



NAME: Mann, Michael Anthony MEASUREMENTS AND OTHER FINDINGS SSN: \_\_\_\_\_

51. HEIGHT: 64 3/4 52. WEIGHT: 134 53. COLOR HAIR: Brown 54. COLOR EYES: Brown 55. BUILD:  SLENDER  MEDIUM  HEAVY  OBESE 56. TEMPERATURE: \_\_\_\_\_ HIV AB CODE: \_\_\_\_\_

57. BLOOD PRESSURE (Arm at heart level) 58. PULSE (Arm at heart level)

A SITTING	SYS. DIAS.	B. RECUMBENT	SYS. DIAS.	C STANDING (3 min.)	SYS. DIAS.	A SITTING	B. AFTER EXERCISE	C. 2 MIN. AFTER	D. RECUMBENT	E. AFTER STANDING 3 MIN.
	<u>138</u>	<u>78</u>				<u>80</u>				

59. DISTANT VISION: by lens 60. REFRACTION: By Lens

RIGHT 20/ <u>200</u>	CORR. TO 20/ <u>20</u>	BY <u>-2.25</u> S <u>Sph</u>	CX	<u>20/25</u> <u>by lens</u>	CORR. TO <u>20</u>	BY
LEFT 20/ <u>200</u>	CORR. TO 20/ <u>20</u>	BY <u>-1.75</u> S <u>Sph</u>	CX			BY

62. HETEROPHORIA (Specify distance)

ES°	EX°	R.H.	L.H.	PRISM DIV.	PRISM CONV. CT	PC	PD

64. COLOR VISION (Test used and result) PIP pass 0 /14 65. DEPTH PERCEPTION (Test used and score) AFVT \_\_\_\_\_ UNCORRECTED \_\_\_\_\_ CORRECTED \_\_\_\_\_

68. FIELD OF VISION 67. NIGHT VISION (Test used and score) 68. RED LENS TEST 69. INTRAOCULAR TENSION

71. AUDIOMETER ANSI-69

		ANSI-69								WK	ST	DATE	INITIAL
		250	500	1000	2000	3000	4000	6000	8000				
RIGHT WV	/15 SV	/15											
LEFT WV	/15 SV	/15											

72. PSYCHOLOGICAL AND PSYCHOMOTOR FOR MEPS USE ONLY

PHYSICAL INSPECTION	HT	WT	RPR	HCG	QUAL	PHYSICIAN'S SIGNATURE
<u>106</u> DATE <u>169</u>	<u>65</u>	<u>139</u>				<u>R. Braithwaite</u>

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY ITEM 64: RED/GREEN (ARMY ONLY)

81 02 20

FOR MEPS USE ONLY

WK	ST	DATE	INITIALS
<u>3</u>	<u>P</u>	<u>1 Sep '95</u>	<u>MB</u>
<u>7</u>	<u>P</u>	<u>JUL 3 2 1996</u>	<u>MB</u>

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

Consular letterhead

74029289-1

THIS EXAMINATION HAS BEEN ADMINISTRATIVELY REVIEWED FOR COMPLETENESS AND ACCURACY 24 Aug 95

SIGNATURE: Russell Tipton GRADE: \_\_\_\_\_ DATE: \_\_\_\_\_

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. A. PHYSICAL PROFILE 1995

P	U	L	H	E	S
<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>

B. PHYSICAL CATEGORY

A	B	C	E
<u>1</u>			

77. EXAMINEE (Check) 1 A.  IS QUALIFIED FOR SERVICE AS IN ITEM 5 B.  IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER DNR

79. TYPED OR PRINTED NAME OF PHYSICIAN: ELMER C. RIGBY, JR., M.D. SIGNATURE: \_\_\_\_\_

80. TYPED OR PRINTED NAME OF PHYSICIAN: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

81. TYPED OR PRINTED NAME OF DENTIST OF PHYSICIAN (Indicate which): \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY: Priscilla S. Braithwaite M.A. SIGNATURE: R. Braithwaite NUMBER OF ATTACHED SHEETS: 1