

**CORPORATION BANK**  
**Medical details of the Pensioner**  
 (To be filled by the examining Medical Officer)

Annexure VII

**(Part II)**

1.	Apparent Age	
2.	Height	
3.	Weight	
4.	Describe any scars or identifying Marks	
5.	Pulse rate	
5a	Sitting	
5b	Standing	
5c	What is the character of pulse	
6	Blood pressure	
6a	Systolic	
6b	Diastolic	
7	Is there any evidence of disease of the main organs	
7a	Heart	
7b	Lungs	
7c	Liver	
7d	Spleen	
7e	Kidney	
8	Investigations (wherever considered necessary by the Medical Officer)	
8a	Urine (state specific gravity)	
8b	Blood	
8c	X-ray Chest	
8d	E.C.G.	
9	Any Additional Finding	