Medical Certificate

Part 1 For the patient who requests for the medical fitness certificate

I, Mr./Mrs./Miss.....
Address.....
.....

National identification number ☐-☐☐☐☐-☐☐☐☐☐-☐☐-☐

Would like to request for the medical fitness certificate. Below is my health history.

1. Chronic health condition/disease ☐ No ☐ Yes (please specify).....

2. Accident and operation ☐ No ☐ Yes (please specify).....

3. Hospital admission ☐ No ☐ Yes (please specify).....

4. Other important history.....

Signature ..... date .....month.....year.....
If the patient is a child who cannot certify his/own health history, the guardian may sign on this document on behalf of the child.

Part 2 For the physician

Place of examination. Dental hospital, Faculty of Dentistry, Mahidol University. Date.....month..... year….....

(1) I, Dr. ....., medical license No.....
Location of medical practice. Dental hospital, Faculty of Dentistry, Mahidol University.
Examined Mr./Mrs./Miss .....
on date .....month.....year..... Details are as follows:
Weight ..... kg, height ..... cm, blood pressure ..... mmHg, pulse .....beats per minute

general health condition ☐ normal ☐ abnormal (please specify).....

I certify that the person is fit to work and free from disability with no symptom of psychosis, delusion, mental retardation, drug addiction, and alcohol use disorder. Also, there is no sign and symptom of the following diseases:

(1) leprosy at the infective stage or the stage with apparent symptoms that may be disgusted by society;
(2) tuberculosis at the dangerous period;
(3) elephantiasis at the stage with apparent symptoms that may be disgusted by society and
(4) Other (if any).....

(2) Physician's opinion and recommendation.....
.....
.....

Signature .....Physician

Note: *(1) must be the physician who owns the medical license;*
(2) describe the patient's fitness. This certificate will be valid for one month since the date of examination;
(3) this certificate is the result of initial examination.
This form is approved by resolution of The Medical Council of Thailand meeting No. 4/2018 on 19 April 2018.