



# ALMANSOORI SPECIALIZED ENGINEERING

## HEALTH QUESTIONNAIRE

NAME : \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
EMP. NO : \_\_\_\_\_ DIVISION : \_\_\_\_\_

Greetings of Peace my Dear Colleagues,

HSEQ is preparing lectures and/ or inviting speakers on different Health Topics to improve everybody's health status.

This survey will help us group employees according to their health condition. Please help us in this endeavor by answering the following questions.

1. Are you currently taking medicines? Yes \_\_\_\_\_ No \_\_\_\_\_

2. If yes, kindly write down the names and indications on the blank provided.

Name of Medicine: (Ex. a. Diamicron b. Vascase)	Medical Condition (Ex. a. Diabetes b. Blood Pressure)
_____	_____
_____	_____
_____	_____
_____	_____

3. Until when are you advised by your Doctor to take this/ these medicines?

- \_\_\_\_\_ 1 week
- \_\_\_\_\_ 2 weeks
- \_\_\_\_\_ 1 month
- \_\_\_\_\_ 1 year
- \_\_\_\_\_ Lifetime
- \_\_\_\_\_ other, please specify

Thank you for your cooperation. Rest assured all information is highly confidential.

Dr. Edna Aricaya-Huevos

Health Advisor