Appendix 32: EX1 Form (Initial Examination Report)

INITIAL EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)

Petroleum Development Oman
MEDICAL DEPARTMENT

PLEASE COMPLETE YOUR PERSONAL DETAILS IN BLOCK CAPITALS

Surname	CHAUDHRY
Forenames	MUHAMMAD YOUNAS
Address	
Home telephone number	94968601

Place of examination NMC AL AMAL Date 14/08/23

If a dependant enter employee's name here:
Surname: Forenames:

Birth date: 01/01/1975 Nationality: PAKISTANI Country of birth: Religion:

☒ Male ☐ Female ☐ Married ☐ Single ☐ Seperated /Divorced

Relationship to employee ☐ Wife ☐ Son ☐ Daughter Number of children: 4

Reason for examination Pre-Employment ☐ Job: DRIVER
Pre-Overseas ☐ Area:

Name and address of family doctor

List your last 3 jobs
(1)
(2)

Are you a Registered Disabled Person? (UK only) ☐ Do you belong to any Medical Insurance Scheme? ☐

DO YOU HAVE OR HAVE YOU HAD:- (Tick "Yes" or "No" column or put a (?) if uncertain exclude minor ailments.)

	Y	N		Y	N		Y	N
1. Sinus trouble		✓	21. Cancer		✓	HAVE YOU EVER BEEN:-		
2. Neck swelling/glands		✓	22. Heart Disease		✓	40. Rejected for employment or insurance for medical reasons		✓
3. Difficulty in vision		✓	23. Rheumatic fever		✓	41. Awarded benefits for industrial injury/illness		✓
4. Any ear discharge		✓	24. Abnormal heartbeat		✓	42. Treated for a mental condition, e.g. depression		✓
5. Asthma/bronchitis		✓	25. High blood pressure		✓	43. Treated for problem drinking or drug abuse		✓
6. Hayfever /other significant allergy		✓	26. Stroke		✓	44. Exposed to toxic substance or noise		
7. Any skin trouble		✓	27. Serious chest pain		✓	FOR WOMEN ONLY		
8. Tuberculosis		✓	28. Any blood disease		✓	Have you ever had:-		
9. Shortness of breath		✓	29. Kidney disease		✓	45. An abnormal smear		
10. Coughed/vomited blood		✓	30. Blood in urine		✓	46. Any gynaecological treatment		
11. Severe abdominal pain		✓	31. Diabetes		✓	47. Are you pregnant?		
12. Stomach ulcer		✓	32. Headaches/migraine		✓	48. HAVE YOU HAD AN ILLNESS NOT MENTIONED ABOVE		
13. Recurrent indigestion		✓	33. Dizziness/fainting		✓			
14. Jaundice or hepatitis		✓	34. Epilepsy		✓			
15. Gall Bladder disease		✓	35. Joints/spinal trouble		✓			
16. Marked change in bowel habits		✓	36. Surgical operation		✓			
17. Blood in stools (motions)		✓	37. Serious accident/fracture		✓			
18. Marked change in weight		✓	38. Tropical disease		✓			
19. Varicose veins		✓	39. Fear of heights		✓			
20. Lump in breast/armpit		✓						

How much tobacco each day? 45 / day. Average daily alcohol consumption X .

Have you ever taken elicited drugs? ( ) PDO test all new/potential employees for elicited/recreational drugs

FAMILY HISTORY: Diabetes (✓) Tuberculosis (✗) Epilepsy (✓) Asthma (✗) Eczema (✗)
Heart disease (✗) High blood pressure (✓) Stroke (✗) Blood Disease (✓) Cancer (✗)

PLEASE READ THE FOLLOWING STATEMENT AND IF YOU AGREE KINDLY SIGN IT:-

I declared these statements to be true to the best of my knowledge and belief and I agree that the result of this medical examination in general terms may be revealed to the Company if required, and the details sent to my own doctor if this is considered necessary by the examining medical officer. **I am also aware that PDO reserve the right to dismiss me if it was found that I have purposely withheld important medical information.**

Date: 14/08/23 **Signature of Applicant:**

FOR COMPLETION BY EXAMINING DOCTOR OR NURSE

Further details of medical history and recreational activities

N = Normal	A = Abnormal (please describe)		PHYSICAL EXAMINATION
N	A		
✓		1. Eyes & Pupils	
✓		2. E.N.T.	
✓		3. Teeth & Mouth	
✓		4. Lungs & Chest	
✓		5. Cardiovascular System	
✓		6. Abdo. Viscera	
✓		7. Hernial Orifices	
✓		8. Anus & Rectum	
✓		9. Genito urinary	
✓		10. Extremities	
✓		11. Musculo-skeletal	
✓		12. Skin & Varicose Vns.	
✓		13. C.N.S.	

HEIGHT cm	WEIGHT kg	BMI	B.P.	PULSE	HEARING	VISION	Colour Vision	Blood Group
173	89	29.7	117/74	72 /mins.	L, R: (N)	DISTANT R L: 6/6 6/6; NEAR R L: (N) (N) (Uncorrected / Corrected)	(N)	

N	A		LABORATORY AND OTHER SPECIAL INVESTIGATIONS	N	A	
✓		1. Urinalysis		✓		7. Audiogram
✓		2. Hb, Bloodcount, ESR		✓		8. Lung Function
✓		3. LFT, RFT, RBS				9. Chest X Ray
		4. Drug Screen		✓		10. ECG
	✓	5. Lipids (40 years +)	13.2% (Moderate Risk)			11. CVS risk for 40 yrs. & above
✓		6. Sickle Cell test				12. HIV, Hepatitis screening

OTHER FINDINGS (Physique, scars, disabilities, mental stability including behaviour, etc.)

* Hyperlipidemia.
* Framingham Risk Score is 13.2%.
* Ref to Cardiologist for further evaluation

ASSESSMENT:

☑ FIT ALL AREAS ☐ FIT WITH RESTRICTION ☐ TEMPORARY UNFIT ☐ UNFIT

Date: 15/9/23 Name (Block Capitals): Dr. / Nurse Masood Signature:

FIT

REVIEW/CONSULTATION

Date: Name (Block Capitals): Dr. / Nurse Signature:

RECEPTION

Fitness to Work Certificate for drivers

Employee Data			Date 4/08/23
Name MUHAMMAD YOUNAS CHAUDHRY			Department/Company TRUCKMAN EQUIPMENT RENTAL
I.D No. 7B284596	Age 48		Occupation DRIVER
Type of Medical Evaluation			Mark those applying √
A5- HVD- Crane or forklift driving & all heavy vehicles			A7- Professional driving-light vehicles

Health Advisor Statement: The above named person has been examined according to the statements laid down in "Protocols and Guidance Notes on the Medical Evaluation of Fitness to Work". At this time his/her fitness to work status for the above tasks is as follows.

Fit with no restrictions			FIT
Fit with following restriction(s)			
The employee is fit for above work but should avoid the following task(s)	*Temporary restriction*	*Permanent restriction*	
Work near moving machinery or sharp edges			
Operate Heavy motor vehicles, forklifts or heavy machinery			
Other (Specify)			
Temporary Unfit until			
Permanently Unfit			

Dr. Shiva Kumar — Dr. SHIVA KUMAR SHARMA — 4/08/2023

Name of health advisor — Signature — Date

C.R. No. 1660137 Sultanate of Oman RECEPTION — mc specialty hospital, Al Hail

Calculator | About | References

Default Units

Framingham Risk Score (2008)

Questions

1.	Gender?	Male
2.	Age?	45-49
3.	Total Cholesterol?	5.16-6.19 ...
4.	HDL?	<0.9 mmol/L
5.	Systolic Blood Pressur...	<120 mmHg
6.	On Medication for Hy...	No
7.	Smoker?	Yes
8.	Diabetic?	No
9.	Known Vascular Disea...	No

About

The FRS estimates the 10 year risk of manifesting clinical CVD (CAD, Stroke, PVD, CHF, cardiac death). Although not examined in the 2008 model, it is common practice to double the FRS if there is a FHx of premature CAD in a 1st degree relative (men <55y, women <65y).

*The risk stratification tool for the ESC is the SCORE system which estimates 10y risk of CVD death. Patients with a 10y risk of CVD death ≥5% are considered high risk. The lipid guidelines recognize risk equivalents as a distinct category that warrant immediate treatment. For patients with an ESC SCORE ≥ 5% a 3 month trial of lifestyle measures is a reasonable starting point. If after 3 months the lipids remain above moderate risk targets and the SCORE remains ≥ 5% then intensive therapy to reach high risk targets is recommended.

References

Results

Copy Results

Estimated 10-year Global CVD Risk

13.2%

Risk Category

Moderate Risk

Estimated Vascular Age

60 Years

Treatment Guidelines

ATP-III (2004)
Treatment Targets
LDL <130 mg/dL (<3.37 mmol/L)
Non-HDL <160 mg/dL (<4.14 mmol/L)

CCS (2009)
Initiate Pharmacotherapy if
LDL >3.5 mmol/L (>135 mg/dL)
TChol/HDL-C >5 mmol/L (>193 mg/dL)
hsCRP >2 mg/L in men >50 years and women >60 years
FHx and moderate risk hsCRP

Treatment Targets
LDL <2 mmol/L (<77 mg/dL) or ≥50 % decrease in LDL-C
apoB <0.8 g/L (80 mg/dL)

ESC (2007, see Info for more)
Treatment Targets
LDL <3 mmol/L (<120 mg/dL)
TChol <5 mmol/L (<194 mg/dL)

C.R. No. 1000132
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nmc Specialty hospital, Al Hail

Created by QxMD

Appendix 20: (Form SQ5): Epworth Screening Quest. For Sleep Apnoea

Employee Data		Date: 14/08/23
Name: MUHAMMAD YOUNAS CHAUDHRY		Department/Company: TRUCK ON AM EQUIPMENT
I. D No. 78284C96	Tel # 94968601	Occupation: DRIVER RENTAL

This questionnaire will help identify if you have any health condition which may need a more detailed medical assessment as part of your fitness to work determination. If you have any queries please contact your local Health Services staff. All information provided on this form and during consultations remains strictly confidential. When further clinical evaluation is required following completion of a screening questionnaire, the details should be recorded on Q1 and E1 forms.

How likely are you to fall asleep in the following situations? (use 0 to 3 score as shown below)

0 Would never doze

1 Slight chance of dozing

2 Moderate chance of dozing

3 High chance of dozing

0	sitting and reading
0	watching TV
0	sitting inactive in a public place (e.g. theatre or meeting)
0	as a passenger in the car for an hour without a break
2	Lying down to rest in the afternoon when circumstances permit
0	Sitting a talking with someone
2	Sitting quietly after lunch without alcohol
	In a car, while stopped for a few minutes in traffic
Total 04	

If you score a total of 15 or more you should seek advice from medical personnel on site before continuing to drive or operate machinery in the workplace.

Declaration: I, MUHAMMAD YOUNAS CHAUDHRY *(Print Name)* certify that to the best of my knowledge the above information supplied by me is true and **correct.**

Signature: _____ Date: 14/08/23

C.R. No. 1001137 RECEPTION [illegible] specialty hospital, Al Hail

DEPARTMENT OF LABORATORY MEDICINE

File No:	50105277	**Report No:**	0094756		
Name:	MUHAMMAD YOUNAS CHAUDHRY	**Sample Date:**	14/08/2023	**Time:**	6:56
		Received By:			
Address:		**Received Date:**		**Time:**	
Gender:	M **Age:** 48 Y **Nationality:** PAKISTANI	**Report Date:**	14/08/2023	**Time:**	08:37
GSM No.:	94968601 **ID Card No.:** 78284596	**Bill No:**	0250023	**Bill Date:**	14/08/2023
Ref. By.	DR ERFAN GHOODJANI	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
PDO Package – 1 (Up to 49 yrs)		consultation with physician Eye check up
COMPLETE BLOOD COUNT		
TOTAL WBC COUNT	6.40 x 10^3 / µL	4.00-11.00 x 10^3 / µL
DIFFERENTIAL COUNT		
NEUTROPHIL (%)	49.10 %	40-75%
LYMPHOCYTE (%)	40.80 %	20-45%
MONOCYTE (%)	6.40 %	2-8%
EOSINOPHIL (%)	3.40 %	1-6%
BASOPHIL (%)	0.30 %	0-1%
HAEMOGLOBIN	16.50 gm/dl	Male : 13 -18 gm/dl Female:11-15 gm /dl childrens upto 1year-11.0 - 13.0 gm /dl upto12years-11.5 - 14.5 gm /dl cord blood:13 -19.5 gm /dl
RBC COUNT	4.90 million/cu	Male :4.5-6.5 million/cu Female:3.9-5.5 million/cu
PLATELET COUNT	169.00 x 10^3 / µL	150 - 400 x 10^3 / µL
HEMATOCRIT	46.00 %	Male :42 - 52% Female:37- 47%
MCV	93.90 fl	76 - 96 fl
MCH	33.70 pg	27 - 33 pg
MCHC	35.90 gm/dl	32 - 36 gm/dl
SICKLE CELL Method : Solubility test (If Positive , Hb Electrophoresis / HPLC to be done to confirm Sickle cell anaemia / Trait).	NEGATIVE	
LIVER FUNCTION TEST		
TOTAL BILIRUBIN	7.30 µ mol/L	Adults:- up to 21 µ mol/L, Children >1 month - up to 17 µ mol/L.

Verified By:

11011
Lab Technologist
MOH License No:
Electronically signed at: 8/14/2023 8:39:00

Approved By:

DR ROSE MARY
Specialist Pathologist
MOH License No: 18178
Electronically signed at: 14/08/2023 10:23:00

C.R. No: 1058127
Emirate of Oman
RECEPTION
nmc specialty hospital

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DEPARTMENT OF LABORATORY MEDICINE

File No:	50105277	**Report No:**	0094756		
Name:	MUHAMMAD YOUNAS CHAUDHRY	**Sample Date:**	14/08/2023	**Time:**	6:56
		Received By:			
Address:		**Received Date:**		**Time:**	
Gender:	M **Age:** 48 Y **Nationality:** PAKISTANI	**Report Date:**	14/08/2023	**Time:**	08:37
GSM No.:	94968601 **ID Card No.:** 78284596	**Bill No:**	0250023	**Bill Date:**	14/08/2023
Ref. By:	DR ERFAN GHOODJANI	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
		Neonates :- 1.7 - 180 µmol/L
DIRECT BILIRUBIN	2.10 µ mol/L	Adults ;- 0 - 5.0 µ mol/L, Neonates:- 0-10 µ mol/L
TOTAL PROTIEN	69.30 g/l	Adults : 66 - 87 g/l
ALBUMIN	43.80 g/L	39.7 - 49.4 g/L
Globulin	25.5 g/L	23-35g/L
SGOT (AST)	27.00 U/L	MALE : up to 40 U/L, FEMALE : up to 32 U/L.
SGPT (ALT)	18.90 U/L	MALE : up to 41 U/L, FEMALE : up to 33 U/L.
ALKPO4 (ALP)	91.00 U/L	Adults: MALES: 40 - 129 U/L, FEMALES: 35 - 104 U/L.
Gamma GT (GGT)	64.00 U/L	MALE- 8 - 61 U/L, FEMALE- 5 - 36 U/L
RENAL FUNCTION TEST		
URIC ACID	405.00 µ mol/L	MALE: 202.3 - 416.5 µ mol/L, FEMALE: 142.8 - 339.2 µ mol/L
CREATININE	85.00 µ mol/L	Adults: MALE: 62 – 106 µ mol/L FEMALE: 44 - 80 µ mol/L
UREA	4.40 mmol/l	2.76 - 8.07 mmol/l
LIPID PROFILE		
TOTAL CHOLESTEROL	6.14 mmol/L	< 5.18 mmol/L
HDL	0.83 mmol/L	>1.5 mmol/L
TRIGLYCERIDES	3.28 mmol/L	Desirable : <2.083 mmol/L Boderline high : 2.83 - 5.67 mmol/L Hypertriglyceridemia >5.65 mmol/L
LDL	4.20 mmol/L	< 2.6 mmol/L
VLDL	1.49 mmol/l	0.128-0.645mmol/l

Verified By:

11011
Lab Technologist
MOH License No:
Electronically signed at: 8/14/2023 8:39:00

Approved By:

DR ROSE MARY
Specialist Pathologist
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DEPARTMENT OF LABORATORY MEDICINE

File No:	50105277	**Report No:**	0094756		
Name:	MUHAMMAD YOUNAS CHAUDHRY	**Sample Date:**	14/08/2023	**Time:**	6:56
		Received By:			
Address:		**Received Date:**		**Time:**	
Gender:	M **Age:** 48 Y **Nationality:** PAKISTANI	**Report Date:**	14/08/2023	**Time:**	08:37
GSM No.:	94968601 **ID Card No.:** 78284596	**Bill No:**	0250023	**Bill Date:**	14/08/2023
Ref. By:	DR ERFAN GHOODJANI	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
FASTING BLOOD SUGAR	5.58 mmol/L	4.11 - 6.05 mmol/L
URINE ROUTINE		
URINE BIOCHEMISTRY		
URINE GLUCOSE	NEGATIVE	NEGATIVE
URINE PROTEIN	NEGATIVE	NEGATIVE
URINE KETONE	NEGATIVE	NEGATIVE
URINE BILIRUBIN	NEGATIVE	NEGATIVE
NITRITE	NEGATIVE	NEGATIVE
URINE PH	6.0	4.6-8.0
SPECIFIC GRAVITY	1.030	1.010-1.030
BLOOD	NEGATIVE	NEGATIVE
UROBILINOGEN	NORMAL	NORMAL
LEUCOCYTE	NEGATIVE	
URINE MACROSCOPY		
COLOUR	YELLOW	
APPEARANCE	SLIGHTLY TURBID	
URINE MICROSCOPY		
RBC	2-4 /hpf	0-3
PUSCELLS	0-3 /hpf	0-5
EPITHELIAL CELLS	0-2 /hpf	NIL
CRYSTAL	NIL /hpf	NIL
CAST	NIL /hpf	NIL
BACTERIA	NIL	NIL
MUCOUS THREAD	++	NIL

Verified By:

11011
Lab Technologist
MOH License No:
Electronically signed at: 8/14/2023 8:39:00

Approved By:

DR ROSE MARY
Specialist Pathologist
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C.R. No. 1668137 Sultanate of Oman RECEPTION nmc specialty hospital

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Tone threshold audiometric test

14/08/2023 9:40:12 AM

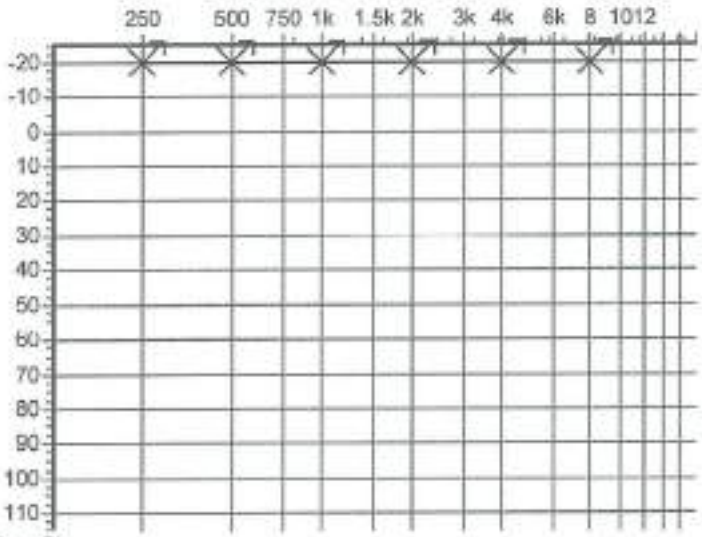
Name: **MUHAMMED YOUNAS**
Surname: **CHAUDHRY**

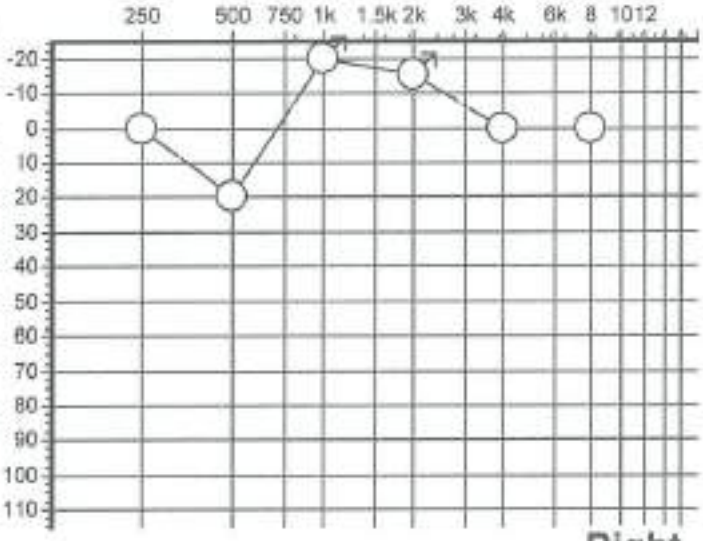
Date of birth: 1975/01/01
Age in years: 48

Company: dr erfan
Department:
Job title:
Number: 94968601

ID/SS number: 50105277
Passport no.:

Significance: **None**





Left **Right**

125	250	500	1k	2k	3k	4k	6k	8k	9k	10k	11.2	12.5	14k	16k	Frequencies	125	250	500	1k	2k	3k	4k	6k	8k	9k	10k	11.2	12.5	14k	16k
			20	**20**	**20**	**20**		**-20**							**Air thresholds**			**0**	**20**	**-20**	**-15**		**0**							
			-28	-18	-25	-27		-32							Noise in ear canal			-8	-11	-13	-19		-25							
			1		0			50							Noise for threshold-5dB			-5	6		-17		-24							
															Bone thresholds															
															Noise in ear canal															
															Noise for threshold-5dB															
															Maximum masking															
															Bone unmasked															
															Noise in ear canal															
															Noise for threshold-5dB															

ZA PLH
Binaural impairment

Pure tone avg. (500 1k 2k)
-20

Patient response statistics
n 88
Mean 1383
Standard deviation 683
Test re-test reliability (1st freq.) 0
False positive response % 22

Pure tone avg. (500 1k 2k)
-5

Audiogram notes:

MUHAMMED YOUNAS CHAUDHRY

fatma alzdejali NMC AL HAIL 1073

KUDUwave

Capturer of data version number: 2.12.12.0
Report software version: 2.4.3.0
Report generated on: 14/08/2023 9:47:35 AM
Unique Global Patient Number: D8891DC132A34089AFD7583A2B95E037

Last calibration date: 20/10/2017
KUDUwave serial number: 0901-00072
Bone vibrator serial number: Adult /
Sound booth: SANS 10182 Diagnostic
Type of audiometer: Near Type 1
Test protocol:

Vitalograph

Pulmonary Function Report

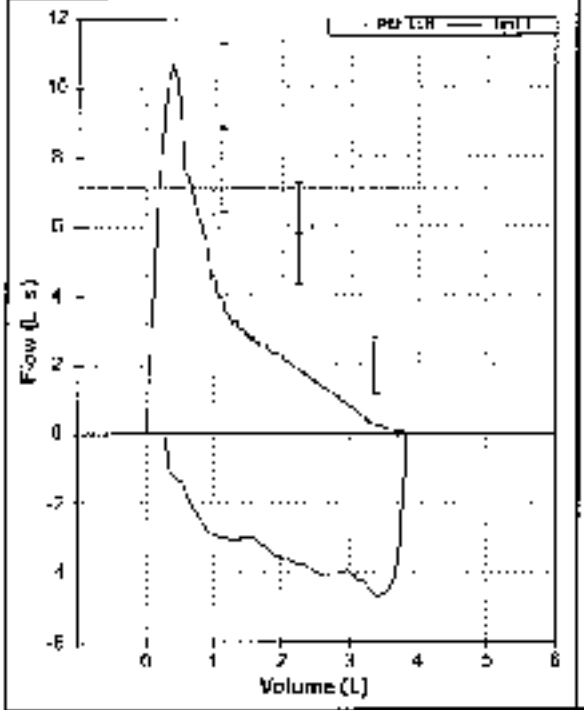
Subject Information

ID:	2023225_093414108	Alternate ID:	50135277		
Last Name:	Chaudhry	First Name:	Muhammad	Middle Name:	Younas
Population:	MIDDLE EAST	Gender:	Male	Date of Birth:	01/01/1975
Age:	48	Height:	173 cm	Weight:	86.0 kg
BMI:	28.7	Smoking:	Smoker		

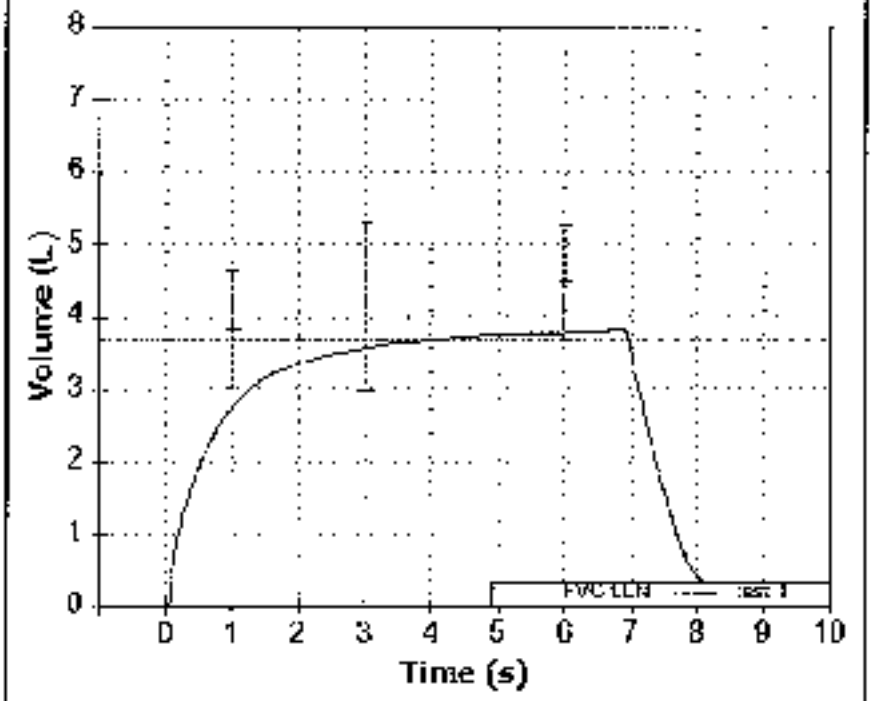
Test Session Information

Test Date:	14/08/2023 09:36	Device:	ALPHA Touch	Serial Number:	32166
No. of Tests:	2	Accuracy Chk:	30/05/2019 15:42	User:	Administrator
Pred. Values:	Global	Pred. Factor:	100%	Posture:	Sitting

Flow/Volume Graph



Volume/Time Graph



Results

Parameter	Pred	LLN	Best	% Pred.	Z Score
FVC (L)	4.47	3.69	3.82	85	-1.37
FEV1 (L)	3.82	3.01	2.81*	74	-2.09
FEV1 Ratio	0.79	0.67	0.74	94	-0.68
FEV6 (L)	4.47	3.69	3.78	85	-1.45
PEF (L/min)	598	426	644	108	0.44
FEF25-75 (L/s)	4.50	3.51	2.05*	45	-3.84

Values at BTPS, *Below lower limit of normality (LLN)

Session Quality and Repeatability Information

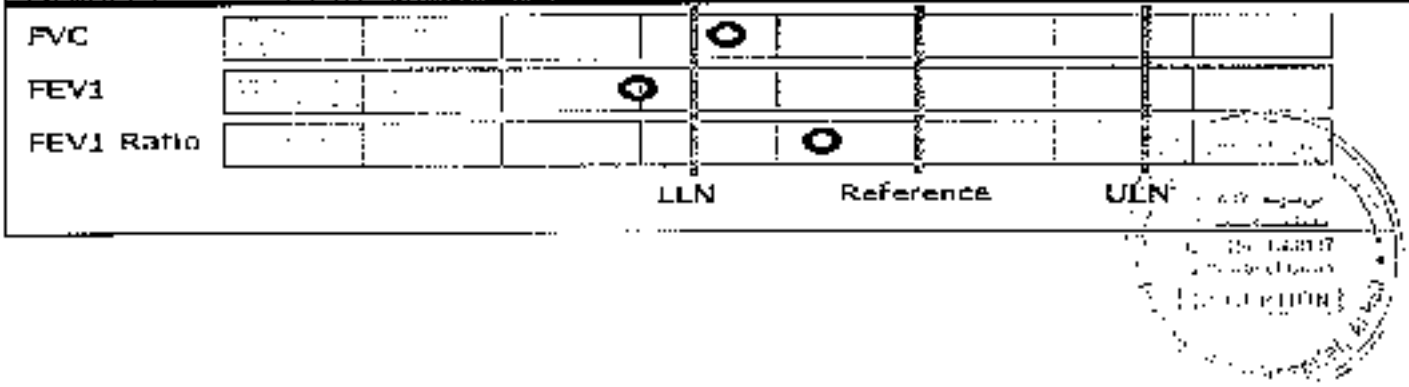
FVC Session Grade	FVC Rep:	FEV1 Rep:	Slow Start of test	End of test criteria not achieved	Cough detected in 1st second
C	0.13 L (3.4%)	0.10 L (3.6%)	0 blow(s)	0 blow(s)	0 blow(s)

Computer Suggested Interpretation

Computer interpretations cannot be relied upon for diagnosis. Normal ventilatory function.

Estimated Lung Age: 68 years

Reference Pictogram



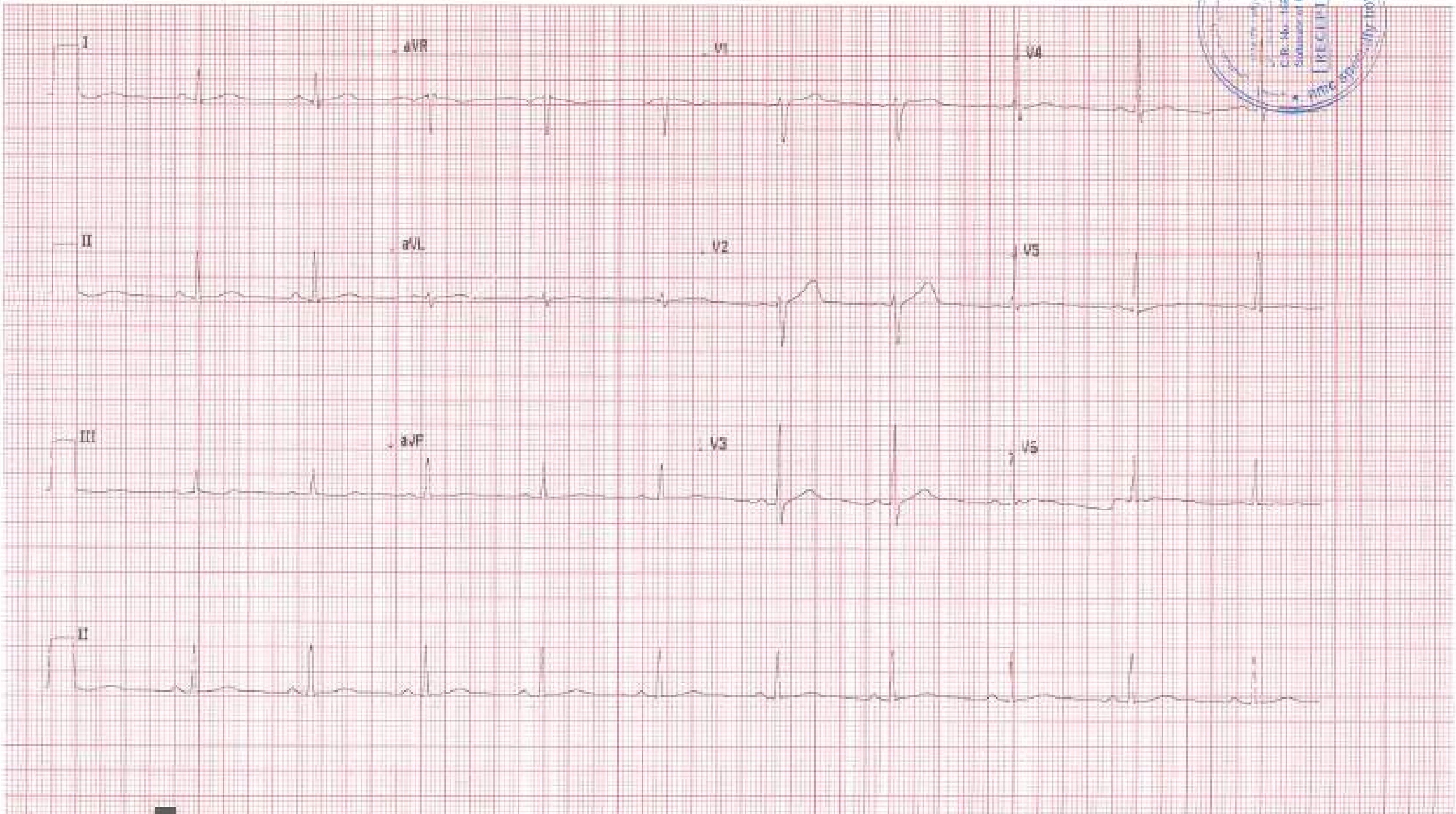
Chaudhry, Muhammad younas
ID: 50/05277
DOB:
48yr, Male

14-Aug-2023 07:12:41

Vent rate:	63	BPM
PR int:	159	ms
QRS dur:	96	ms
QT/QTc:	400/407	ms
P-R-T axes:	40 63 42	

SINUS RHYTHM
NONSPECIFIC T-WAVE ABNORMALITY
BORDERLINE ECG
WARNING: DATA QUALITY MAY AFFECT INTERPRETATION

UNCONFIRMED REPORT



119210000833 No Site Name

Site # 0 Cart # 0 Version 2.1.0.5 Sequence #01916 25mm/s 10mm/mV 0.05-40 Hz

nmc specialty hospital,al-hail

P.O BOX : 613, Postal Code : 133
al-hail
24269222

Fitness Certificate

Empno:
Date of issue : *15/08/2023*

Ref No : *0000031/FIT/NMC/2023*

This is to certify that Mr. / Mrs. *MUHAMMAD YOUNAS CHAUDHRY* with file no *50105277* and Resident card no. *78284596* was *Examined* at *nmc specialty hospital,al-hail* on *15/08/2023* and will be *FIT TO WORK* from the medical point of view starting from *15/08/2023*

DIAGNOSIS

Remarks
TMT:NEGATIVE FOR ISCHEMIA

DR ERFAN GHOODJANI

Place: *nmc specialty hospital,al-hail*

(Hospital Seal)

Signature

DR ERFAN GHOODJANI
Specialist Cardiology
MOH Lic. No. 21410
nmc specialty hospital, Al Ghubra

C.R. No: 1668137
Sultanate of Oman
RECEPTION
nmc specialty hospital, Al Hail

CHAUDHRY, MUHAMMAD
50105277

Patient Information

8/14/2023 10:12:07 AM
Bruce

ID: 50105277	Second ID:	Admission ID:

Date of Birth:	Height: 173 cm	Gender: Male
Age: 48 Years	Weight: 89 kg	Race: Unknown

Indications
test

Medications
NIL

C.R. No: 1668137
RECEPTION
NMC Specialty hospital, Al Hail

Referring Physician: DR ERFAN	Location: NMC ALHAIL	Procedure Type: TMT

Attending Phy: DR ERFAN	Target HR: 146 bpm (85%)	Reasons for end: Target HR
Technician: ANEESH	Max HR(%MPHR): 156 bpm (90%)	Symptoms: NO CHEST PAIN

Diagnosis

Notes

Conclusions

The patient was tested using the Bruce protocol for a duration of 09:33 mm:ss and achieved 11.5 METs. A maximum heart rate of 156 bpm with a target predicted heart rate of 106% was obtained at 09:10. A maximum systolic blood pressure of 192/68 was obtained at 08:35 and a maximum diastolic blood pressure of 192/68 was obtained at 08:35. A maximum ST depression of -1.9 mm in III occurred at 09:20. A maximum ST elevation of +2.4 mm in V3 occurred at 10:40. The patient reached target heart rate with appropriate heart rate and blood pressure response to exercise. No significant ST changes during exercise or recovery. No evidence of ischemia. Normal exercise stress test.

Reviewed by:

UNCONFIRMED REPORT

Signed by:

Date:

DR. IRFAN GHOOJANI

CHAUDHRY, MUHAMMAD
50105277

Exam Summary

8/14/2023 10:12:07 AM
Bruce

Summary

Exercise Time: 09:33
Leads with 100uV ST: II, III, aVL, aVF, V2, V3, V4
PVCs: 0
Duke Treadmill Score: —

Max Values

Speed: 4.2 MPH | HR: 156 BPM | 90% of MPHR (172 bpm)
Grade: 16 % | SBP: 192/68 mmHg
METs: 11.5 | DBP: 192/68 mmHg
HR*BP: 27840 BPM * mmHg
ST/HR Index: 2.57 uV/bpm: in III at 09:20

Max ST

ST elevation: 2.4 mm in V3 at 10:40
ST depression: -1.9 mm in III at 09:20

Max ST Changes

ST elevation change: — mm in — at —
ST depression change: — mm in — at —

C.R. No: 1668137
RECEPTION
nmc specialty hospital, Hail

STAGE SUMMARY

ST measurement based on J+60ms

		Speed (MPH)	Grade (%)	HR (BPM)	BP (mm-Hg)	METs	HR*BP	ST LEVEL (mm) I	II	III	aVR	aVL	aVF	V1	V2	V3	V4	V5	V6
BP	PRE-X	0.0	0.0	79	115/62	-	9085	-0.1	0.6	0.7	-0.3	-0.4	0.6	0.8	2.1	2.1	1.5	0.9	0.5
START EXE	EXE 00:00	0.0	0.0	84	-	1.3	-	0.3	0.6	0.2	-0.6	0	0.4	0.6	1.9	2	1.5	0.8	0.4
BP	EXE 02:33	1.7	10.0	119	168/54	4.7	19992	0.3	0.3	-0.1	-0.4	0.2	0.1	0.6	1.7	2	1.2	0.5	0.1
STAGE 1	EXE 03:00	1.7	10.0	117	-	4.7	-	0.2	0.2	0	-0.3	0.1	0.1	0.6	1.7	1.9	1.1	0.4	0
BP	EXE 05:43	2.5	12.0	126	166/66	7.1	20916	0.2	-0.5	-0.7	0.1	0.4	-0.6	0.7	1.5	1.2	0.5	-0.1	-0.3
STAGE 2	EXE 06:00	2.5	12.0	127	-	7.1	-	0.2	-0.6	-0.8	0.1	0.4	-0.7	0.6	1.4	1.2	0.5	-0.2	-0.4
BP	EXE 08:35	3.4	14.0	145	192/68	10.3	27840	0.1	-0.6	-0.8	0.1	0.4	-0.7	0.5	1.4	1.1	0	-0.6	-0.7
STAGE 3	EXE 08:36	4.2	16.0	145	-	10.6	-	0.1	-0.6	-0.8	0.1	0.4	-0.7	0.5	1.4	1.1	0	-0.6	-0.7
Treadmill Stopped	EXE 09:18	0.0	0.0	156	-	11.5	-	0.2	-1.5	-1.8	0.6	1	-1.7	0.7	1.5	0.8	-0.4	-1	-1
Peak	EXE 09:33	0.0	0.0	154	-	10.9	-	0.1	-1.3	-1.5	0.5	0.8	-1.4	0.8	1.5	1.2	-0.1	-0.8	-0.8
BP	REC 01:40	0.0	0.0	115	190/67	7.9	21850	0.4	0.7	0.2	-0.6	0	0.4	0.5	1.5	2.1	1.2	0.5	0.1
BP	REC 02:41	0.0	0.0	108	184/65	6.1	19872	0.2	0.2	-0.1	-0.3	0.1	0	0.5	1.3	1.4	0.6	0.1	-0.2
END REC	REC 03:30	0.0	0.0	106	-	4.6	-	0.1	-0.1	-0.2	-0.1	0.1	-0.2	0.6	1.1	1	0.3	-0.1	-0.3

OPAL FTW - MUHAMMAD YOUNAS CHAUDHRY #6798

Ibrahim Al Mahrouqi <ibrahim.mahrouqi@truckomangroup.com>

Mon 8/14/2023 7:01 AM

To:Customercare Hail [NMC Oman] <customercare.hail@nmcoman.com>

Cc:Davis George <davis@truckomangroup.com>;Sahaya Jayaraj <Sahaya@truckomangroup.com>;Jeyasingh <jeyasingh@truckomangroup.com>

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Team,

Please arrange OPAL FTW for MUHAMMAD YOUNAS CHAUDHRY #6798 and share report later.

Best regards,

Ibrahim Al_Mahrouqi
Truckoman Equipment Rental LLC.
Phone No : 00968 95665292

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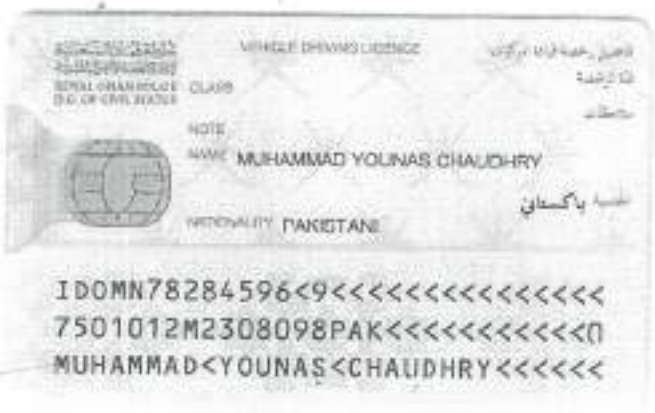
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CLASS
NOTE
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SULTANATE OF OMAN
RESIDENT CARD
78284596
08/08/2023
01/01/1975