NAIROBI COUNTY

KAHAWA WEST HEALTH CENTRE
MEDICAL CERTIFICATE

NAME: PETER MBUTHIA Date 11/04/2023

AGE 26 YEARS SEX MALE

1. General Condition VERY GOOD

PHYSICAL EXAMINATION

1. RESPIRARTORY SYSTEM NORMAL RR - 23 BR/M
2. CARDIOVASCULAR SYSTEM NORMAL, BP - 124/82 mmHg
3. GASTROINTESTINAL SYSTEM NORMAL
4. CENTRAL NERVOUS SYSTEM NORMAL
5. VISION (EYE) NORMAL (R) VA @ 6/6 (L) VA @ 6/6
6. HEARING (EAR) NORMAL (R) NORMAL (L) NORMAL

LABORATORY TEST

1. STOOL O/C NO ABNORMALITY DETECTED
2. URINE NO ABNORMALITY DETECTED

HISTORY OF ILLNESS

1. TB NO
2. ASTHMA NO
3. HYPERTENSION NO
4. EPILEPSY NO
5. DIABETES NO

DOCTORS COMMENT THE CLIENT IS PHYSICALLY AND MEDICALLY FIT

I CERTIFY THAT THE ABOVE MENTIONED PERSON HAS BEEN EXAMINED AND HE/~~SHE~~ IS MEDICALLY FIT/~~UNFIT~~

DOCTOR'S NAME DR LANGAT KIBET SIGNATURE

NAIROBI CITY COUNTY
11 APR 2023
P.O. Box 30108-00100, NAI...
KAHAWA WEST HEALTH CENTRE