

Impaired

Impaired

6. Anemia : No
 Yes

7. Breath Sound : Normal
 Impaired

8. Heart Sound : Normal
 Impaired

9. Cardiomegaly : No
 Yes

(4) Please describe the result of X-ray examination of the applicant's chest. The examination date and Film No. are exclusively needed. (X-ray taken more than 2months prior to this examination are NOT valid)

Lungs : Normal
 Impaired

Date :
(dd/ mm/ yyyy)

Age :

File No. :

Describe the condition of the applicant's lungs.

(5) In view of applicant's medical history and the above findings, do you think that his health status is adequate to meet the demands of studies in Sri Lanka ?
