

STANDARDS FOR MEDICAL FITNESS

Sl.	Organ/Sys.	Details/ Test/ Examination		Standards	Criteria for Disqualification
1.	GENERAL EXAMINATION	Height, Weight, BMI	Measurement	Minimum height requirement for drivers is 162 cms. Age up to 35 yrs- BMI max-30 kg/m ² Age above 35 yrs- BMI max-32 kg/m ²	Medical Authority should use his clinical discretion for abnormal height, weight & BMI for further clinical evaluation for medical fitness.
		Chest	Measurement	Minimum in full expiration 79 cm (relaxable by 5 cm) and minimum expansion 5 cm. The range of expansion upto 4 cm i.e. deviation of 20% will be acceptable. Not applicable to female candidate	Significant underweight/ overweight & height more than 200 cms needs further investigations before declaring FIT. BMI above the maximum limit will be a disqualification.
		Glands & others	Physical examination	Thyroid should be normal with no evidence of hypo or hyper thyroidism or Generalized enlargement of lymph glands. Scars, if any of the previous removal of tubercular glands should be normal and there must not have been any active disease in last five years	Any lymphadenopathy to be thoroughly investigated to rule out chronic granulomatous disease like tuberculosis, sarcoidosis and blood dyscrasias. Individuals with diabetes will be temporarily unfit for max. 21 days if their blood sugar level is not in normal limit. HbA1C should be at or less than 7.0. If after 21 days, it is still in abnormal range or HbA1C is above 7.0 then they will be Unfit.
		Blood	Sugar	Within normal limits	Diabetics with any target organ involvement e.g. nephropathy, retinopathy, neuropathy etc. will be declared Unfit.
2	EAR	Hearing standards will be tested in a quiet room. Doctor and candidate will stand at a distance of 20 ft. from each other. Both the ear will be examined separately. The ear not being tested will be marked by a masking apparatus or by rubbing a piece of paper against pinna by an attendant. The candidate will face at right angles the doctor with the ear under examination facing him. He will use the whispering voice.		Candidate should be free from any active disease of ear and should be able to reproduce the whisper.	Candidate who fails to hear whispering voice separately in both ears at a distance of 2 feet in a quiet room.
3	NOSE	General examination		Should be free from active disease of nose.	

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4	THROAT	State of tonsils	Throat, palate, gums, jaws, temporo-mandibular joint and dentitions within normal limits	Slight hypertrophy without evidence of repeated tonsillitis is not a cause of rejection. Enlarged tonsils cause temporary unfitness until treated with tonsillectomy.					
5	EYES	General Examination		Any morbid condition of eyes, eye-lids or contiguous structures of such a nature as would render him/ her unfit for service at the time of appointment or at a future date. Trachoma, unless complicated, shall not ordinarily be a cause for disqualification.					
		Visual Acuity for Both Eyes (with or without glasses / contact lenses/IOL/ Implantable Contact lenses)	Distant Vision test & Near Vision test	Age in Yrs.	Distant Vision		Near Vision		Any organic disease or a progressive refractive error which is likely to result in lowering of the visual acuity. For technical skilled jobs where binocular vision is essential, squint is considered as disqualification. For other services squint is not a disqualification if visual acuity is of prescribed standard.
					Better Eye	Worse Eye	Better Eye	Worse Eye	
			Below 35	6/9 6/6	6/9 6/12	Sn 0.6	Sn 0.6		
			35 & ab.	6/12 6/9	6/12 6/18	Sn 0.8	Sn 0.8		
		Fundus	Fundus examination	Fundus and media should be healthy and within normal limits.				Any progressive pathological condition, Vitreous or Chorioretinitis, Any retinal disease in Diabetes, Hypertension, Atherosclerosis, Corrected Myopia (including the cylinder) exceeding -6D and Hypermetropia +4D in each eye up to 35 years of age, Corrected Myopia (including cylinder) exceeding -6D and Hypermetropia +6D in each eye beyond 35 years of age	
Colour Vision	Ishihara's Isochromatic plates in good light	Normal Colour Vision. Candidates should identify individual colours separately and pass pink perception test.				Colour blindness is a disqualification for all technical positions/ jobs / other occupations where perception of colour is essential in view of nature of duties of the offered post or future posts likely to be occupied by the candidate excepting employment in HR, Finance, accounts, clerical, ministerial, canteen peons, attendants and any other category where defective colour vision is not likely to interfere with his work create risk for others.			
Night Vision	Dark room test	Normal night vision							
One eyed person			Prognosis or the functioning of eye is good and it's not likely to be endangered by the condition of the worse eye and the prescribed visual acuity standards are fulfilled.		For regular service one eyed person is unfit except for ministerial and allied jobs where binocular vision is not considered essential				

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	Eyes	Field of Vision	Field of vision by confrontation method/ Visual field screener/ perimeter.	Should have good binocular vision, fusion faculty and full field of vision in both the eyes.	Defects in visual field to be thoroughly evaluated by specialists before deciding on fitness.
6	RESPIRATORY SYSTEM	Physical examination , Chest X-ray PA view		All parameters within normal limit.	Pulmonary tuberculosis, Chronic obstructive pulmonary disease will be a disqualification.
7	CARDIO VASCULAR SYSTEM	General examination	Resting ECG	Normal ECG Other parameters of heart size, position, , rate, sounds , pulse within normal limits	Organic/ Valvular/ Congenital heart disease non corrected with definite clinical signs & symptoms will be a disqualification. Any cardiac abnormality is to be further evaluated by relevant tests and opinion of cardiologist to be taken for medical fitness.
		Blood pressure		Acceptable limit is 140/90 mm/Hg without any target organ damage.	Candidates diagnosed as hypertensive will be further investigated.
8	GENETO URINARY SYSTEM	Urine	Routine/ microscopic	Within normal limits	If any albumin, sugar or any other abnormality is detected, further tests shall be conducted before deciding on fitness. Non-orthostalic albuminuria cases will be Unfit. Signs of incontinence of urine or enuresis, at the time of pre-employment examination will declare candidate unfit for employment.
		Scrotum/ Testicles	Physical examination	Normal	Candidates with undescended testicles on one or both sides shall be temporarily unfit for max. 21 days. Fitness can only be granted if the candidate reports back with orchidectomy with negative biopsy report for malignancy. Candidate with hydrocele, piles, varicocele and hernia shall be declared temporarily unfit for a max. period of 21 days.
		Venereal Disease		No evidence of VD	Candidates who have suffered or are suffering from venereal disease will not be declared fit unless detailed examination or urethral smear and serological test prove negative.
		Kidney Function		Normal limits. Presence of kidney/ uteric stone can be considered after being surgically corrected.	Any disease of genito urinary system to be further investigated with Ultra-sound/ IVP and renal function test. Cases of Polycystic kidney to be rejected. Chronic renal disease to be a disqualification.

Sl.	Organ/Sys.	Details/ Test/ Examination	Standards	Criteria for Disqualification
9	SKIN	Physical examination	Treated/ cured Hansen's disease with no deformity is acceptable. Vitiligo cases are acceptable	Candidates suffering from active leprosy or chronic and inveterate skin conditions will be declared unfit.
10	NERVOUS SYSTEM	Speech/ Gait Nystagmus Motor System Sensory system Reflex Mental condition	There should be no evidence of paralysis, palsy, epilepsy or any signs of mental retardation or neurological disorder.	Any Abnormality to be evaluated thoroughly before appointment. Candidates suffering from Epilepsy will be unfit, however, Epileptic candidates under regular treatment may be accepted for non-technical jobs only (excluding driver & security). Candidates suffering from Paralysis / Stroke/ schizophrenia/ parkinsonism or any other major neurological disorder to be unfit.
11	REPRODUCTIVE SYSTEM (For females only)	Clinical examination	Normal physical state of development	Fibroid uterus, ovarian cyst should be removed before appointment, if symptomatic & clinically significant. Cases of pregnancy of 24 weeks or more at the time of medical examination will be temporarily unfit until completion of six weeks after miscarriage or 3 months after confinement. At the end of the period fresh examination reqd. Any lump in breast to be operated before making fit & malignancy to be excluded.
12	MUSCULO - SKELETAL SYSTEM	Clinical examination	-	Progressive musculoskeletal disorder will be disqualification. Non-progressive congenital abnormality should be evaluated by medical board.

- If candidate is found unfit merely on grounds of high myopia, the matter should be examined by ophthalmologist to assess whether it is pathological or not. If it is not pathological, then he/she may be declared fit subject to other visual requirements
- Any Malignancy : any carcinoma, multiple myeloma and blood dyscrasias will be disqualification
- Cancer with life expectancy highly reduced will be a disqualification
- Cirrhosis of liver is a disqualification.
- In case any critical disease is noticed then fitness will be decided by a 3 Member Govt. Medical Board / Specialist Medical Board duly constituted by Appointing authority or Regional Head.
- In case of presence of any disease not mentioned in the standards, the same is to be evaluated keeping in mind the objective of medical examination and the definition of medical fitness as defined under POWERGRID Guidelines for Pre-employment Medical Examination.

POWER GRID CORPORATION OF INDIA LIMITED

Saudamini, Plot No.2, Sector 29, Near IFFCO Chowk,
Gurgaon (Haryana) - 122001, INDIA

MEDICAL EXAMINATION REPORT
(For use and retention in HR Department)

Passport size Photograph
with signature of
candidate attested by
POWERGRID Official

PART - I

Post for which selected: _____ Ref. No. _____

Name: _____

Father/Husband's Name: _____

(in block letters)

Date of Birth : _____ Place of Birth: _____

Age: _____ Permanent Address _____

Candidate's statement and declaration
(To be completed before medical examination)

Sl	Question	Yes	No
1.	Have you ever had/ Do you suffer from any of the following		
	• Ear Disease		
	• Any disease of Eyes		
	• Night blindness		
	• Colour blindness		
	• Any disease of mouth cavity		
	• Lung disease- Asthma/ spitting of blood		
	• Tuberculosis		
	• Mental Illness/ Neurological disorder/ Epilepsy/Headaches		
	• Fainting attacks		
	• High Blood Pressure		
	• Stroke		
	• Heart disease		
	• Diabetes		
	• Liver Disease		
	• Kidney Disease		
	• Leprosy		
	• Cancer		
	• Any deformities in extremities		
	• Any abdominal disease		

Sl	Question	Yes	No
	<ul style="list-style-type: none"> Any piles, fissure, hydrocele 		
2	If answer to any of the above is YES, Please give details		
3	Any other disease of accident requiring confinement to bed and medical or surgical treatment? If YES, Please give details		
4	Are you on any prolonged medication		
5	Have you been examined and declared unfit for Government service by a medical officer/ medical board within the last three years? If YES, Please give details		
6	When you were last vaccinated? Which vaccination?	Date / Month & Year	

7. Furnish the particulars concerning your family:

Father's age if living and state of health	Father's age at death and cause of death	Mother's age if living and state of health	Mother's age at death and cause of death

No. of brothers living, their ages & state of health	No. of brothers dead, their ages at death and cause of death	No. of sisters living, their ages and state of health	No. of sisters dead, their ages at death, and cause of death

8. Marital Status : Single/ Married/ Widowed/ Widower/ Divorced
9. No. of Children : Male _____Female_____
10. Family Planning History : Vasectomy/ Tubectomy / Not Applicable
11. Please specify any significant information if not covered above.

I declare all the above answers to be true and correct, to the best of my knowledge and belief. If at any point of time it is found that I have suppressed or hidden any information or submitted any wrong information, my candidature will be liable for rejection and if appointed my services will be liable for termination along with forfeiting all claims of Provident Fund, Gratuity and other benefits.

Candidate's Signature

Signed in my presence:

Date:

Signature of Medical Officer

Date:

PART – II

(To be recorded by the Authorized Medical Officer)

- A. Identification marks** : 1
2
- B. Appearance**
1. Age : _____ Years
 2. Physique : Well built / thin built
 3. Temperament : Sober / Nervous / Irritable
 4. Marks of primary vaccination : Present/ Absent
 5. Deformities :
 6. Operation scars :
- C. General Physical Examination**
1. Height without shoes : Cms.
 2. Weight without shoes : Kgs.
 3. Chest in full expiration : Cms.
 4. Chest in full inspiration : Cms.
 5. Abdomen over naval-stripped : Cms.
 6. BMI :
 7. Lymph Nodes :
 8. Thyroid :
 9. Additional Findings :
- D. ENT & Dental Examination**
1. Teeth : Clean/ dirty/ missing/ dentures
 2. Gums : Healthy/ unhealthy
 3. Tongue : Clean/ coated
 4. Throat : Normal/ congested/ tonsils
 5. Nose :
 6. Hearing : **RE:** Normal/ Impaired **LE:** Normal/ Impaired
 7. Tympanic membrane : RE LE
 8. Ear discharge : Yes/ No Other abnormalities-----
- E. Eyes/ Vision**
1. Distant vision (Without glasses/lenses) : RE: LE:
 2. Distant vision (with glasses/ lenses) : RE: LE:
 3. Near vision(Without glasses/lenses) : RE: LE:
 4. Near vision(with glasses/ lenses) : RE: LE:
 5. Power of glasses / lens used : Dioptr (No.) Dioptr (No.)
 6. Contact lenses :
 7. Whether suffering from squint or any other morbid condition of eyes or eyelids :
 8. Field of vision (if required)
 9. Colour vision :
 10. Night Blindness :

11. Fundus examination :
12. Any other findings :
- F. Respiratory System**
1. Form of chest : Normal/ deformed
2. Lungs :
3. Respiration :
4. Breath sounds :
- G. Cardio-Vascular System/ Heart**
1. Pulse in upper and lower extremities : Normal/ thickened/ varicose veins
2. Position of Heart :
3. Rate, Rhythm :
4. Sounds & any murmurs :
5. Blood vessels :
6. ECG Report :
7. Blood Pressure : Systolic mm Hg
Diastolic mm Hg
- H. Alimentary System**
1. Liver :
2. Spleen :
3. Abnormalities (piles, Fistula, peptic ulcer, etc.):
4. Any organomegaly :
- I. Genito Urinary System**
1. Urine
- (a) Specific gravity :
- (b) Albumin- : Present / Absent
- (c) Sugar- : Present / Absent
- (d) Microscopic pus cells :
2. Hernia- : Present / Absent
3. Evidence of V.D. :
4. Scrotum (For males) : Normal / Hydrocele / Bubonocoele/ other
5. Testicles (For males) : Normal / Undescended
- J. Reproductive System**
(for female candidates)
1. History of menstrual cycle : Regular / Irregular
2. Breasts :
3. Pregnancy with duration :
4. Local/ PV / P.S. Examination (if required) :
5. L.M.P. :
- K. Nervous System**
1. Mental condition :
2. Reflexes :

3. Pupils
 - (a) Normal/ Abnormal
 - (b) Light reflexes- Present/ Absent :
4. Gait :
5. Specify any other evidence of disease of nervous system except epilepsy viz. paralysis, wasting, tremors, irregular movements etc.

L. Mandatory Investigations

1. Blood examination

(a) CBC :	(d) ESR :
(b) Blood Group :	(e) FBS :
(c) Hb % :	(f) PPBS :
2. Urine Routine / Microscopic
3. Stool
4. Ski gram chest (X-ray-PA view)
5. ECG

M. Other Investigations (If Required.)

- | | |
|--------------------------|-----------------------------|
| 1. Sputum Test | 6. 2D-Echo Colour Doppler |
| 2. S/ Creatinine | 7. TMT/ Stress ECG |
| 3. S/ Urea | 8. Pulmonary Function Test |
| 4. Ultrasound of abdomen | 9. Liver Function Test |
| 5. VDRL | 10. Glycosylated Hemoglobin |
| | 11. Any other test |

Diseases found, if any	Chronic / Non Chronic	Treatable / Untreatable

(In case of any Critical Diseases, the case is mandatorily required to be referred to a Govt. Medical Board or Specialist Medical Board to be constituted by POWERGRID)

Certified that Shri /Smt./ Km. _____ a candidate selected for the post of _____ whose signature/ thumb impression is appended below, is **MEDICALLY FIT/ UNFIT/ TEMPORARILY UNFIT** (strike off whichever is not applicable).

OR

Certified that Shri /Smt./ Km. _____ a candidate selected for the post of _____ whose signature/ thumb impression is appended below, is suffering from a critical disease as indicated above and is therefore referred for examination by Medical Board.

Remarks:

AUTHORISED MEDICAL OFFICER

Signature/ Thumb impression of the candidate

Signed before me

AUTHORISED MEDICAL OFFICER-----

Date:

PART-III

POWER GRID CORPORATION OF INDIA LIMITED

Saudamini, Plot No.2, Sector 29, Near IFFCO Chowk,
Gurgaon (Haryana) - 122001, INDIA

Unit :
(Medical Department)

Post for which selected :

Ref. No. :

MEDICAL CERTIFICATE OF FITNESS ON FIRST ENTRY INTO POWERGRID'S SERVICE

(For retention by HR Department, POWERGRID)

1. I hereby certify that I have examined Shri /Smt./ Km. _____
son/daughter/wife of _____ a candidate for employment in
POWERGRID and could not discover that he/she has any disease (communicable or otherwise) except
_____.

I do/do not consider this as a disqualification for employment in the company. I, therefore, certify that
this candidate is **medically FIT / UNFIT.**

2. Shri/ Smt./ Km. _____'s age according to his/her own statement is _____
years and by his/her appearance, about _____ years.

3. Identification marks (as recorded in the medical examination forms)

(a)

(b)

Signature of the candidate

MEDICAL OFFICER

Date:

PART-IV

POWER GRID CORPORATION OF INDIA LIMITED

Saudamini, Plot No.2, Sector 29, Near IFFCO Chowk,
Gurgaon (Haryana) - 122001, INDIA

To,

Mr. / Ms -----

Subject: Medical Examination

Dear Sir/ Madam,

With reference to your medical examination held on _____, we have to inform you that you have been found **temporarily unfit** on account of the following:

You may undergo the treatment to cure yourself of the above disease/sickness and appear for a **re-examination** within_____ weeks of the date of issue of this letter. You should produce a certificate of treatment & cure from the Doctor who treated you alongwith corresponding test reports.

Yours faithfully,

MEDICAL OFFICER
STAMP OF HOSPITAL

CC: HR Department, POWERGRID

PART-V

POWER GRID CORPORATION OF INDIA LIMITED

Saudamini, Plot No.2, Sector 29, Near IFFCO Chowk,
Gurgaon (Haryana) - 122001, INDIA

Unit : (Medical Department)
Post for which selected :
Ref. No. :

MEDICAL CERTIFICATE OF FITNESS BY SPECIALISTS MEDICAL BAORD

ON FIRST ENTRY INTO POWERGRID'S SERVICE

(For retention by HR Department, POWERGRID)

1. We hereby certify that we have examined Shri /Smt./ Km. _____ son/daughter/wife of _____ a candidate for employment in POWERGRID.
 2. He/ She is suffering from a critical disease _____. With respect to the position for which he/ she is selected and nature of job in which he/ she is likely to be engaged, we do / do not consider this as a disqualification for employment in POWERGRID. We, therefore, certify that this candidate is **medically FIT / UNFIT.**
 3. Shri/ Smt./ Km. _____'s age according to his/her own statement is _____ years and by his/her appearance, about _____ years.
 4. Identification marks (as recorded in the medical examination forms)
(a)
(b)
-

Signature of the candidate

Date:

() () ()
SPECIALIST MEMBER SPECIALIST MEMBER SPECIALIST MEMBER
STAMP

POWER GRID CORPORATION OF INDIA LIMITED

Saudamini, Plot No.2, Sector 29, Near IFFCO Chowk,
Gurgaon (Haryana) - 122001, INDIA

Ref.: C/HR/Rectt./

Date :

Mr. / Ms -----

Sub. : **Your Medical Examination**

Dear Candidate,

With reference to your medical examination on _____ at _____ we are sorry to inform you that you have been found medically Unfit on account of the following.

Hence your candidature for the post of _____ is hereby rejected.

The offer of appointment issued to you stands automatically withdrawn and cancelled with immediate effect. No further correspondences shall be entertained in this regard.

Thanking you,

Yours faithfully,
For Power Grid Corporation of India Ltd.

PO/ SR.PO/ DY. MGR(HR)/ MGR.(HR)