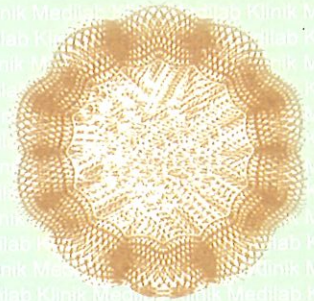




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Komplek Taman Niaga Sukajadi Blok J No. 3A-6 Jl. Ahmad Yani - Batam 29433  
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### HEALTH SCREENING REPORT

Periodic Health Examination

248

#### CONFIDENTIAL

No. Medical Record :   
00104/003/XI/ISP/21

#### PERSONAL DATA

Name : GRACE ELISABET SILALAH  
 Birthday/Gender/Emp. ID : 17 December 1995 / Male / ISP20222  
 Father's Name : MARDIN EFFENDI SILALAH  
 Address : BENGKONG TENGAH KAV MANDIRI BLOK Q NO 1, BATAM  
 Occupation : PURCHASING  
 Name of Employer / Recruitment Agency : INSPEKTINDO SINERGI PERSADA, PT  
 Address of Employer / Recruitment Agency : KAWASAN INDUSTRI SEKUPANG KAVLING.13, BATAM



GRACE ELISABE

#### MEDICAL HISTORY

	Yes	No		Yes	No		Yes	No
1. Hypertension	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Allergic Rhinitis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. Surgery	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Bronchial Asthma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5. Peptic Ulcer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Echolalia	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Bloody Cough	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. Epilepsy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	9. Others	<input type="checkbox"/>	<input checked="" type="checkbox"/>

#### CLINICAL EXAMINATION

Weight : 61 Kg      Height : 161 Cm  
 BMI : 23.53

	Yes/Abnormal	No/Normal
3. Cardiovascular System		
a. Blood Pressure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Systolic / Diastolic : 124 / 88 mm Hg		
Pulse : 77 / min		
b. Heart Disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Varicose Veins	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Respiratory System	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Skin-Chronic Disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Abdomen	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Locomotor/Neurological	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Endocrine disorders	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Mental State	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	Yes/Abnormal	No/Normal
1. Vision		
a. Distant Vision ( Should be at least 6/12 in both eyes with or without glasses )	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Near Vision ( Should be at least J2 in both eyes with or without glasses )	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Colour Vision	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Any Organic Eye Disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Hearing ( Unable to hear ordinary conversation at 2 m )	<input type="checkbox"/>	<input checked="" type="checkbox"/>

#### LABORATORY TEST

( Report Enclosed )

	Yes/Abnormal	No/Normal
1. Blood Count	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Urine Feme	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Other Laboratory Test	<input checked="" type="checkbox"/>	<input type="checkbox"/>

#### OTHER TEST

( Report Enclosed )

	Yes/Abnormal	No/Normal
1. Audiometry	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Spirometry	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. ECG ( if indicated )	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Chest X-Ray	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Remarks: Bilateral Varicose Grade 1 I83.9

#### CERTIFICATION

I certify that I have examined the abovenamed person. In my opinion, this person is FIT for duties mentioned above.

ADVICE :  
 Legs Exercise

Authentic Signature

Date of Exam : 11 November 2021



DR. REZGA AGNELA VALBETRI

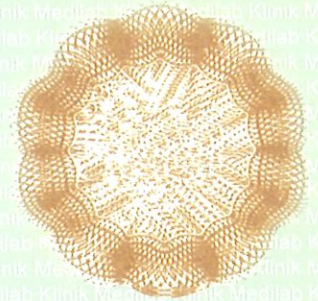


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**PUSAT PEMERIKSAAN KESEHATAN TENAGA KERJA**


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**HEALTH SCREENING REPORT**

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**CONFIDENTIAL**

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248

GRACE ELISABE

**LABORATORY REPORT**

**BLOOD COUNT**

Test Name	Result	Unit	Reference Range
HGB	13.6	gr/dl	M: 13.2 - 17.3 F: 11.7 - 15.5
WBC	6.9	10 <sup>3</sup> /mm <sup>3</sup>	M: 3.8 - 10.6 F: 3.6 - 11.0
RBC	4.67	10 <sup>6</sup> /mm <sup>3</sup>	M: 4.4 - 5.9 F: 3.8 - 5.2
ESR	1	mm/hr	M: 0 - 10 F: 0 - 20
HCT	42.2	%	M: 40 - 52 F: 35 - 47
PLT	221	10 <sup>3</sup> /mm <sup>3</sup>	150 - 440
Differential Count			
- LYM	28.3	%	25 - 40
- MON	6.9	%	2 - 8
- GRA	64.8	%	43 - 76
Indicator of Infection			
- Neutrofil Lymphocyte Ratio (NLR)	2.28	%	> 3.13 Cautious 6 - 9 Suspicious > 9 Perilous
- Absolute Lymphocyte Count (ALC)	1953	%	< 1500 Cautious < 1100 Suspicious < 500 Perilous

**URINE FEME**

Macroscopy	Result
- pH	5
- Specific Gravity	1.010
- Glucosaa	Negative
- Protein	Negative
- Ketones	Negative
- Bilirubin	Negative
- Urobilinogen	Normal
- Nitrit	Negative
- Blood	Negative
- Leucocytes	Negative

**X-RAY REPORT**

Chest PA:  
 Show no Abnormalitis.  
 There is no evidence of pulmonary tuberculosis or other pulmonary,pleural or mediastinal lesions.  
 The size,shape and position of the heart are within limits of normal variations.  
 Bony structures of the thorax show no abnormalities.

Date of Exam : 11 November 2021



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# **Pencegahan Varices**

## **Untuk Pekerja Berdiri**

- **Olah Raga dengan berjalan kaki secara teratur minimal 30 menit per hari**
- **Relaksasi kaki sesering mungkin :**
  - **Lipat kaki kanan dan kiri bergantian**
  - **Jinjit**
  - **Remaskan jari-jari kaki didalam sepatu**
  - **Topanglah berat badan dari satu kaki ke kaki lain setiap beberapa menit sekali**
- **Gunakan Kaos kaki/Stocking elastis**
- **Tinggikan Kaki dengan Bantal Sewaktu Berbaring / Tidur selama  $\pm$  20 menit**
- **Hindari Pemakaian Korset (pakaian dalam yang ketat)**
- **Hindari menyilangkan kaki saat duduk**
- **Menjaga berat badan agar ideal**
- **Hindari pemakaian sepatu hak tinggi**