TMT

ONKAR SINGH
PID : 33582 Age 52Y Male B.No : 80550
Spec.ID : 100105 SERUM 27/08/25 08:42

PEACELAND MEDICAL CENTER

MEDICAL EXAMINATION REPORT (CONFIDENTIAL)
Appendix 32: EX1 Form (Initial Examination Report)

PLEASE COMPLETE YOUR PERSONAL DETAILS IN BLOCK CAPITALS

Surname	
Forenames	ONKAR SINGH
Address	Company Name: TO
	74556219
Home telephone number	72039901

Place of examination: **MUSCAT**	Date: 27/8/2025		
If a dependant enters employee's name here: Surname:		Forenames:	
Birth date: 20/4/1973	Nationality: INDIAN	Country of birth: INDIA	Religion: HINDU

[√] Male [ ] Female	[√] Married [ ] Single [ ] Separated /Divorced	Relationship to employee: [ ] Wife [1] Son [1] Daughter	Number of children: 2

Reason for examination: **PDO medical** [√] Pre-Employment [ ] Pre Overseas

Job: CRANE OPERATOR

Area:

Name and address of family doctor (1) (2)

List your last 3 jobs (1) (2) (3)

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		√	41. Rejected for employment or insurance for medical reasons		√
3. Difficulty in vision		√	23. Rheumatic fever		√			
4. Any ear discharge		√	24. Abnormal heartbeat		√	42. Awarded benefits for industrial injury/illness		√
5. Asthma/bronchitis		√	25. High blood pressure		√			
6. Hayfever /other significant allergy		√	26. Stroke		√	43. Treated for a mental condition, e.g. depression		√
7. Any skin trouble		√	27. Serious chest pain		√			
8. Tuberculosis		√	28. Any blood disease		√	44. Treated for problem drinking or drug abuse		√
9. Shortness of breath		√	29. Kidney disease		√			
10. Coughed/vomited blood		√	30. Blood in urine		√	45. Exposed to toxic substance or noise		√
11. Severe abdominal pain		√	31. Painful passage of urine		√			
12. Stomach ulcer		√	32. Diabetes		√	**FOR WOMEN ONLY**		
13. Recurrent indigestion		√	33. Headaches/migraine		√	Have you ever had:-		
14. Jaundice or hepatitis		√	34. Dizziness/fainting		√	46. An abnormal smear		
15. Gall Bladder disease		√	35. Epilepsy		√	47. Any gynaecological treatment		
16. Marked change in bowel habits		√	36. Joints/spinal trouble		√			
17. Blood in stools (motions)		√	37. Surgical operation	✓		48. Are you pregnant?		
18. Marked change in weight		√	38. Serious accident/fracture		√	49. HAVE YOU HAD AN ILLNESS NOT MENTIONED ABOVE		
19. Varicose veins		√	39. Tropical disease		√			
20. Lump in breast/armpit		√	40. Fear of heights		√			

appendectomy 20+ years

How much tobacco each day? NO

Average daily alcohol consumption NO

Have you ever taken elicited drugs? (X)

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

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

PEACELAND MEDICAL CENTER C.R: 1118

Date: 27/8/2025 **Signature of Applicant:**

ONKAR SINGH
PID : 33582 Age 52Y Male B.No : 80550
SpecID : 100105 SERUM 27/08/25 08:42

PEACELAND MEDICAL CENTER

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	+ve scar of cholecystectomy 2024-2990
√		7. Hernial Orifices	
		8. Anus & Rectum	
√		9. Genito-urinary	
√		10. Extremities	
√		11. Musculo-skeletal	
√		12. Skin & Varicose Vns.	
√		13. C.N.S.	
		14. Breast	

HEIGHT cm	WEIGHT kg	BMI	B.P.	PULSE	HEARING	VISION	DISTANT	NEAR	Colour Vision	Blood Group
162	63	24.01	127/84	53/mins	L N R	Uncorrected / Corrected	R 6/6 L 6/6	R L	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 +)				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.)

ASSESSMENT:

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

FIT

Date: 27/8/25 Name (Block Capitals): Dr. / Nurse Dr. Shima Seyedabdollah Jafar, Cardiologist Specialist, MOH Lic. No: 21988 Signature

PEACELAND MEDICAL CENTER C.R: 1118819

REVIEW/CONSULTATION

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

مركز بلاد السلام الطبي
Peace Land Medical Center
Peace Land
بلاد السلام

Epworth Screening Quest. for Sleep Apnoea

Employee Data	ONKAR SINGH PID : 33582 Age 52Y Male B.No : 80550 SpecID : 100105 SERUM 27/08/25 08:42	Date: 27/8/2025
Name:		Department/Company: TO
I. D No.		Occupation : CRANE OPERATOR.

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
0	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	0

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, Onkar Singh *(Print Name)* certify that to the best of my knowledge the above information supplied by me is true and **correct**.

Signature: _____ **Date:** 27/8/2025

مركز بلاد السلام الطبي PEACE LAND MEDICAL CENTER C.R: 1118819

ص.ب : ١٤٠٣، الرمز البريدي : ١٣٣، دوار العذيبة مبنى ابراج الصحوة ميثى ٢، سلطنة عمان
P.O. Box 1403, Postal Code : 133, Al Azaiba, Roundabout al Sahwa Tower, Sultanate of Oman
Tel.: 24617117 / 24617148 / 24617149 هاتف : ٢٤٦١٧١١٧ / ٢٤٦١٧١٤٨ / ٢٤٦١٧١٤٩

Peace Land Medical Center
AL SAHWA TOWER 2, AZAIBA PO BOX 1403 , POSTAL CODE 133 SULTANATE OF OMAN
medicalcenter@peacelandenergy.com
CLINIC-24617116, VISA MEDICAL- 24617117
TRN :

DEPARTMENT OF LABORATORY

Patient ID	: 33582	**Doc No**	: 63396
Name	: ONKAR SINGH	**Doc Date**	: 27/08/2025 13:13
Age, Gender	: 52Y, Male	**Bill No**	: 80550
Nationality	: INDIAN	**Bill Date**	: 27/08/2025 08:33
GSM No	: 72039901	**Approved Date**	:
Doctor's Name	: DR.SHIMA	**Collected Time**	: 27/08/2025 08:42
Customer	: TRUCKOMAN LLC-SAFA PROJECT	**Recieved Time**	: 27/08/2025 08:42

Test	Result	Unit	Normal Range
TRUCK OMAN-PDO MEDICAL CHECKUP ABOVE 50 YRS			
COMPLITE BLOOD COUNT			
RBC	4.6	x10^12/L	Male 4.38 -6.0 x 10^12/L Female 4.0- 5.2x10^12/L
HAEMOGLOBIN	13.1	gm %	Male 13 - 17 gm % Female 11 - 14 gm %
HCT	39.9	%	Male 39.30 -50.00 % Female 37 -47 %
MCV	85	fl	84-94 fl
MCH	28	pg	27 - 33 pg
MCHC	32.8	g/dl	29.6 - 35.6 %
WBC COUNT	5.5	x 10^9/L	4.0 - 11.0 x 10^9/L
DIFFERENTIAL COUNT			
NEUTROPHIL	66	%	40-70 %
LYMPHOCYTE	30	%	20-45 %
EOSINOPHIL	01	%	1-6 %
MONOCYTE	03	%	2-8%
BASOPHIL	00	%	0-1%
PLATELET	195	x 10^9/L	150 - 450 x 10^9/L
SICKLE CELL TEST	NEGATIVE		
LIVER FUCTION TEST			
ALKALINE PHOSPHATASE	56	U/L	53 - 128 U/L
S. BILIRUBIN TOTAL	0.73	mg/dl	0 - 2.0 mg/dl
S.G.O.T.	15.5	U/L	0 - 35.0 U/L
S.G.P.T.	29	U/L	10 - 45 U/L
ALBUMIN.	4.08	g/dl	3.50 - 5.20 g/dl
TOTAL PROTEIN.	6.45	g/dl	6 - 8 g/dl
S. BILIRUBIN DIRECT	0.17	mg/dl	0.0 - 0.20 mg/dl
RENAL FUNCTION TEST			
UREA	21.3	mg/dl	18.0 - 55.0 mg/dl
S.CREATININE	0.7		0.70 -1.30 mg/dl
S.URIC ACID	5.1	mg/dl	3.5 - 7.2 mg/dl
LIPID PROFILE.			

Remarks:

Reported By:
Lab Tech

Sr. Lab Technologist

Verified By:
Lab Tech

Sr. Lab Technologist

Approved By:
Lab Tech

Printed at: 27/08/202513:13:26

Peace Land Medical Center
AL SAHWA TOWER 2, AZAIBA PO BOX 1403 , POSTAL CODE 133 SULTANATE OF OMAN
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TRN :

DEPARTMENT OF LABORATORY

Patient ID	: 33582	**Doc No**	: 63396
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Doctor's Name	: DR.SHIMA	**Collected Time**	: 27/08/2025 08:42
Customer	: TRUCKOMAN LLC-SAFA PROJECT	**Recieved Time**	: 27/08/2025 08:42

Test	Result	Unit	Normal Range
Total Cholesterol	173	mg/dl	0.0 - 200 mg/dl
Triglyceride	90	mg/dl	0.0 - 150 mg/dl
HDL - CHOL	48.8	mg/dl	35.0 - 79.0 mg/dl
LDL - CHOL	106	mg/dl	< 100 mg/dl
VLDL	18	mg/dl	2.0 - 30 mg/dl
FASTING BLOOD SUGAR	92.9	mg/dl	74 - 100 mg/dl
URINE ROUTINE ANALYSIS			
PHYSICAL			
Quantity	5	ml	
Colour	Yellow		
Sp. Gravity	1.010		
pH	Acidic		
Appearance	Clear		
CHEMICAL			
Nitrite	Negative		
Protein	Negative		
Glucose	Negative		
Ketones	Negative		
Urobilinogen	Normal		
Bilirubin	Negative		
Blood	Negative		
MICROSCOPIC			
PUS CELLS	1-2		
EPITHELIAL CELLS	1-2		
RBC	0-1		
CASTS	NIL		
CRYSTALS	NIL		
BACTERIA	NIL		
OTHERS	NIL		

Remarks:

Reported By:
Lab Tech

Sr. Lab Technologist

Verified By:
Lab Tech

Sr. Lab Technologist

Approved By:
Lab Tech

Printed at: 27/08/202513:13:26

ONKAR SINGH
PID : 33582 Age 52Y Male B.No : 80550
FBS
SpecID : 100105 SERUM 27/08/25 08:42

Results

Estimated 10-year Global CVD Risk

7.9%

Risk Category

Low Risk

Estimated Vascular Age

51 Years

Treatment Guidelines

ATP-III (2004)
Treatment Targets
LDL <160 mg/dL (<4.14 mmol/L)
Non-HDL <190 mg/dL (<4.93 mmol/L)

CCS (2009)
Initiate Pharmacotherapy if
LDL >5 mmol/L (>193 mg/dL)
TChol/HDL-C >6 mmol/L (>231 mg/dL)

Treatment Targets
≥50 % decrease in LDL-C

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

PEACE LAND MEDICAL CENTER
C.R: 1118619

2025-08-27 09:00:46 6 Channel + 1 Rhythm Report

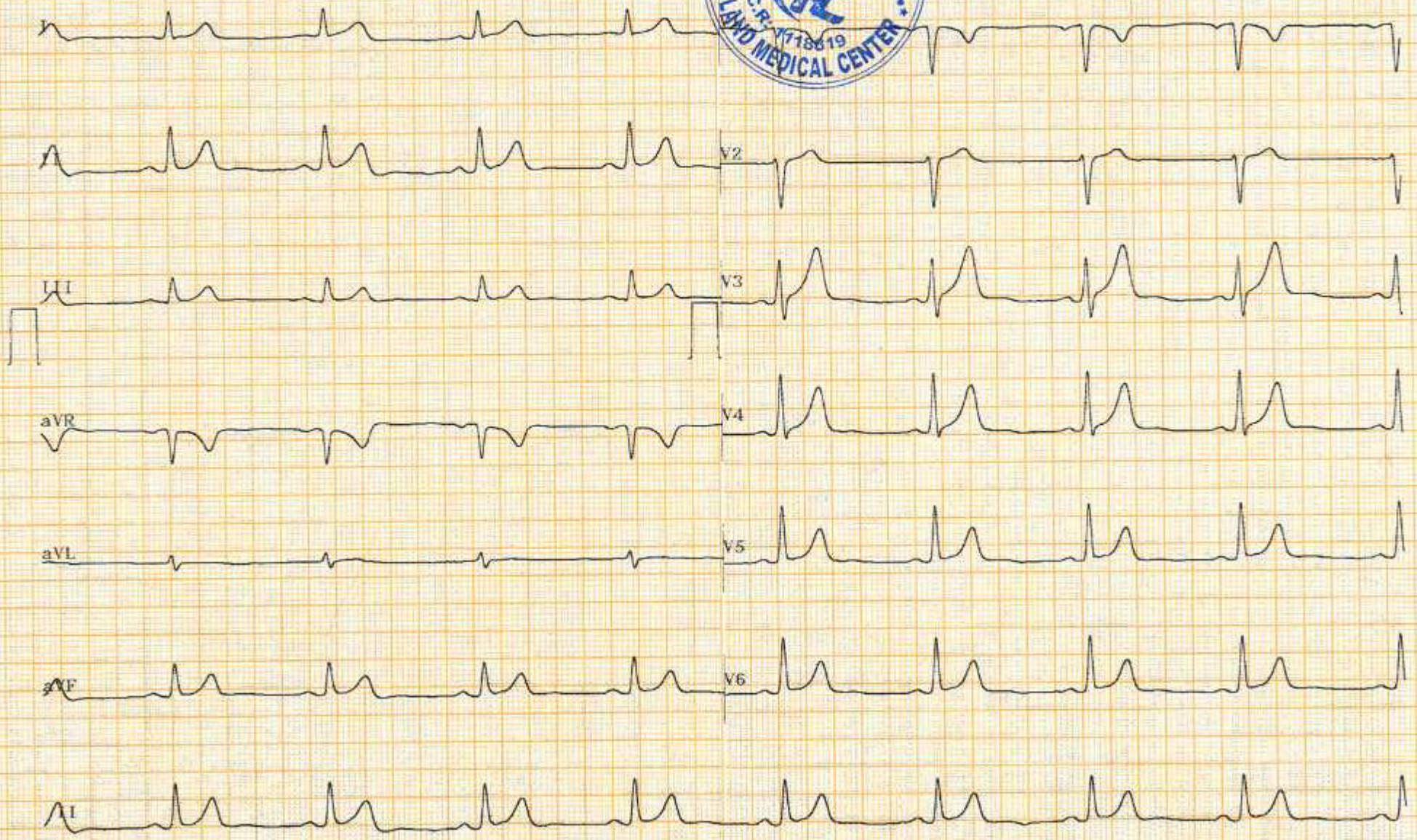
Hospital:
Prescribed by:

ID :
Name:
yrs. /
cm / kg

Heart Rate: 53bpm
PR Int.: 160 ms
QRS Dur.: 90 ms
QT/QTc: 416/390 ms
P-R-T axes:
67 58 57

ONKAR SINGH
PID : 33582 Age 52Y Male B.No : 80550
SpecID : 100105 SERUM 27/08/25 08:42

PEACE LAND MEDICAL CENTER
C.R. 1118619



0.1Hz - 100Hz AC50Hz EMC All Channels:10.0mm/mV 25.0mm/sec. CARDIO-M Ver5.10M.30 Medical Econet GmbH.

مركز بلاد السلام الطبي
Peace Land Medical Center
Peace Land
بلاد السلام

Fitness for work certificate

Employee Data	ONKAR SINGH P.ID : 33582 Age 52Y Male B.No : 80550 SpecID : 100105 SERUM 27/08/25 08:42	Date	27/8/2025
Name		Department/Company	TO
I.D No.		Occupation	CRANE OPERATOR.
Type of Medical Ev...			

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)			FIT
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			
Puling, 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 (Specifiy)			
Temporary Unfit until			
Permanently Unfit			Date 27/8/25
Name of health advisor Signature			Dr. Shima Seyedabdollah Jafar Cardiologist Specialist MOH Lic No. 21962

PEACE LAND MEDICAL CENTER C.R: 1/118819

ص.ب : ١٤٠٣، الرمز البريدي : ١٣٣، دوار العذيبة مبنى ابراج الصحوة مبنى أ، سلطنة عمان
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STS Summary Report

PEACELAND MEDICAL CENTER

Name: **ONKAR SINGH** ID: 01270825 Tested On: 27/08/2025,09:23 AM

Details: 52years(Male), 63Kg,162cm Doctor: **Dr. SHIMA**

Test Summary Report

Target HR = 168	HR achieved = 153 (91%)	Peak Ex = Exercise 4	Max ST deviation = 11.23(Lead V2)
Protocol = BRUCE	Total time = 16:31	Excercise time = 11:34	Recovery time = 03:02

Object of test	: A 52 YEAR OLD MALE; OCCUPATIONAL HEALTH EXAMINATION	*Ex tolerance*	:
Risk factor	:	*Ex Arrhythmia*	: NONE
Activity	:	*Hemo Response*	: NL
Other Investigation	:	*Chrono response*	: NL

Reason for Termination : FATIGUE

Stagewise Summary

Stage Name	*Duration (mm:ss)*	*HR at the end of stage*	*Max ST (mm)*	*Min ST (mm)*	*Speed km/hr*	*Slope (%)*	*METS*	*sys/dia(map) (mmHg)*	*RPP*	*Comments*
Supine	01:20	72	11.23(V2)	---	0.0	0.0	0.00	130/80(96)	8840	
Waiting for Exercise	00:35	65	4.03(V5)	-1.38(AVR)	0.0	0.0	0.00	---/---(---)		
Exercise 1	03:00	88	2.49(V3)	-1.28(AVR)	2.7	10.0	5.10	140/80(100)	12320	
Exercise 2	03:00	98	2.69(V3)	-1.41(AVR)	4.0	12.0	7.10	150/80(103)	15150	
Exercise 3	03:00	118	11.23(V2)	-5.52(V2)	5.5	14.0	10.00	160/80(106)	18880	
Peak Exercise 4	02:34	153	4.40(V2)	-2.64(AVF)	6.8	16.0	14.00	170/80(110)	26010	
Recovery 1	01:00	98	5.62(V2)	-2.75(AVF)	6.8	16.0	0.00	160/80(106)	24480	
Recovery 2	01:00	90	3.72(V2)	-1.51(AVR)	6.8	16.0	0.00	150/80(103)	14550	
Recovery 3	01:00	81	2.43(V3)	-1.07(AVR)	6.8	16.0	0.00	130/80(96)	11570	
Recovery 4	00:02	0	---		6.8	16.0	0.00	---/---(---)		

Medication: *History:*

PEACE LAND MEDICAL CENTER C.R: 1118819

BPL DYNATRAC ULTRA *Technician:* SHILJITH *Done By:* *Confirmed by:*

STS Summary Report

PEACELAND MEDICAL CENTER

Name: **ONKAR SINGH**
Details: 52years(Male), 63Kg,162cm

ID: 01270825
Doctor: **Dr. SHIMA**

Tested On: 27/08/2025,09:23 AM

Observations: A 52 YEAR OLD MALE UNDERWENT EXERCISE TOLERANCE TEST; UTILIZING BRUCE PROTOCOL.
THE PATIENT DID NOT COMPLAIN OF CHEST PAIN, SOB OR DIZZINESS.
COMPLETED 11:34 MINUTES OF EXERCISE (STAGE 4). ACHIEVED 10.60 METS. AVERAGE FUNCTIONAL CLASS.
RESTING HEART RATE 75 BPM AND INCREASED TO 153 BPM WHICH IS 91% OF THE MAXIMUM AGE-PREDICTED HEART RATE.
RESTING BLOOD PRESSURE: 140/80 MMHG AND INCREASED TO 170/80 MMHG. NEITHER HYPERTENSIVE BLOOD PRESSURE RESPONSE NOR HYPOTENSION.
RESTING ECG SHOWED NORMAL SINUS RHYTHM.
EXERCISE ECG SHOWED NO SIGNIFICANT ST-T WAVE CHANGES.
REASON FOR TERMINATION WAS FATIGUE.

Final Impression: THE TEST IS NEGATIVE FOR EXERCISE-INDUCIBLE ISCHEMIA.

Dr Shima Satyabhushanlal
Cardiology Specialist
MOH Lic. No. 21952

مركز بلاند السلام الطبي
PEACE LAND MEDICAL CENTER
C.R: 1118819

BPL DYNATRAC ULTRA *Technician:* SHILJITH *Done By:* *Confirmed by:*