Work Pass Division 18 Havelock Road Singapore 059764 www.mom.gov.sg



Winnie Medical Centre Blv 81 Macpherson Lane #01 25 Singapore 360081

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Part Personal Particulars of Foreign Work PID :P171541 Name: Reg. Date :06-Jul-18 08:45AM HP :	completes this form. The foreign worker's Tra	IC :MD262587 DOB Sex :Female	:08-Jun-1982 t be endorsed by the cation.	t be endorsed by the doctor who cation.						
Name: Reg. Date: :06-Jul-18 08:45AM HP: maile Height: (**T movel) Name: Nedical History (**To be declared and signad by the foreign worker)	Part I Personal Particulars of Foreign Work									
Mental liness	i	PID :P171041	o o o 45AM HP ·	(好 cm)						
Mental liness	Name:	Reg. Date :06-Jul-18	Maint:	51 kg						
Mental illness	Occupation:	-	Outenoing.							
Tuberculosis	Part II Medical History (To be declared and signed by the foreign worker)									
Idectare that all the information given above is true and correct. I hereby give my consent for a copy of this medical form after it is completed by the doctor to be released to the Ministry of Manpower, my employer, and also to the employment agent who assisted in my work permit application. Signature of Foreign Worker	1 Mental illness	ve brief details	6 Tuberculosis	etaiis						
Signature of Foreign Worker Part III Please tick if any of the Examinations / Tests is Abnormal and give brief details separately. Clinical Examinations Abnormal Cardiovascular System Blood Pressure Systolic: Disabolic: Disab	I declare that all the information given above is true and correct. I hereby give my consent for a copy of this medical form after it is completed by the doctor to									
Part III Please tick if any of the Examinations / Tests is Abnormal and give brief details separately.	$\sim San$		06 JI	U 2018						
Clinical Examinations	Signature of Foreign Worker		Date							
Clinical Examinations			Julius kulus Judalla aanavatalu							
Cardiovascular System 1 Chest X-ray – to be taken in Singapore ("For any abnormalities and other findings including no active lung lesion, please state here and attach the chest radiological report to this form.)	Part III Please tick if any of the Examinations /	Tests is Abnormal and	d give brief details separately.							
a Blood Pressure Systolic: Disatolic: b Heart Disease (e.g. persons with cardic mumurs or symptoms suggestive of Myocardial ischaemia) d Severe varicose velhs: 2 Anaemia (if clinically anaemic, do HB: 3 Respiratory System 4 Abdomen 5 Enlarged Liver 6 Enlarged Spleen 6 Genito-Urinary System 5 Skin-Chronic Disease (e.g. piersosy, widespread eczema, psoriasis, etc) 6 Locomotri/Neurological 7 Skin-Chronic Disease (e.g. piersosy, widespread eczema, psoriasis, etc) 6 Locomotri/Neurological 7 Skin-Gronic Disease (e.g. piersosy, widespread eczema, psoriasis, etc) 6 Locomotri/Neurological 7 Skin-Gronic Disease (e.g. piersosy, widespread eczema, psoriasis, etc) 8 Locomotri/Neurological 9 Significant imb amputation or deformity 9 Chert significant abnormalities (in relation to the Work required to be performed) 9 Chert significant abnormalities (in relation to the Work required to be performed) 9 Chert significant abnormalities (in relation to the Work required to be performed) 1 Certify that I have examined the above-named foreign worker for the clinical examinations / tests in Pert III and found that this person is "Fit I Unit for employment in the above-stated occupation. Name of Doctor: 1 Clinic Address: 2 Delete where inapplicable 1 Tel: 6842 7842 Fax: 6743 0954 1 Delete where inapplicable 1 Tel: 6842 7842 Fax: 6743 0954	Clinical Examinations	Abnormal								
Systolic: Diastolic: D			Chest X-ray – to be taken in Singapore (*For any abnormalities and other findings including no active							
Disastolic:	Custolis		lung lesion, please state here and attach the chest	1 1						
ECG (compulsory for måle Thai workers & others above age 50, and in younger applicants where it is indicated, e.g. persons with cardic murmurs or symptoms suggestive of Myocardial ischaemia) 2. Anaemia (if clinically anaemic, do HB: 9%)	Diastolic:		radiological report to this form.)	1 1						
above age 50, and in younger applicants where it is indicated, e.g. persons with cardic murmus or symptoms suggestive of Myocardial ischaemia) d Severe varicose velns 2 Anaemia (if clinically anaemic, do HB: 9%)		ers H								
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Skirt-Chritic Disease (e.g., leptosy, widespies) Skirt-Chritic Disease (e.g., leptosy, widespies)	d Genito-Unnary System		•							
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