

PROVINCIAL ADMINISTRATION: WESTERN CAPE
SOCIAL SERVICES BRANCH

MEDICAL CERTIFICATE (ACT 20 OF 1992)

This certificate should be completed only in the following instances:

- (a) Admission of treatment.
- (b) Discharge from the provisions of the Act on medical grounds.
- (c) Whenever the management of a treatment centre deems it necessary.

Full name		
Date of birth	Length	Weight

Medical history (operation and scars included)

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Vaccinated against

Mobility Moves freely Moves with difficulty Make use of medical aid

Present medical treatment

Medical Examination:

(1) Cardiovascular system

(2) Blood pressure

(3) Pulmonary system

(4) Liver and alimentary system

(5) Muscular-skeletal system

(6) Nervous system

(7) Teeth

(8) Skin

(9) Ear, nose and throat

(10) Urinary system

(11) Eyes

(12) Contagious diseases

Is immediate isolation essential? YES NO

(13) Mental condition

Is action in terms of the Mental Health Act necessary? YES NO

If not, is psychiatric treatment required? YES NO

(14) Is the person fit to carry out light physical work? YES NO

(15) General remarks: