

# CRIMINAL JUSTICE EDUCATION AND TRAINING STANDARDS COMMISSION



CRIMINAL JUSTICE STANDARDS DIVISION  
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## MEDICAL EXAMINATION REPORT

**THIS INFORMATION IS FOR OFFICIAL USE ONLY AND WILL NOT  
 BE RELEASED TO UNAUTHORIZED PERSONS.**

**Form F-2 (Adult Corrections)  
 (Revised 10/15)**

**INSTRUCTIONS:**

**To be completed by a licensed physician/physician assistant/ nurse practitioner or surgeon following actual physical examination. The original or a copy of this report must be retained in personnel file by the appointing agency.**

1. Name (Last, First, Middle)		2. Birth Date (Mo., Day., Yr.)	
3. Height (without shoes)	4. Weight (without shoes and coat)	5. Chest Girth (Expiration)	6. Abdomen Girth
7. Visual Acuity (If applicant wears glasses, test and record acuity both with and without glasses)			
a. Without glasses R20/ _____ L20/ _____ B20/ _____		b. With glasses R20/ _____ L20/ _____ B20/ _____	
c. Depth perception _____		d. Color perception _____	
c. Pupils: Equal _____		Reaction _____	
f. Eye Grounds: _____			
g. Form Fields of Vision (Temporal): Right eye _____ Left eye _____ Each eye on Zero Line _____			
(Record degrees of temporal fields obtained by instrumentation or confrontation in spaces above and on diagram below)			
h. Evidence of Suppression _____ Note any abnormality			
<b>8. HEARING</b> (Whispered conversation at 15 ft. considered normal)			
Right 15/ _____	HEARING AID USED <input type="checkbox"/> No <input type="checkbox"/> Yes	DRUM PERFORATION OR DRAINAGE <input type="checkbox"/> No <input type="checkbox"/> Yes	
Left 15/ _____			
Note any abnormality			
9. Head (note any defect, disease, or injury involving eyes, ears, nose, mouth, throat)		10. Dentistry Recommended <input type="checkbox"/> No <input type="checkbox"/> Yes	
11. Lungs	12. Date Chest X-ray Taken	13. Chest X-ray normal <input type="checkbox"/> No <input type="checkbox"/> Yes	
<b>14. CARDIO VASCULAR SYSTEM</b>			
A. Blood Pressure _____ B. Resting pulse rate _____			
C. Heart Sounds			
1. S1 _____ S2 _____ Click _____ Ejection sound _____			
2. Gallop sounds? S3 _____ S4 _____			
3. Murmur describe _____			
4. Circulation to extremities _____			
15. <b>NERVOUS SYSTEM</b> (describe any pathology of abnormal reflexes)			

