

Medical Report Template

Fitness Certificate

This **medical report template** is designed to streamline the process of issuing fitness certificates. It ensures all essential health information is clearly documented for accurate evaluation. Ideal for healthcare professionals to certify an individual's physical fitness efficiently.

1. Personal Details

Full Name:	_____
Gender:	_____
Date of Birth:	_____
Address:	_____

2. Medical History

Known Allergies:	_____
Current Medication:	_____
Past Medical/Surgical History:	_____

3. Clinical Examination

Height:	_____ cm	Weight:	_____ kg
Blood Pressure:	_____ mmHg	Pulse:	_____ bpm
Vision (L/R):	_____ / _____	Hearing:	Normal / Impaired
Other Findings:	_____		

4. Diagnosis and Fitness Evaluation

General Health Condition:	_____
Fitness for:	<input type="checkbox"/> Employment <input type="checkbox"/> Education <input type="checkbox"/> Sports <input type="checkbox"/> Other: _____
Remarks:	_____

Doctor's Name & Signature:	Date: ____ / ____ / ____	Stamp/Registration No.:
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