

Form IV
[See rule 3]

The All India Services (Performance Appraisal Report) Rules, 2007

PROFORMA FOR HEALTH CHECK UP

Date :

Name

Age

Sex : M/F

A. Investigations Reports

1.	Haemogram (i) Haemoglobin (ii) TLC (iii) DLC (a) Polymorphs (b) Lymphocytes (c) Eosinophils (d) Basophils (e) Monocytes (iv) Peripheral Smear
2.	Urine Examination (i) Colour (ii) Albumin (iii) Sugar (iv) Microscopic Exam.
3.	Blood Sugar (i) Fasting (ii) Post-Prandial
4.	Lipid Profile (i) Total Cholesterol (ii) HDL Cholesterol (iii) LDL Cholesterol (iv) VLDL Cholesterol (v) Triglycerides
5.	Liver Function Tests (i) S. Bilirubin (Total) (ii) S. Bilirubin (Direct) (iii) S.G.O.T. (iv) S.G.P.T.
6.	Kidney Function Tests (i) Blood Urea (ii) S. Creatinine (iii) S. Uric Acid

7.	<p>Cardiac Profile</p> <p>(i) S.LDH (ii) CK-MB (iii) S.CRP (iv) SGOT</p> <p>For Men</p> <p>(v) PSA</p> <p>For Women</p> <p>(vi) PAP SMEAR</p>
8.	X-Ray-Chest PA View Report
9.	ECG Report
10.	USG Abdomen Report
11.	TMT Report
12.	Mammography Report (Women)
13.	<p>Gynaecological Health Check Up</p> <p>(i) Pelvic Examination (a) Local Examination (b) Per Vaginum (P/V) (c) Per Speculum</p> <p>(ii) Surgical Examination (iii) Breast Examination</p>
14.	<p>(i) Urological Examination (For Men Only) (ii) Rectal Examination (For Men Only)</p>
15.	<p>Systemic Examination</p> <p>(i) Resp System (ii) CVS (iii) Abdomen (iv) CNS (v) Locomotor System (vi) Dental Examination</p>
16.	<p>Eye Examination</p> <p>(i) Distant Vision (ii) Vision with Glasses (iii) Color Vision (iv) Tonometry (v) Fundus Examination</p>
17.	<p>ENT</p> <p>(i) Oral Cavity (ii) Nose (iii) Throat (iv) Larynx</p>

B. Medical Report of the Officer

1.	Haemoglobin level of the officer	Normal/Low
2.	Blood Sugar Level	Satisfactory/Normal/High/Low
3.	Cholesterol level of the officer	Normal/High/Low
4.	Liver functioning	Satisfactory/normal/dysfunctioning
5.	Kidney Status	Normal/Both-one kidney not functional optimally
6.	Cardiac Status	Normal/enlarged/blocked/not normal

C : Summary of Medical Report (only copy of this part is to be attached to PAR)

1.	Overall Health of the Officer	
2.	Any other remarks based on the health medical check up of the officer	
3.	Health profile grading	

Date:**Signature of Medical Authority
Designation**