# 

# Annex 5

**CONFIDENTIAL**

Medical Inspection Report

organised pursuant to Article 59, paragraph 1, subparagraphs 3, 4, 5, 6 and 7 of the Staff Regulations and Articles 16, 59 and 91 of the CEOS

(to be returned by post no later than two working days after the inspection to the following address:

Medical Officer, European Court of Auditors, 12 rue Alcide de Gasperi, L- 1615 Luxembourg

or by fax: 00352 4398-48392)

|  |  |
| --- | --- |
| **To be completed by the inspecting practitioner** | |
| **NAME OF STAFF MEMBER:** |  |
| **NAME OF INSPECTING PRACTITIONER:** |  |
| **DATE AND TIME OF INSPECTION:** |  |
| **PLACE OF EXAMINATION:** | Home of the staff member or other address provided by the Court |
| Practitioner’s surgery |
| Court of Auditors |
| **IT FOLLOWS FROM THE MEDICAL INSPECTION THAT**  the current absence from work is medically justified.  the staff member is fit to carry out his/her duties. | |
| **THE INSPECTION COULD NOT BE CARRIED OUT BY THE PRACTITIONER at the scheduled time because the staff member**: | refused to undergo the inspection |
| was not present at the place of inspection, despite having been given notice thereof  was not present at the place of inspection. He/she had not been given notice of the inspection |

|  |
| --- |
| **To be completed by the staff member**  I have been informed of the results of the inspection  For information regarding the consequences of the inspection report, see Article 59(1) of the Staff Regulations.  I object to a detailed medical report being sent in a confidential capacity to the Court’s medical officer. |

Staff member *(Name)* Dr (Name)

*(Signature)*  (Signature)

Date Date