The physical examinations must cover all of the items listed in the **Foreigner Physical Examination Form**. Incomplete forms or forms without the signature of the attending physician, or the official stamp of the hospital, or a sealed photograph of the applicant, or date of the examination are considered as invalid. Please carefully plan your **physical examination schedule** as the result is valid for only 6 months.

外 国 人 体 格 检 查 表

FOREIGNER PHYSICAL EXAMINATION FORM

姓名 Name		性别 Sex	☐ 男 Male ☐ 女 Female	出生日期 Birthday		照片 (加盖检查单位印章) Photo (Stamped Official Stamp)
现在通讯地址 Present mailing address						
国籍或地区 Nationality (or Area)		出生地 Birth place		血型 Blood type		

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”)

班疹 伤寒	Typhus fever	☐No ☐Yes	菌 痢	Bacillary dysentery	☐No ☐Yes
小儿麻痹症	Poliomyelitis	☐No ☐Yes	布氏杆菌病	Brucellosis	☐No ☐Yes
白 喉	Diphtheria	☐No ☐Yes	病毒性肝炎	Viral hepatitis	☐No ☐Yes
猩 红 热	Scarlet fever	☐No ☐Yes	产褥期链球	Puerperal streptococcus infection	
回 归 热	Relapsing fever	☐No ☐Yes	菌 感 染		☐No ☐Yes

伤寒和付伤寒 Typhoid and paratyphoid fever ☐No ☐Yes

流行性脑脊髓膜炎 Epidemic cerebrospinal meningitis ☐No ☐Yes

是否患有下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……☐No ☐Yes

精神错乱 Mental confusion……☐No ☐Yes

精神病 Psychosis：躁狂型 Manic paychosis……☐No ☐Yes

妄想型 Paranoid psychosis……☐No ☐Yes

幻觉型 Hallucinatory……☐No ☐Yes

身高 厘米 Height CM	体重 公斤 Weight Kg	血压 毫米汞柱 Blood pressure mmHg
发育情况 Development	营养情况 Nourishment	颈部 Neck
视力 左 L_____ Vision 右 R_____	矫正视力 左 L_____ Corrected vision 右 R_____	眼 Eyes
辨色力 Colour sense	皮肤 Skin	淋巴结 Lymph nodes
耳 Ears	鼻 Nose	扁桃体 Tonsils
心 Heart	肺 Lungs	腹部 Abdomen

脊柱 Spine		四肢 Extremities		神经系统 Nervous system	

其他所见 Other abnormal findings	

胸部 X 线 检查结果 (附检查报告单) Chest X-ray exam (attached chest X-ray report)		心电图 ECC	

化验室检查 (包括艾滋病、 梅毒等血清学检查) Laboratory exam (attached test report of AIDS, Syphilis etc)	

未发现患有下列检疫传染病和危害公共健康的疾病:

None of the following diseases of disorders found during the present examination.

霍乱	Cholera	性病	Venereal Disease
黄热病	Yellow fever	肺结核	Lung tuberculosis
鼠疫	Plague	艾滋病	AIDS
麻风	Leprosy	精神病	Psychosis

意　　见
Suggestion

检查单位盖章
Official Stamp

医师签字
Signature of physician

日期
Date