



Name of Applicant

Blood Tests v1.1

for use with -
Medical Certificate Revised v3.4
(September 2021)

Blood tests -

Additional form to the Medical Certificate Revised v3.4 (September 2021)

If in the last five years you have lived in, or visited, for a total of three months or more one of the countries listed below you will require blood tests as part of your medical certificate application (medical clearance for an immigration permit). This is a *mandatory* requirement.

Angola
Antigua and Barbuda
Bahamas
Barbados
Belize
Benin
Botswana
Burkina Faso
Burma
Burundi
Cameroon
Cape Verde
Central African Republic
Chad
Congo, Democratic Republic of the
Congo, Republic of the
Cote d'Ivoire
Djibouti
Dominica
Dominican Republic
El Salvador
Equatorial Guinea
Eritrea
Estonia
Ethiopia
Gabon
Gambia, The
Ghana
Guinea
Guinea-Bissau

Guyana
Haiti
Jamaica
Kenya
Lesotho
Liberia
Malawi
Mali
Mauritius
Moldova
Mozambique
Namibia
Nigeria
Panama
Papua New Guinea
Russia
Rwanda
Saint Lucia
Saint Vincent and the Grenadines
Sao Tome and Principe
Sierra Leone
South Africa
South Sudan
Suriname
Swaziland
Tanzania
Thailand
Togo
Trinidad and Tobago
Uganda
Ukraine
Uruguay
Venezuela
Zambia
Zimbabwe

Blood tests - for use with Medical Certificate Revised v3.4 (September 2021)

This section must be completed by the examining physician on receipt of laboratory blood test results. The examining physician must sign and attach all the test results.

Blood tests

Blood tests for all applicants 16 years of age and over who require them (see criteria above).

Date

Full name of Doctor/GP	Name and Address of Surgery	Telephone no/Email
<input type="text"/>	<input type="text"/>	<input type="text"/>

Serum Creatinine	<input type="checkbox"/> Normal	<input type="checkbox"/> Abnormal	<input type="text" value="Please give details."/>
Hepatitis B Surface Antigen (Hep B aAg)	<input type="checkbox"/> Negative	<input type="checkbox"/> Positive (*)	<input type="text" value="Please give details."/>
	<small>*request hepatitis B antigen, alphafetoprotein and liver function tests.</small>		
Hepatitis C Serology	<input type="checkbox"/> Negative	<input type="checkbox"/> Positive (*)	<input type="text" value="Please give details."/>
	<small>*request HCV RNA</small>		
HIV	<input type="checkbox"/> Negative	<input type="checkbox"/> Positive (*)	<input type="text" value="Please give details."/>
	<small>*request with Western Blot or local equivalent for confirming HIV</small>		
Treponemal Serology	<input type="checkbox"/> Normal	<input type="checkbox"/> Abnormal	<input type="text" value="Please give details."/>
Full Blood Count (FBC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text" value="Please give details."/>

Applicant name as shown in passport:

Family / Last Name	<input type="text"/>	Date of Birth	<input type="text"/>
Given / First Name	<input type="text"/>		

*** Please attach results of ALL laboratory tests.**

Summary of findings:

Based on the history, examination, the laboratory tests you must consider whether:

- There are any significant findings (If YES, please expand/explain. Use a separate sheet or paper if required).
- There are any abnormal findings.
- There are no significant or abnormal findings.

No significant or abnormal findings.

Abnormal findings (Not significant)

Significant findings (If YES, please expand/explain. Use a separate sheet or paper if required)