular No.14/2013/TT-BYT dated May 06, 2013 of Minister of Health)

1. Internal medicine:				
Contents of examination			Full name of doctor	
II. CLINICAL EXA	MINATION			
Pulse: /9 times /minu Health classification:	te Blood pressure:	110/70mmHg		
Height: 170 cm Pulse: 79 times /minu	Weight: 59 kg		II index:	
, PHYSICAL EXAM		DMI :-	dove	
my knowledge.		Ong Duc Nha		
information is true a	nd correct with	4	(Signed)	
I commit that the abo	ove-mentioned		Prepared by	
	ancy (for female):	Can	Ke, April 20, 2020	
losages:	anou (for famala).			
	ny disease? If answer this	question "Yes",	list all types of drugs and	
3. Other questions (i	SC-1000-1-000-0			
f answer the above q	uestion "Yes", specify the na	me of diseases: .		
nental disorder and o		Yes 🗆	astima, cancer, epiteps),	
	y of the individual: Do you e, diabetesmellitus, tubercu			
	uestion "Yes", specify the na			
) No ⊠	b) Yes □	- 2-22		
	rculosis, bronchus asthma, ca	ncer, epilepsy, r	nental disorder and others?	
Anyone in your fam	ily has one of following d	iseases: contagio	ous disease, heart disease,	
. Disease prehi	story of family:			
DISEASE PREHIST	ORY OF OBJECT FOR E	XAMINATION	1	
	Reason for medical exam	nination: Workin	ng	
	Ho Chi Minh City			
	At Tra Vinh Public Security Current address: 69/4/20 Dang Thuy Tram, Ward 13, Binh Thanh,			
(photo)	Date of issue: 23/5/2014			
	ID Card No./Passport N			
	Gender: Male	Age: 21		

a) Circulation: Normal Health classification:	(Signed)
b) Respiration: Normal Health classification:	(Signed)
c) Digestion: Normal Health classification:	(Signed)
d) Kidney – Urinary : Normal Health classification:	(Signed)
d) Muscle- knucklebone: Normal Health classification: I	(Signed)
e) Nervous system: Normal Health classification: I	(Signed)
g) Mental diseases: Normal Health classification: I	(Signed)
2. Surgical medicine: Normal Health classification: I	(Signed)
3. Obstetrics and Gynecology: Health classification:	(Signed)
4. Eye - Vision: Without glasses: Right eye: 10/10 Left eye: 10/10 With glasses: Right eye: Left eye: - Eye diseases (if any): - Health classification: I	(Signed)
5. Ear – Nose – Throat - Result of examination: Left ear: Normal speaking: 5 m Whisper: 0.5 m Right ear: Normal speaking: 5 m Whisper: 0.5 m - Ear – nose – throat diseases (if any): - Health classification: I	(Signed)
6. Odonto – Stomatology: - Result of examination: + Upper jaw: Normal + Lower jaw: Normal - Oral and maxillofacial diseases (if any): Health classification: II	(Signed)
7. Dermatosis and venereal diseases: Normal Health classification: I	(Signed)

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III. PRECLINICAL EXAMINATION

Conte	ents of examination	Full name of doctor
1. Blood test:		
a) Blood formula: Erythroc	yte quantity:	A COLUMN TO A COLU
Leukocyt	e quantity:	
Thrombo	cyte quantity:	
b) Blood biochemistry: Bloo		
Úrea:	Creatinine:	
ASAT (GOT):	ALAT (GPT):	
c) Others (if any):		
2. Urine test:		
a) Glucose:		
b) Protein:		
c) Others (if any):		

III. CONCLUSION:

- 1. Health classification:
- 2. Other diseases (if any):

He is healthy enough to work.

Cau Ke, April 20, 2020 CONCLUDED BY (Signed and sealed) DR.CKI. Dang Van Tam

treatment.



⁴ Health classification is complied with the Decision No.1618/BYT-QD or health classification in accordance with the regulations of the specialized heath standards for specific medical examiniation, ⁵ Clearly state diseases, treatment methods, rehabilitation or referral for specialty examination for medical examination and

I, Bui Son Lam, (ID.No.: 250637582 do undertake that I correctly and exactly translated this document from Vietnamese into English

Date 23/04/2020

Tôi **Bùi Sơn Lâm**, CMND số: 250637582 cam đoan đã dịch chính xác nội dung của giấy tờ / văn bản này từ tiếng Việt sang tiếng Anh.

Ngày 23 tháng 04 năm 2020

Translator Người dịch

Bùi Sơn Lâm

lum

April 23nd 2020 (In words: the twenty-third day of April in two thousand twenty)

At People's Committee of District 4

I am Ja. M. M. M. Vice Head of Justice Department of District 4.

Hereby certify Mr. Bui Son Lam, personally present to me, subscribes his signature on this translation.

Certification No.

Book No. 04/SCT/CKND Date 23/04/ 2020

Vice Head of Justice Department of District 4

Ngày 23 tháng 04 năm 2020

(Bằng chữ: Ngày hai mươi ba tháng bốn năm hai ngàn không trăm hại mượi)

Tại Ủy ban nhân dân Quận 4 rang Tôi

Tôi...... là Phó Trưởng Phòng

Tư pháp Quận 4, Thành phố Hồ Chí Minh

Chứng thực Ông Bùi Sơn Lâm là người đã ký vào bản

dịch này.

Số chứng thực: 9744 Quyển số: 04/2020-SCT/CKND Phó Trưởng phòng Tư pháp Quận 4

14. IP HO CHILL

Lê Chị Mhư Crang