

Kingston Medical (Created by: 11076) - Visit Label

NAME : VAN CER SIN
NRIC/PP No : MG625410
NATIONALITY : Myanmar
D.O.B : 19/02/1994 SEX : Female
(UNITED CHANNEL)
COV2S, WOP5



on Form For Foreign Workers

ore registered doctor. Any amendments must be endorsed by the doctor who
ent must be produced to the doctor for identification.

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com

Part

Nar. _____ Passport No. _____ Sex: *Male / Female Height: 146 cm
Occupation: FDW Date of Birth: _____ Citizenship: _____ Weight: 69 kg

Part II Medical History (To be declared and signed by the foreign worker)

	Yes	No	If yes, give brief details		Yes	No	If yes, give brief details
1 Mental illness	☐	☒		6 Tuberculosis	☐	☒	
2 Epilepsy	☐	☒		7 Heart Disease	☐	☒	
3 Chronic Asthma	☐	☒		8 Malaria	☐	☒	
4 Diabetes Mellitus	☐	☒		9 Operations	☐	☒	
5 Hypertension	☐	☒					

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 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

Date

16 NOV 2022

Part III Please tick if any of the Examinations / Tests is Abnormal and give brief details separately.

Clinical Examinations	Abnormal	Other Tests	Abnormal
1 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.)	☐
a Blood Pressure	☐	Not Pregnant LMP: <u>11/11/22</u>	
Systolic: <u>120/8</u>			
Diastolic:	☐		
b Heart Disease	☐	2 Urine	☐
c ECG (compulsory for male Thai workers & others above age 50, and in younger applicants where it is indicated, e.g. persons with cardiac murmurs or symptoms suggestive of Myocardial ischaemia)	☐	a Albumin	☐
d Severe varicose veins	☐	b Sugar	☐
2 Anaemia (if clinically anaemic, do HB: _____ g%)	☐	c Pregnancy	☐
3 Respiratory System	☐	3 VDRL	☐
4 Abdomen	☐	4 Hearing – unable to hear ordinary conversation at 2m	☐
a Hernia	☐	5 Vision (should be at least 6/12 in both eyes with or without glasses.)	☐
b Enlarged Liver	☐	a Vision Acuity	☐
c Enlarged Spleen	☐	i) Right eye <u>> 6/6</u>	☐
d Genito-Urinary System	☐	ii) Left eye	☐
5 Skin-Chronic Disease (e.g. leprosy, widespread eczema, psoriasis, etc)	☐	b Colour Vision (for electricians & drivers only)	☐
6 Locomotor/Neurological	☐	c Any organic eye disease, e.g. Trachoma	☐
a Significant limb amputation or deformity	☐	6 Blood film for Malaria	☐
b Limb movement and co-ordination	☐	7 HIV (AIDS)	☐
c Significant spinal deformity	☐	Note:	
d Other significant abnormalities (in relation to the Work required to be performed)	☐	HIV (AIDS) Test and blood film for Malaria must be done at laboratories approved by the Ministry of Health.	
7 Endocrine disorders, e.g. thyrotoxicosis	☐		
8 Mental state	☐		

Part IV Certification from the Doctor

I certify that I have examined the above-named foreign worker for the clinical examinations / tests in Part III and found that this person is Fit / Unfit for employment in the above-stated occupation.

Name of Doctor: DR FOH WEE MIN
(in BLOCK Letter) MCR: 06332J MBBS

Signature of Doctor: _____

Clinic Address: KINGSTON MEDICAL GROUP PTE LTD
250 SIMS AVENUE #01-01, SINGAPORE 387513

Date: _____

Telephone Number: _____

16 NOV 2022
+65 88643907

*Delete where inapplicable

Doctors to Note:

Please send the completed medical form back to the employer / employment agent promptly, so that they can get the work pass issued.

The information is updated on 27 Mar 2018



KINGSTON MEDICAL GROUP

Kingston Medical Imaging

250 Sims Ave SPCS Building #01-01 Singapore 387513

RADIOLOGY REPORT

Name	: VAN CER SIN	Study Date	: 2022-11-16
NRIC No	: MG625410	Accession No.	: KMA22017507
Age/Sex	: F/28Y8M	Referral Doctor	:

CHEST PA

CHEST X-RAY

No active lung lesions.
The heart size is normal

DR MARK TAN
2022-11-16 12:26:47

*This is a computer generated report. No signature is required
Please seek medical advice if result is abnormal*

VAN CER SIN [Female / 28 years]

KINGSTON MEDICAL CLINIC PTE LTD (SIMS AVE)
 250 SIMS AVE
 #01-01 SPCS BUILDING
 SINGAPORE 387513
 DR POH WEE MIN

Area : GEY

NRIC/FIN/PP : MG625410
MRN/Ref No : KMGP22019594
Lab ID : 22AN4381
Date Received : 16-Nov-2022 18:39
Report # : 1337324
Date Reported : 16-Nov-2022 19:49

Test Ordered : COV2S

TEST	RESULT	REF. RANGE
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COVID-19 TESTING (SEROLOGY)

Anti-SARS-CoV-2 S	新型冠状病毒抗体 S	Reactive
Anti-SARS-CoV-2 S Quant	新型冠状病毒抗体 S (定量)	>250.00 U/mL

Comment: Positive for anti-SARS-CoV-2-S.

Correlation with epidemiologic risk factors and other clinical findings is recommended.

Test was performed using the Roche Elecsys Anti-SARS-CoV-2 S assay.

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 DR POH WEE MIN
 Area : GEY

NRIC/FIN/PP : MG625410
MRN/Ref No : KMGP22019594
Lab ID : **22AN4379**
Date Received : 16-Nov-2022 18:39
Report # : 1337305
Date Reported : 16-Nov-2022 19:46

Test Ordered : WOP5

TEST	RESULT	REF. RANGE
<u>WORK PERMIT SCREEN</u>		
Malarial parasites	疟原虫	Negative (Negative)
HIV Ag/Ab	爱滋病抗原/抗体	Non-reactive (Non-reactive)
VD (Syphilis TP Ab)	梅毒检验	Non-reactive (Non-reactive)