

# MUCOHESMA – Admission medical examination Report.

Admission of student to certificate/Diploma Courses at Muyoge college of Health Sciences and management is conditional upon receipt of a satisfactory Medical report from a medical practitioner. The medical officer is requested to fill in a detailed diagnostic medical report of the candidate as required in the form. The form should be submitted at the time of reporting.

## A. Candidate's Particulars:

- I. SURNAME: .....
- II. FIRST NAME :.....MIDDLE NAME.....
- III. Age..... Years
- IV. Height .....cm
- V. Weight: ..... kgs

## B. General examination

Has the candidate ever suffered/ or is s/she suffering from any of the following medical conditions (delete which whichever is inapplicable)

- Tuberculosis.....Yes /No
- Epilepsy.....Yes/No
- Anemia.....Yes/No
- leprosy.....Yes/No
- peptic ulcers.....Yes/No
- bronchial asthma.....Yes/No
- Hypertension .....Yes/No
- Dysmenorrheal .....Yes/No
- Diabetes mellitus.....Yes/No
- Psychosis.....Yes/No
- sickle cells anemia.....Yes/No

Under this subsection does the candidate have any serious medical condition which will prevent him/her from gainful participation in learning activities or undertaking assessment activities for determining whether she/ he has attained or not, the leaning objectives specified for the training or which is contagious and therefore a danger to other people at the college! (Yes/No).

If yes, please explain.

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### A. Skin examination

Condition of the skin: any disease or abnormality (Yes/No), if yes, please explain

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/her from gainful participation in leaning activities or undertaking assessment activities for determining whether he/she has attained or not, the leaning objectives specified for the training or which is contagious and therefore a danger to other people at the college! (Yes/No), If Yes, Please explain

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### B. Head examination

Condition of ears: any disease or abnormality (Yes/No), if yes, please explains.

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Condition of mouth and throat: any disease or abnormality (Yes/No), if yes, please explain

Condition of the nose: any disease or abnormality (Yes/No), if yes, please explain

Condition of lungs: any disease or abnormality (Yes/No), if yes, please specify

**C. Abdomen examination**

Has the candidate ever suffered, or is she/he suffering from any of the stated medical conditions or are any of the state organs affected by a disease or are abnormal in any way!

- i Hernia: (Yes/No)
- ii Hydrocele: (Yes/No)
- iii Masses: (Yes/No)
- iv Liver: (Yes/No),  
If yes, please explain)

Spleen :( Yes/No), if yes please explain

Kidney :( Yes/No), if yes please explain

Rectum :( Yes /No) If yes please explain

Hyperacidity or gastric – duodenal ulcer :( Yes/No), if yes please explain

Under this sub-section, does the candidate have any serious medical condition which will prevent him/her from gainful participation in leaning activities or undertaking assessment activities for determining whether he/she has attained or not the leaning objectives specified for the training or which is contagious and therefore a danger to other people at the college! (Yes/No), If Yes, Please explain

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**D. Laboratory Examination**

Please give results for the following laboratory examination

**1. Urine:**

- I. Albumen.....
- II. Sugar.....
- III. Leukocytes.....
- IV. Bilharziasis.....
- V. Stool (emphasis Hookworms).....

**2. Blood examination:**

- i Haemoglobin.....
- ii Differentialcount: totalWBC.....
- iii Neutrophils.....
- iv Eosinophils.....
- v Basophils.....
- vi Monocytes.....
- vii ESR.....

Under this sub-section, does the candidate have any serious medical condition which will prevent him/her from gainful participation in leaning activities or undertaking assessment activities for determining whether he/she has attained or not the leaning objectives specified for the training or which is contagious and therefore a danger to other people at the college! (Yes/No), If Yes, please explain

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**E. Disability examination**

Does the candidate have any physical or mental disability (Yes /No) If yes please explain

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/her from gainful participation in leaning activities or undertaking assessment activities for determining whether s/she has attained or not the leaning objectives specified for the training or which is contagious and therefore a danger to other people at the college! (Yes/No) If yes please explain

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**F. Chronic disease**

Does the candidate have any chronic disease or ailment? (Yes /No) If yes please explain

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Under this sub-section, does the candidate have any serious medical condition which will prevent him/her from gainful participation in leaning activities or undertaking assessment activities for determining whether he/she has attained or not the leaning objectives specified for the training or which is contagious and therefore a danger to other people at the college! (Yes/No), If Yes, Please explain

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**G. CONCLUSION**

I confirm that I have examination Mr. / Mrs. /Miss

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From my findings, and basing on my professional expertise, I declare the (delete whichever is inappropriate) :

- i. He/she is medically fit so he/she should be admitted for studies at Muyoge college of heath and management
- ii. He/she is medically unfits he/ she should not be admitted at Muyoge college of heath and management. he/she has a recurring ailment of

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iii. Which is not contagious and does not prevent him/her from gainful participation in studies but will require him/her to be treated frequently while she/he is continuing with studies, so she/ he can be admitted to studies at Muyoge college of health and management.

Name :..... Title :.....

Qualifications:..... Date:.....

Official stamp & Signature

**NOTE:**

This report is binding and the college will not accept any claim of chronic medical problem, which is not indicated in this form. (also the form can be filled on reporting time by doctors at the college)