

## **GENERAL HEALTH PROFILING FOR PUBLIC/PRIVATE SCHOOL TEACHERS (DISTRICT ATTOCK)**

Name of Institution: \_\_\_\_\_ EMIS Code: \_\_\_\_\_ Tehsil: \_\_\_\_\_

### **Part-A (Basic Personal Information)**

Name of Teacher: \_\_\_\_\_ Designation: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_

CNIC No. \_\_\_\_\_ Personal No. \_\_\_\_\_ Cell No. \_\_\_\_\_

Residential Address: \_\_\_\_\_

### **Part-B (Basic Medical History)**

Sr. No.	Indicator	Yes	No	Detail if any
1.	Family History of any Medical or Psychiatric illness:			
2.	Past medical and surgical history if any			
3.	History of substance abuse in family (Drugs):			
4.	Decrease appetite and loss of weight			

### **Part-C: (Overall General Physical Examination)**

Sr. No.	Indicator	Yes	No	Detail if any
1.	Height			
2.	Weight			
3.	Blood Pressure			
4.	Temperature			
5.	Pulse Rate			
6.	Respiratory Rate			
7.	Any obvious structural abnormality on inspection			
8.	Any superficial cuts, needle marks, or burn marks on skin			

### **Part-D: 1. General Mental Health (as per Psychiatrist Assessment)**

Sr. No.	Indicator	good	average	poor
1.	General appearance and behavior			
2.	Self-care:			
3.	Rapport building:			
4.	Understanding of situation/response to instruction:			

### **2. General Mental Health (To be filled & authenticated by institution)**

Sr. No.	Indicator	Yes	No	Detail if any
1.	Past psychiatric history, if any			
2.	History of smoking/substance abuse			
3.	Decline in academic performance			
4.	Risky behavior, vehicle accident, school fight, weapon possession			
5.	Habit of running away/missing routine classes:			
6.	History of stealing, late arrival in school, sexual activities			
7.	Bad company, bullying, drug and scuffle:			
8.	Isolation from positive interest/hobbies:			
9.	Abrupt change in daily routine:			
10.	Disturbed sleep/habit of dosing:			
11.	Social media posts/other indications pointing towards drug use, tattoos, stickers on vehicle/books			
12.	Mood swings/increased irritability			
13.	Lack of physical energy and motivation, fatigue & tiredness			
14.	Decline in self-care:			
15.	Suspiciousness or other unusual behavior:			
16.	Decline in socialization:			
17.	Unusual protective behavior/over secretive behavior			
18.	Evidence of remains of cigarette/objects and tools used for drugs found in personal belonging:			

### **Part-E: (for positive initial risk assessment)**

- Structured/formal psychological assessment to be carried out if there is sound susceptibility of substance use
- Use drug screening test if formal psychological assessment confirms suspicion of drug addiction.

**Signature of Teacher concerned**

**Signature of Registered Medical  
Practitioner**

**Signature of Head of Institution**