外国人体格检查表

FOREIGNER PHYSICAL EXAMINATION FORM

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 姓名  Name |  | 性别  Sex | 男  女 | 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 ”）  斑疹 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 回归热Relapsing fever □No □ Yes  产褥期链球菌感染Puerperal streptococcus infections □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 or 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……………………………………………□No □ Yes  躁狂型Manic psychosis…………………………………. □No □ Yes  妄想型Paranoid psychosis………………………………□No □ Yes  幻觉型Hallucinatory………………………………………□No □ Yes | | | | | | |
| 身高  Height | | | 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  Color 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 | |
| 其它所见  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  ECG |  | | |
| 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 检查单位盖章  Suggestion Official Stamp  医生签字 日期  Signature of physician Date | | | | | | |