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ZAK INTERNAL MEDICINE SPECIALITY CLINIC

+251900454700/+251911213854



Name: TIGIST SHENKUTE HASTEGEBREL
Nationality: Ethiopian
DOB: 18 Jan 88
Passport Issue Date: 23/12/2024
Marital Status: ☐ Married ☒ Single ☐ Divorced ☐ Widowed
Application: ☐ New ☐ Renew

Serial No. PB-231224089

Age: 36
Passport No. EP9336621
Sex: Female
Job Title: House Maid

SECTION 2: VITAL DATA

Blood Pressure: 110/77 mmHg Height: 150 cm ECG: ☒ normal ☐ abnormal
Pulse: 72 bpm Irregular: ☐ Yes ☒ No Weight: 50 kg Vision: RT: 6/6 LT: 6/6
Ear: RT: Normal LT: Normal

SECTION 3: Clinical Examination/Lab Investigation

Clinical Examination

General appearance	NAD	Extremities	NAD
Respiratory System	NAD	Hernia	NAD
Cardio-vascular system	NAD	Varicose Veins	None
Skin	NAD		
CNS	NAD		
Psychiatry	Normal		

Chest X-RAY: NAD

Result: ☒ Fit ☐ Unfit

LABORATORY INVESTIGATION

CBC	Normal	HbA1c	Negative
Malaria	Negative	HCV	Negative
FBS	Normal	HIV 1 & 2	Negative
Blood Group	B +ve	VDRL	Non-Reactive
Stool	Normal	LFT	Normal
Urine	Normal	RFT	Normal
Preg-test	Negative		

Hospital Stamp



DECLARATION

I bear by permit ZAK Internal Medicine Speciality Center and the undersigned physician to furnish such information the company may need pertaining to my health status and other pertinent and medical findings and do hereby release them from any and all legal responsibility by doing so I also certify that my medical history contained above is true and any false statement will disqualify me from my employment benefits and claims.

I Do ☐ Decline that all information given is true.

Signature:  Date: 23/12/2024

