

Preplacement medical detailed certificate

Name	[Faint text]
Date of Birth	[Faint text]
CS Health reference number	[Faint text]
Examination requested by	[Faint text]
Position	[Faint text]
Field of employment	[Faint text]
Examined by	[Faint text]

Opinion

- GREEN** Medically Fit and healthy in relation to the occupational demands of their usual role.
- AMBER** Has a stable medical condition that imposes a restriction on some aspect of their usual role.
- AMBER** Has a medical condition that requires ongoing medical monitoring.
- RED** Has a medical condition that will result in an unacceptable safety or health risk or a condition that prevents them from performing the occupational demands of their usual role.

Comments



Name : [redacted]

CS Health Reference No : [redacted]

Date of last chest x - ray :

Requires corrective lenses :

Yes No

Drug and Alcohol Test :

Attended Not requested

- Complies with AS / NZ 4308: 2008

Functional Capacity Evaluation :

- Functional Capacity Evaluation completed - see report for full details of performance
- Functional Capacity Evaluation completed with limitations - see report for full details of performance
- Functional Capacity Evaluation not completed - see report for full details of performance
- Not requested

-complies with the requirements of the NSW Coal Order 41

Signature Medical Officer

Name :	[redacted]
Date :	[redacted]

Should you wish to discuss any further aspects of this Medical Assessment, please do not hesitate to contact CS Health

Original issue date: 1 July 2014
Current issue date: 3 June 2015

Approved by: CS Health General Manager
Location: Coal Services intranet - CS Health / Procedures and Documents