

Initial Medical Examination Report
INITIAL EXAMINATION REPORT (MEDICAL - CONFIDENTIAL)

Surname: Mohammad Tayeb Islam	
Forenames:	
Address:	
Place of examination: Aster Hospital, Ibra	Date: 17/8/2022
Home telephone number: 96816471	
If a dependant enter employee's name here:	
Birth date: 21/1/1993	Project: Truck Owner
Nationality: Bangladesh	Country of birth: Bangladesh
Religion:	
☒ Male ☐ Female	☐ Married ☐ Single ☐ Separated / Divorced
Relationship to employee ☐ Wife ☐ Son ☐ Daughter	
Number of children:	
Reason for examination Pre-Employment ☐ Job: Pre-Overseas ☐ Area:	
Name and address of family doctor	
List your last 3 jobs (1)	
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
1. Sinus trouble	21. Cancer
2. Neck swelling/glands	22. Heart Disease
3. Difficulty in vision	23. Rheumatic fever
4. Any ear discharge	24. Abnormal heartbeat
5. Asthma/bronchitis	25. High blood pressure
6. Hayfever /other significant allergy	26. Stroke
7. Any skin trouble	27. Serious chest pain
8. Tuberculosis	28. Any blood disease
9. Shortness of breath	29. Kidney disease
10. Coughed/vomited blood	30. Blood in urine
11. Severe abdominal pain	31. Diabetes
12. Stomach ulcer	32. Headaches/migraine
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	
HAVE YOU EVER BEEN:-	
40. Rejected for employment or insurance for medical reasons	
41. Awarded benefits for industrial injury/illness	
42. Treated for a mental condition, e.g. depression	
43. Treated for problem drinking or drug abuse	
44. Exposed to toxic substance or noise	
FOR WOMEN ONLY	
Have you ever had:-	
45. An abnormal smear	
46. Any gynaecological treatment	
47. Are you pregnant?	
48. Have you had an illness not mentioned above	
How much tobacco each day?	
Average daily alcohol consumption	
Have you ever taken illicit drugs? () PDO test all new/potential employees for illicit/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: 17/8/2022	Signature of Applicant: Tai Jull



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
165	76	27.9	120/70	68/min.	L R	DISTANT NEAR R L R L Uncorrected 6/6 6/6 6/6 6/6 Corrected		

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 +)	☒		11. CVS risk for 40 yrs. & above
☒		6. Sickie Cell test	☒		12. HIV, Hepatitis screening

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

ASSESSMENT:

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

Date:

Name (Block Capitals):

REVIEW/CONSULTATION

Date:

Name (Block Capitals):

Signature:

Epworth Screening Quest. for Sleep Apnoea

Employee Data		Date: 17/08/2022
Name: Mohammed Tajul Islam	Department/Company: Truck Driver	
I.D No. 112022-7809	Tel # 96316471	Occupation :

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)

1 as a passenger in the car for an hour without a break

1 Lying down to rest in the afternoon when circumstances permit

0 Sitting a talking with someone

0 Sitting quietly after lunch without alcohol

0 In a car, while stopped for a few minutes in traffic

Total 02

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, Mohammed Tajul Islam (Print Name) certify that to the best of my knowledge the above information supplied by me is true and correct.

Signature: Tajul Islam Date: 17/08/2022

Fitness to Work Certificate

Employee Data		Date <u>17/8/2022</u>	
Name <u>Mohammad Tajul Islam</u>		Department/Company <u>TRUCK Driver</u>	
ID No. <u>1199278090</u>	Age <u>29/4</u>	Occupation	
Type of Medical Evaluation		Mark those applying ✓	
A1 Aircraft refuelling		A6 Fire / Emergency response team work	
A2 Breathing apparatus		A7 Professional driving	
A3 Business traveller		A8 Remote location work	
A4 Catering and food preparation		A9 Transfers – group A country	
A5 Crane or forklift driving & all heavy vehicles		A10 Transfers – group B country	
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 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			
Working at height			
Pulling, pushing, or carrying weight over ____ Kg			
Ascend/descend ladders or stairs			
Operate motor vehicles, forklifts or heavy machinery			
Use of a respirator			
Repetitive twisting of valves or wrenches			
Flying			
Other (Specify)			
Temporary Unfit until			
Permanently Unfit			
Name of health advisor <u>DR. RASHID</u>	Signature	Date <u>17/8/2022</u>	Date

DEPARTMENT OF LABORATORY MEDICINE

File No: 0241331	Report No: 0625670
Name: MOHAMMAD TAJJUL ISLAM	Sample Date: 17/08/2022 Time: 11:31
	Received By: SREERAJ
Address:	Received Date: 17/08/2022 Time: 11:40
Gender: M Age: 29 Y Nationality: BANGLADESHI	Report Date: 17/08/2022 Time: 12:45
GSM No.: 96316471 ID Card No.: 112227809	Bill No: 0836318 Bill Date: 17/08/2022
Ref. By: EXTERNAL DOCTOR	Report Status: Final

INVESTIGATION	RESULT	REFERENCE RANGE
PDO MEDICAL CHECK UP BELOW 40 (Truckman)		
FBS (FASTING BLOOD SUGAR)	5.02 mmol/L	3.9 - 6.1
Method :- Hexokinase	90.36 mg/dL	70 - 110
LIPID PROFILE - SERUM		
CHOLESTEROL (TOTAL)	5.18 mmol/L	1 - 5.1
Method:-Enzymatic	200.26 mg/dl	40 - 200
HDL (HIGH DENSITY LIPOPROTEIN)	1.290 mmol/L	0.777 - 1.813
" "	49.87 mg/dl	30 - 70
LDL (LOW DENSITY LIPOPROTEIN)	2.89 mmol/L	1.295 - 4.54
" "	111.45	50 - 172
VLDL (VERY LOW DENSITY LIPOPROTEIN)	1.01 mmol/L	0.259 - 1.036
" "	38.94 mg/dl	10 - 40
RATIO (TOTAL CHOL / HDL CHOL)	4.02	3.8 - 5.9
TRIGLYCERIDES	2.20 mmol/L	0.564 - 2.146
Method : Enzymatic	194.7 mg/dl	50 - 190
LIVER FUNCTION TEST - SERUM		
TOTAL BILIRUBIN - SERUM	0.659 mg/dL	0.1 - 1
Method : Diazo	11.27 µmol/L	1 - 17.1
DIRECT BILIRUBIN - SERUM	0.209 mg/dL	0.1 - 0.5
Method : Diazo	3.57 µmol/L	1 - 8.55
SGOT (AST)-SERUM (IFCC)	20.05 U/L	Male: up to 40.0 Female: up to 32.0
SGPT (ALT)-SERUM (IFCC)	23.89 U/L	Male: 10-50 Female: 10-35
ALKALINE PHOSPHATASE (ALP)-SERUM (IFCC)	129.84 U/L	Adult : Men -40-129 :Female 35-104 Children:(Aged) 7months - 1Year :- <462 1Year - 3 Years :- <281 4 Years - 6 Years :- <269

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SREERAJ

Released By:
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DEPARTMENT OF LABORATORY MEDICINE

File No: 0241331	Report No: 0625870
Name: MOHAMMAD TAIJUL ISLAM	Sample Date: 17/08/2022 Time: 11:31
Address:	Received By: SREERAJ
Gender: M Age: 29 Y Nationality: BANGLADESHI	Received Date: 17/08/2022 Time: 11:40
GSM No.: 96316471 ID Card No.: 112227809	Report Date: 17/08/2022 Time: 12:45
Ref. By: EXTERNAL DOCTOR	Bill No: 0836318 Bill Date: 17/08/2022
	Report Status: Final

INVESTIGATION	RESULT	REFERENCE RANGE
		7 Years - 12 Years :- <300 13 Years - 17 Years(M) :- <390 13 Years - 17 Years(F) :- <187
TOTAL PROTEIN-SERUM(Colorimetric Assay)	7.72 gm/dL	6.6 - 8.7
ALBUMIN - SERUM (Colorimetric Assay)	4.90 gm/dL	3.9 - 4.9
GLOBULIN - SERUM (Calculation)	2.82 gm/dL	2.3 - 3.5
ALBUMIN / GLOBULIN RATIO - Calculation	1.74	1.2 - 1.5
GGT(GAMMA GLUTAMYL TRANSPEPTIDASE) - SERUM	24.75 U/L	Men : 8-61 Female : 5-36
RENAL FUNCTION TEST (UREA - CREATININE)		
UREA - SERUM	4.07 mmol/L	1.7 - 8.3
Method : Kinetic Assay	24.44 mg/dL	10.2 - 49.8
CREATININE - SERUM	79.92 µmol/L	44.2 - 123.7
Method : Jaffe Method	0.9 mg/dl	0.5 - 1.4
CBC (COMPLETE BLOOD COUNT)		
TOTAL WBC COUNT	6160 cells/cumm	4000 - 11000 cells/cumm
DC (DIFFERENTIAL COUNT)		
NEUTROPHILS	47.6 %	40-75%
LYMPHOCYTES	40.9 %	20-45%
EOSINOPHILS	2.3 %	2-6 %
MONOCYTES	8.9 %	2-8 %
BASOPHILS	0.3 %	0-1%
HB (HEMOGLOBIN)	16.2 gm/dl	Male-13 - 18 gm/dl Female-11- 15 gm/dl
TOTAL RBC COUNT	5.22 million/cu	MALE: 4.5-8.5million/cu FEMALE: 3.9-5.5million/cu
PLATELET COUNT	2.08 lakhs/cumm	1.0 - 4.0 lakhs / cumm
PCV (PACKED CELL VOLUME)	46.90 %	Males : 42% - 52% Females : 37% - 47%

Signature

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DEPARTMENT OF LABORATORY MEDICINE

File No: 0241331	Report No: 0625870
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Ref. By: EXTERNAL DOCTOR	Report Status: Final

INVESTIGATION	RESULT	REFERENCE RANGE
MCV (MEAN CORPUSCULAR VOLUME)	89.80 FL	76 - 96 FL
MCH (MEAN CORPUSCULAR HEMOGLOBIN)	31.00 PG	27 - 33 PG
MCHC (MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION)	34.50 g/dl	32 - 36 g/dl
ESR (ERYTHROCYTE SEDIMENTATION RATE)	06 mm/ 1st hr	MALE: 0-9 mm/ 1st hr FEMALE: 0-20 mm/ 1st hr
Capillary Photometry Technology Measures the kinetics of red cells aggregation. Clinical Laboratory and Standard Institute (CLSI) procedure for the ESR Test.		
SICKLE CELL	NEGATIVE	
URINE ROUTINE		
URINE BIOCHEMISTRY		
GLUCOSE	NIL	
PROTEIN	NIL	
KETONE	NIL	
BILIRUBIN	NIL	
pH	ACIDIC	
UROBILINOGEN	NORMAL	
URINE MICROSCOPY (Centrifugation Method)		
RED BLOOD CELLS (RBC)	NIL /hpf	
PUS CELLS	1-2 /hpf	
EPITHELIAL CELLS	NIL /hpf	
CRYSTALS	NIL /hpf	
CAST	NIL /hpf	
BACTERIA	PRESENT /hpf	
YEAST CELLS	NIL /hpf	

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البريد: 511
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X-RAY REPORT

Doc No:	0063640
Name:	MOHAMMAD TAIJUL ISLAM
Age/DOB:	29 Y Omani ID/ L.Card No:: 112227809
Sex:	Male
Referred By:	EXTERNAL DOCTOR
Clinical Diagnosis:	
X-Ray/UltraSound	CHEST X-RAY
Date:	17/08/2022
X-Ray Film No:	TRUCK
Bill No:	0836318
Charge Sheet No:	

Both lung fields are normal

Both cp angles are clear

Mediastinal shadow and bony thorax are normal

Cardiac configuration is within normal limits

Conclusion: A normal X-ray appearance

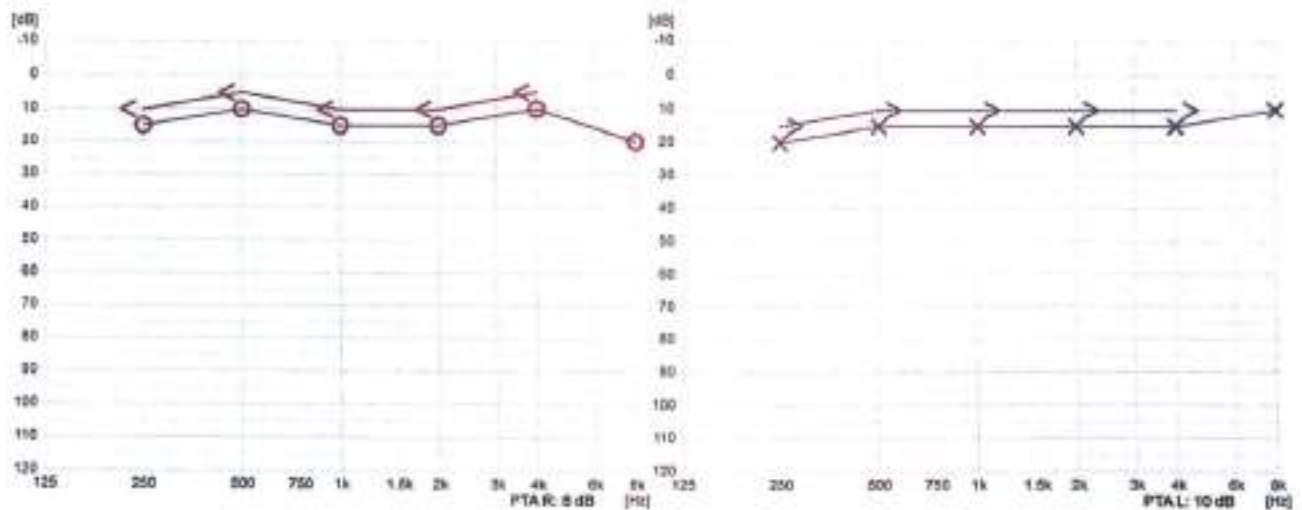
Signature:

DR. NITHIN MON CU
SPECIALIST RADIOLOGY
MOH Licence: 31068
ASTER HOSPITAL IBRI



SUPER QUALITY HEARING AID AND SPEECH THERAPY CENTER

Code: 0036310 Last name, First name: MOHAMMAD TALJUL, Birth: 15/08/2022
Test type: Tonal audiometry Test date: 17.08.2022



Legend	R	L
Air	O	X
AirMasked	Δ	□
Bone	<	>
BoneMasked	[	]
MCL	M	M
UCL	m	m
Free Field	⊗	⊗
Free FieldMasked	A	A
Binaural	B	
No response	I	

PTA
Right: 13 dB HL
Left: 15 dB HL

Comments
BILATERAL NORMAL HEARING SENSITIVITY

Signature:

Hes20 by Hedera Biomedica GmbH - www.hedera-biomedica.com



Date: 17/08/2022