ترك عمان
TRUCKOMAN

Schlumberger

Medical Fitness Certificate

Name of the Examined employee: QAISAR MEHMOOD

Age: 39

ID NUMBER:

Job Title:

Date of Medical Examination: 19.08.2021

Examining Physician:

Medical Centre: APOLLO HOSPITAL MUSCAT

Company:

Assessment Result:

Fit to work without restrictions

This Certificate is valid for 2 years from the date of medical examination

Fitness Classifications:

- Fit to work without restrictions
- Fit to work with restriction
- Unfit to work Temporarily of Definitely

Restrictions List:

R1: Unfit to work offshore, on marine vessels and in remote locations.
R2: Unfit for Lifting and strenuous efforts.
R3: Unfit to work in certain countries, check with geomarkethealth advisor.
R4: Unfit to work in jobs requiring precise color vision.
R5: Unfit to work in job with high level of noise.
R6: Unfit to work in high risk of malaria countries.
R7: Unfit to work in extreme heat.
R8: Unfit to work in extreme cold.
R9: Contact Geomarket health advisor/international medical coordinator – there exist specific restriction.
R10: Unfit to work for a temporarily of time until further notice.
R11: Unfit to work in jobs requiring good visual acuity (eg: driving company vehicle).
R12: Fit only for defined period of time (1, 3 or 6 months) and must be reassessed and fitness redefined.
R13: Unfit to drive company vehicle.
R14: Unfit to fly long haul flights.
R15: Unfit to work in heights and confined spaces.

Examining Physician Stamp and signature

Dr. REHMAN MANSOOR SOLANKI
MEDICAL OFFICER
MOH Licence No.: 14330
APOLLO HOSPITAL MUSCAT

Hospital/Clinic Seal

مستشفى أبولو مسقط
Apollo Hospitals
Sultanate of Oman, C.R.: 1232347
APOLLO HOSPITAL MUSCAT

Schlumberger

CONFIDENTIAL MEDICAL
TO BE COMPLETED BY THE EMPLOYEE

Med-check History Form		Name:	Qaisar Mehmood
		GIN #	6911
Place of examination: Apollo Hospital	Date: 19/8/2021	Mobile #	79342842
Age: 39	Nationality: Pakistani	Blood Group	
☑ Male ☐ Female	☐ Married ☐ Single ☐ Separated /Divorced	Number of children:	

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

How much tobacco each day?	NIL	Average daily alcohol consumption	NIL

Have you ever taken elicited drugs? (No)

FAMILY HISTORY: Diabetes (No) Tuberculosis (No) Epilepsy (No) Asthma (No) Eczema (No)
Heart disease (No) High blood pressure (No) Stroke (No) Blood Disease (No) Cancer (No)

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's Doctors, and the details sent to them by the examining Doctor.

Date: 19/8/2021

Signature of Applicant: Qaisar.

Schlumberger

CONFIDENTIAL MEDICAL

TO BE COMPLETED BY THE EXAMINING PHYSICIAN

PHYSICAL EXAMINATION IF ABNORMAL, PLEASE DETAIL

Visual Fields:		Color Vision:	N
Speech:		Whisper test:	
Near Vision Right eye:	N/6	Near Vision Left eye:	N/6
Distant Vision Left eye:	6/6	Distant Vision Right eye:	6/6

Height: 172.	Weight: 76.	BMI: 25.7.	BP: 120/90.	Pulse: 54/mts

Body System/Organ	N	A	Abnormality if any
Eyes and pupils	✓		
Ear/nose/throat	✓		
Teeth and mouth	✓		
Lungs and chest	✓		
Cardiovascular	✓		
Abdomen	✓		
Hernial orifices	✓		
Anus and rectum	✓		
Genito-urinary	✓		
Extremities	✓		
Musculoskeletal	✓		
Skin/varicose viens	✓		
Neurological	✓		
Mental fitness	✓		
Breast			

Schlumberger CONFIDENTIAL MEDICAL

TO BE COMPLETED BY THE EXAMINING PHYSICIAN

Name: Qaisar Mehmood	Age:	Sex	Company	GIN
	39	M		

Past Medical History:	Blood Group

Allergies:

Vaccination		Date of Initial Injection	Booster Due Date
Hepatitis A;			
Hepatitis B:			
Typhoid Fever			
Influenza			

Tests Results	
Audiogram:	Normal
DSU 5 Panel	

ECG:	WNL
Chest X-Ray	WNL

Blood Investigations:

RBCs	5.90	4.20-6.30 X10^6/UL	SGOT	21.00	Male:10-50 Female:10-35 U/L
WBCs	9.74	4.0-11.0X10^3/UL	SGPT	27.40	Male:Up to 41 Female:10-35 U/L
NEUTRO	44.50	37-72%	GGT	6.80	0-50/UL
EOSINO	6.30	0-6%	FBS:	86.90	60-110 mg/dl
BASO	0.50	0-1%	CHOLESTEROL:	175.00	Up to 200 mg/dl
LYMPHO	39.90	10-58%	HDL	46.80	20-60 mg/dl
MONO	8.80	0-14%	LDL	111.32	Upto 130 mg/dl
HEMATOCRIT	53.50	37-51%	TRIGLYCERIDES	85.40	35-175 mg/dl
HEMOGLOBIN	18.00	Male: 13.5-18.0 Female: 11.5-16.0 g/dl	CREATININE	0.98	Male :0.7-1.2 mg/dl Female: 0.5 -0.9mg/dl
ESR	07	Male: 0-10 mm/hr Female: 0-20 mm/hr	URIC ACID		Male: 3.6-7.7 mg/dl Female: 2.5-6.8 mg/dl

Urine Analysis

Blood	NEGATIVE	Sugar	NEGATIVE
Albumin	NEGATIVE	Others	NORMAL

Stool Analysis

Parasites	NIL	Blood:	NIL

Comments	HLP, Adv. LSM & repeat FLP after 3 months

Examining Physicians:

Dr. REHMAT MANSOOR SOLANKI
MEDICAL OFFICER
MOH Licence No.: 14330
APOLLO HOSPITAL MUSCAT

Hospital/Clinic Seal

Apollo HOSPITALS
Sultanate of Oman, C.R.: 1758510
APOLLO HOSPITAL MUSCAT

DEPARTMENT OF LABORATORY SERVICES

File No:	0351511	**Report No:**	0476410		
Name:	QAISAR MEHMOOD	**Sample Date:**	19/08/2021	**Time:**	11:09
		Received Date:	19/08/2021	**Time:**	11:09
Address:		**Report Date:**	19/08/2021	**Time:**	12:40
Gender: M **Age:** 39 Y **Nationality:** PAKISTANI		**Bill No:**	1004444	**Bill Date:**	19/08/2021
GSM No.: 79342842 **ID Card No.:** 76424019		**Company:**	TRUCK OMAN LLC		
Doctor: DR.MUHAMMAD SAUD SHERZAMAN					

INVESTIGATION	RESULT	REFERENCE RANGE
TRUCK OMAN ROUTINE MEDICAL CHECK UP		
Fasting Blood Glucose	86.90 mg/dL	ADA Guidelines Normal <100 mg/dl Pre Diabetes 100-125 mg/dl Diabetes >126 mg/dl
ESR	07 mm/hr	Male : 0-10 mm/hour Female: 0-20 mm/hour
S.Creatinine	0.98 mg/dL	Male : 0.7 - 1.2 mg/dl Female : 0.5 - 0.9 mg/dl
CBC		
WBC COUNT	9.74 10^3uL	4.0-11.0x10^3/mm^3
RBC	5.90 10^6/uL	4.20 - 6.30 10^6/uL
HGB	18.00 g/dl	male 13.5 -18.0 g/dl female 11.5 -16.0 g/dl
HCT	**53.50 %**	37.0 - 51.0 %
MCV	90.70 fL	80.0 - 97.0 fL
MCH	30.50 pg	26.0 - 32.0 pg
MCHC	33.60 g/dL	31.0 - 36.0 g/dL
RDW	12.40 %	11.0 - 14.5 %
NEUT#	4.33 10^3/uL	1.50 - 7.00 10^3/uL
LYMPH#	3.89 10^3/uL	0.60 - 4.10 10^3/uL
MONO#	**0.86 10^3/uL**	0.00 - 0.70 10^3/uL
EOS#	**0.61 10^3/uL**	0.00 - 0.40 10^3/uL
BASO#	0.05 10^3/uL	0.00 - 0.10 10^3/uL
NEUT%	44.50 %	37.0 - 72.0 %

Reported By: *Verified By:*

DHANYA
Lab Technologist

Lab Technologist

Dr.Muhammad Azhar Imam
Specialist Pathologist

MOH License No: 7129
Printed at: 19/08/2021 12:40:40 PM

info@apollomuscat.com : البريد الإلكتروني ص.ب ١٠٩٧ ، الرمز البريدي ١٣١ ، سلطنة عمان هاتف : ٢٤٧٨٧٧١٦ (+٩٦٨) فاكس : ٢٤٧٠٠٠٩٣ (+٩٦٨)
C.R. No.: 1792547, P.O. Box : 1097 , P.C.: 131, Al Hamriya, Sultanate of Oman, Tel. (+968) 24787766 (5 Lines), Fax : (+968) 24700093, E-mail : info@apollomuscat.com
VATIN : OM1100036100 رقم تعريف ضريبة القيمة المضافة : OM ١١٠٠٠٣٦١٠٠

DEPARTMENT OF LABORATORY SERVICES

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Name:	QAISAR MEHMOOD	**Sample Date:**	19/08/2021	**Time:**	11:09
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Gender: M **Age:** 39 Y **Nationality:** PAKISTANI		**Bill No:**	1004444	**Bill Date:**	19/08/2021
GSM No.: 79342842 **ID Card No.:** 76424019		**Company:**	TRUCK OMAN LLC		
Doctor: DR.MUHAMMAD SAUD SHERZAMAN					

INVESTIGATION	RESULT	REFERENCE RANGE
LYMPH%	39.90 %	10.0 - 58.5 %
MONO%	8.80 %	0.0 - 14.0 %
EOS%	**6.30 %**	0.0 - 6.0 %
BASO%	0.50 %	0.0 - 1.0 %
PLATELET	206.00 10^3/uL	140 - 440 10^3/uL
LFT		
AST (SGOT)	27.00 U/L	Men : 10 - 50 U/L Female : 10 - 35 U/L
ALT (SGPT)	27.40 U/L	Men : Up to 41 U/L Female : 10 - 35 U/L
GGT	6.80 U/L	0 - 50 U/L
LIPID PROFILE		
Total Cholesterol	175.20 mg/dL	< 200 mg/dL
Triglyceride	85.40 mg/dL	<150 mg/dl
HDL - CHOL	**46.80 mg/dl**	>45 mg/dl
LDL - CHOL	**111.32 mg/dl**	<100 mg/dl
Total Chol/HDL Chol ratio	3.74	Desirable < 4
URINE ROUTINE ANALYSIS		
PHYSICAL		
Quantity	40 ml	
Colour	Pale yellow	
Sp. Gravity	1.020	
pH	Acidic	

Reported By:

DHANYA
Lab Technologist

Verified By:

Lab Technologist

Dr.Muhammad Azhar Imam
Specialist Pathologist

MOH License No: 7129
Printed at: 19/08/2021 12:40:40 PM

س.ت : ١٧٩٢٥٤٧ , ص.ب : ١٠٩٧ , القمرية الرمز البريدي : ١٣١ , سلطنة عمان هاتف : ٢٤٧٨٧٧٦٦ (٩٦٨+) فاكس : ٢٤٧٠٠٠٩٣ (٩٦٨+) البريد الإلكتروني : info@apollomuscat.com
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Gender:	M **Age:** 39 Y **Nationality:** PAKISTANI	**Bill No:**	1004444	**Bill Date:**	19/08/2021
GSM No.:	79342842 **ID Card No.:** 76424019	**Company:**	TRUCK OMAN LLC		
Doctor:	DR.MUHAMMAD SAUD SHERZAMAN				

INVESTIGATION	RESULT	REFERENCE RANGE
Appearance	Clear	
CHEMICAL		
Glucose	Negative	
Protein	Negative	
Ketones	Negative	
Blood	Negative	
Bilirubin	Negative	
Urobilinogen	Normal	
Nitrite	Negative	
MICROSCOPIC		
Pus Cell	2 - 3 Cells/hpf	
RBC	NIL	
Epithelial Cells	Few cells/hpf	
Casts	NIL	
Crystals	NIL	
Others	NIL	
STOOL ROUTINE ANALYSIS		
PHYSICAL		
Colour	Brownish	
Consistency	Soft	
Reaction	Alkaline	
MICROSCOPIC		
Ova:	NIL	
Cyst:	NIL	

Reported By: *Verified By:*

DHANYA
Lab Technologist

Lab Technologist

Dr.Muhammad Azhar Imam
Specialist Pathologist

MOH License No: 7129
Printed at: 19/08/2021 12:40:40 PM

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C.R. No.: 1792547, P.O. Box : 1097 , P.C.: 131, Al Hamriya, Sultanate of Oman, Tel. (+968) 24787766 (5 Lines), Fax : (+968) 24700093, E-mail : info@apollomuscat.com
VATIN : OM1100036100 OM ١١٠٠٠٣٦١٠٠ رقم تعريف ضريبة القيمة المضافة

DEPARTMENT OF LABORATORY SERVICES

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GSM No.:	79342842 **ID Card No.:** 76424019	**Company:**	TRUCK OMAN LLC		
Doctor:	DR.MUHAMMAD SAUD SHERZAMAN				

INVESTIGATION	RESULT	REFERENCE RANGE
Pus Cells:	0-1 Cells/hpf	
RBCs	Nil Cells/hpf	
Others	Nil	

Reported By:

DHANYA
Lab Technologist

Verified By:

Lab Technologist

Dr.Muhammad Azhar Imam
Specialist Pathologist

MOH License No: 7129
Printed at: 19/08/2021 12:40:40 PM

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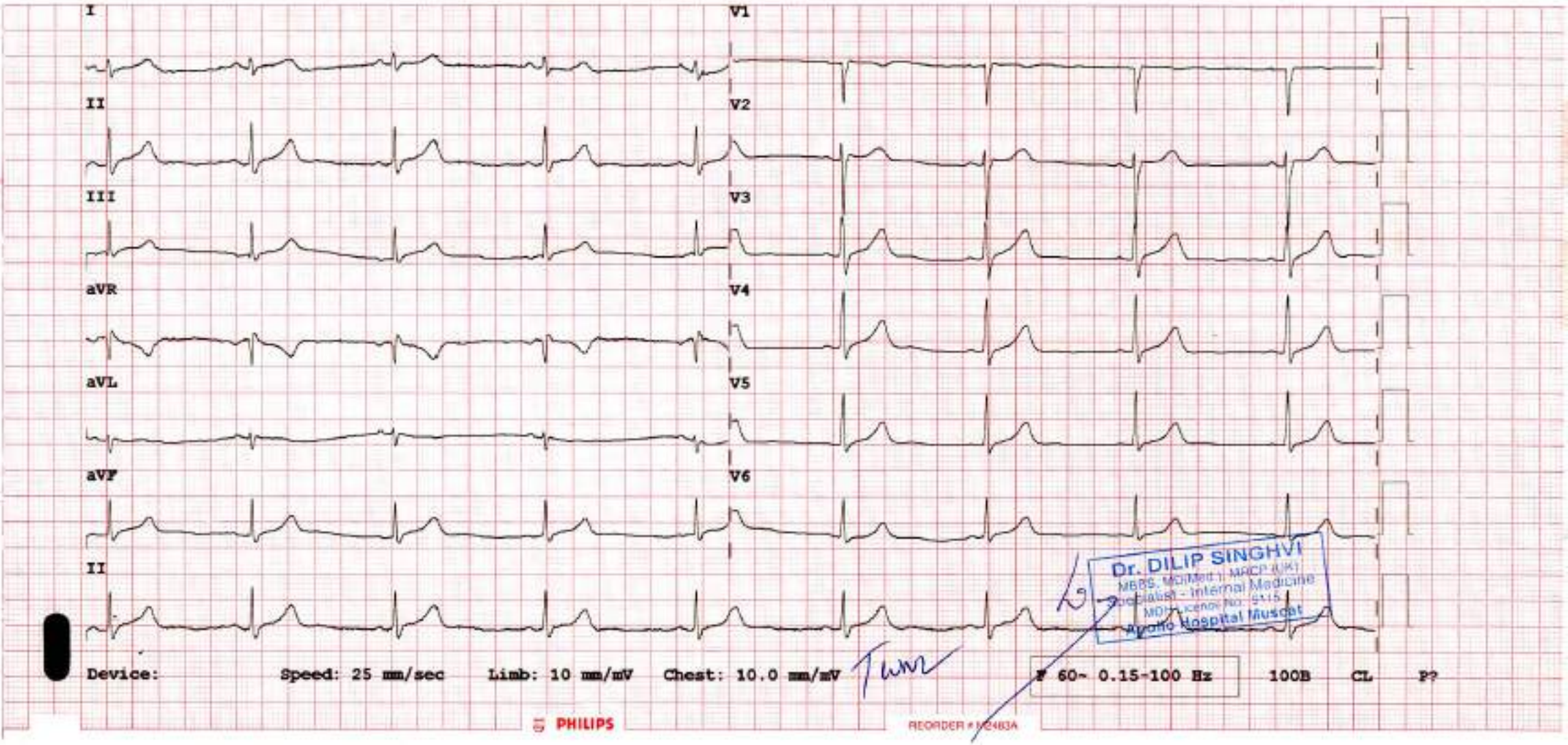
رقم تعريف ضريبة القيمة المضافة OM ١١٠٠٠٣٦١٠٠

0351511 qaiser mehmood 19-Aug-21 12:01:23 PM
39 Years Male APOLLO HOSPITAL

Rate 53

PR 136
QRSD 97
QT 435
QTc 409

--AXIS--
P 10
QRS 69
T 65
12 Lead; Standard Placement



Dr. DILIP SINGHVI
MBBS, MD(Med.), MRCP (UK)
Specialist - Internal Medicine
MOH Licence No: 9415
Apollo Hospital Muscat

Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz 100B CL P?

PHILIPS

REORDER # M2483A

Apollo HOSPITALS
TOUCHING LIVES
MUSCAT
P.O. Box : 1097, Al-Hamriya, Postal Code : 131
Muscat, Sultanate of Oman
Tel.: 2478 7766, Fax : 2470 0093

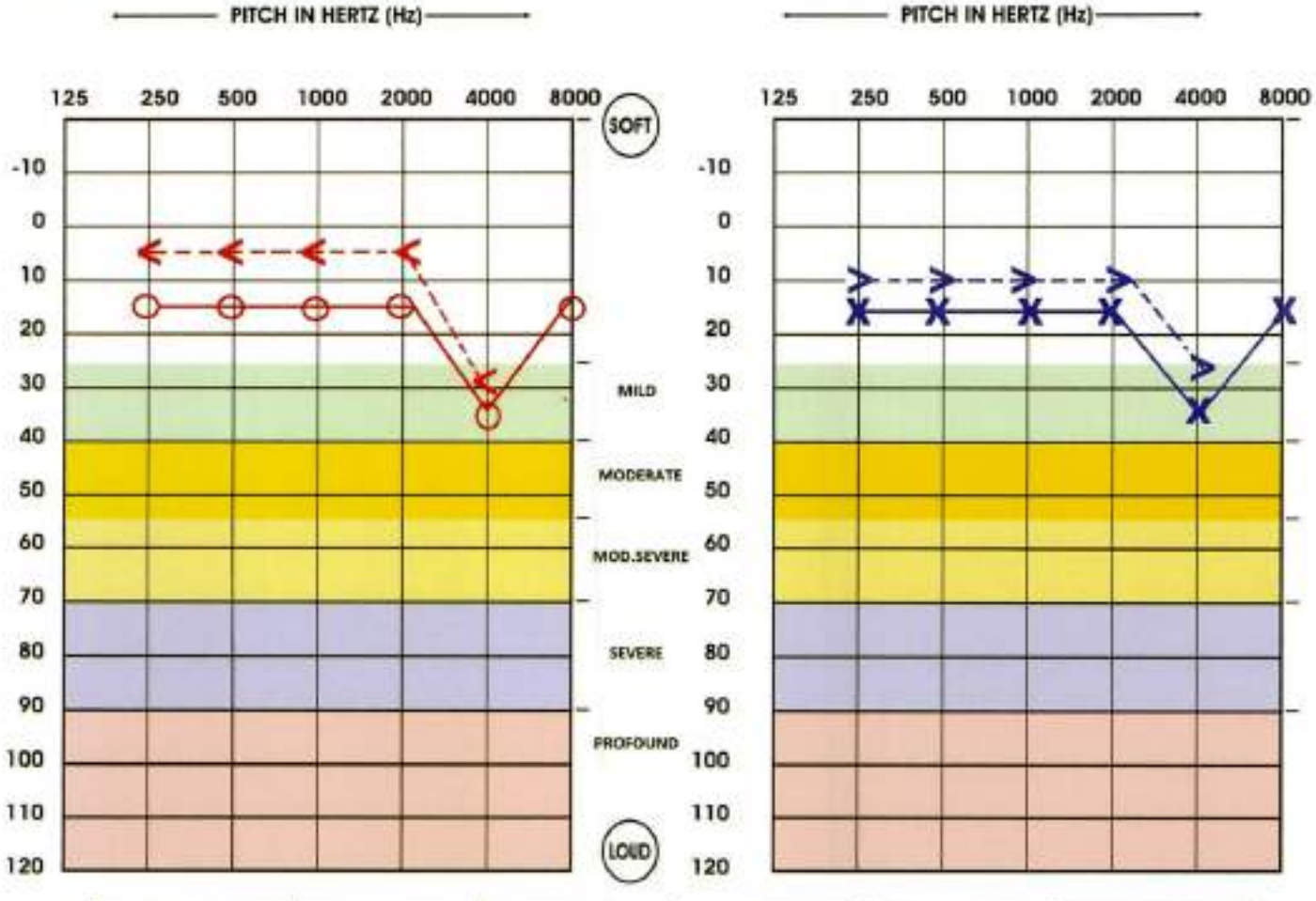
AUDIOGRAM
EXAMINATION SHEET

FILE NO : 0351511 BILL NO : ..... DATE : 19/8/2021

NAME : QAISAR MEHMOOD AGE / SEX : 39/M

COMPANY : TRUCK OMAN DOB : .....

CONSULTANT (REF) : .....



WEBER					

						SPECIAL TESTS			
dBhL	PTA	SRT	SIS(%)	MCL	UCL	SISI	TDT	MLB/BLB	OAE
RIGHT									
LEFT									

INTERPRETATION :

HEARING SENSITIVITY WITHIN NORMAL LIMITS WITH A DIP AT 4KHz (NIHL)

SHAKIR OMAN
AUDIOLOGIST
MOH Licence No. ...
Apollo Hospital Muscat

RECOMMENDATION :

USE EAR PROTECTIVE DEVICES(EAR PLUGS)

AUDIOLOGIST

مستشفى ابولو مسقط ش.م.م
Apollo Hospital Muscat L.L.C
Associated to Apollo Hospital Group India
بالتنسيق مع مجموعة مستشفيات ابولو بالهند

NAME	:QAISAR MEHMOOD	**AGE**	:39 Y(19/12/1981)
GENDER	:Male	**PATIENT ID**	:351511
COMPANY	:TRUCK OMAN LLC (Credit)	**DATE**	:21/08/2021 10:48 AM
CONSULTANT	:DR.MUHAMMAD SAUD SHERZAMAN	**BILL NO**	:1004444
BILL DATE	:19/08/2021		
TEST NAME	:CHEST PA		

X-RAY CHEST PA VIEW

Bilateral lung fields are clear. No mass lesion or opacification.

Trachea is mid line.

Bilateral hilar shadows are symmetrical and normal in size .

Cardiac silhoutte is normal. No signs suggestive of cardiac enlargement .

Bony thoracic cage appears normal.

No Soft tissue mass or calcification can be seen

Bilateral costophrenic angles are clear.

IMPRESSION:

- **Normal radiograph of the chest.**

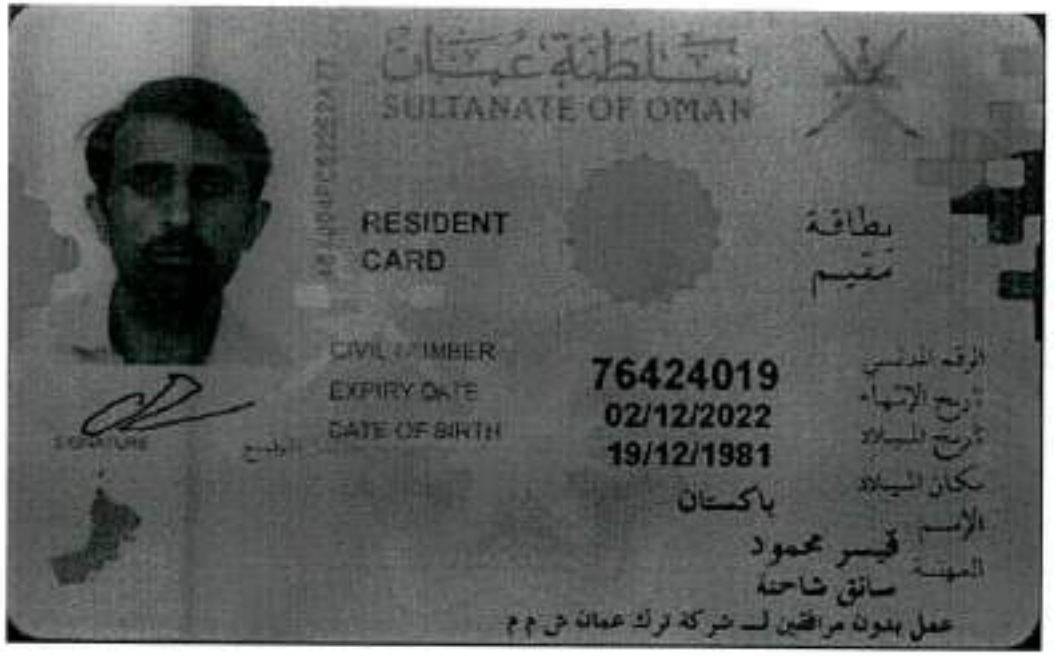
Please correlate clinically & other investigation.

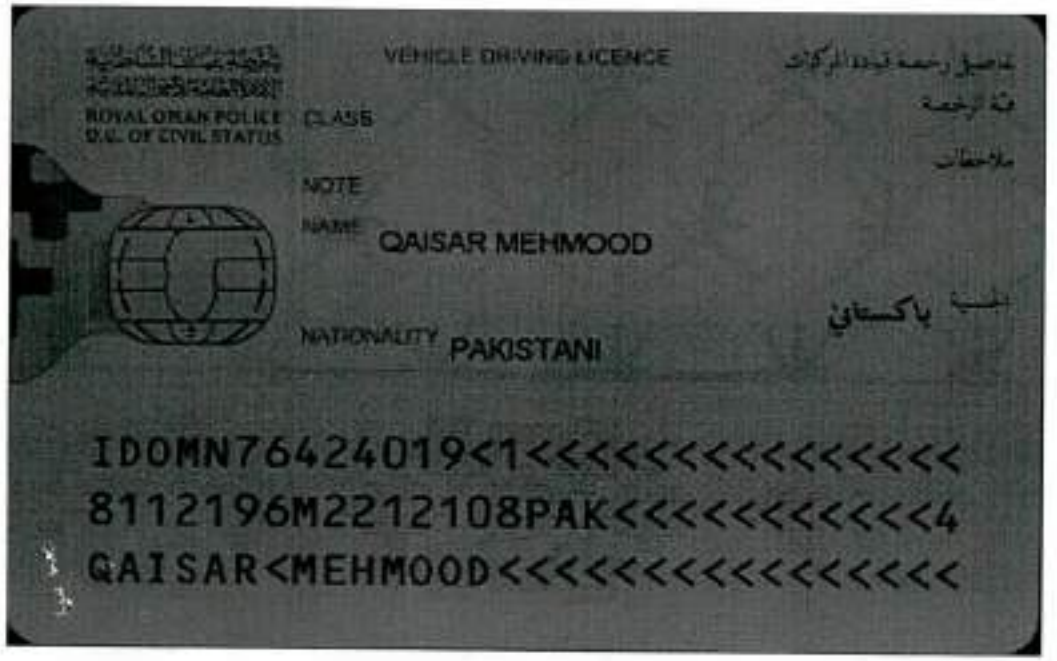
Please note: This is a imaging study and has its own limitations. This is a opinion based on image interpretation and it is not a diagnose on itself .Impression should be considered as professional opinion & correlated with clinical evidence ,reconfirmed by further investigations and relevant data as indicated .If possible the findings should be reconfirmed on higher resolution imaging, special sections and sequences and with other modalities.

Dr. WASSAN ABDUL REHMAN
SPECIALIST - RADIOLOGIST
MOH Licence No.: 14883
Apollo Hospital Muscat

DR. WASSAN A KHUDHAIR AL SAEDI

info@apollomuscat.com : البريد الإلكتروني ص.ت :١٧٩٢٥٤٧, ص.ب : ١٠٩٧ , الحمرية,الرمز البريدي :١٣١ , سلطنة عمان , هاتف :٢٤٧٨٧٧٦٦(+٩٦٨) فاكس:٢٤٧٠٠٠٩٣(+٩٦٨)
C.R. No.: 1792547, P.O. Box : 1097, Al Hamriya, P.C.:131, Sultanate of Oman, Tel. (+968) 24787766 (5 Lines), Fax : (+968) 24700093, E-mail : info@apollomuscat.com
VATIN OM1100036100 :رقم التسجيل الضريبي
Tax Card No. : 8251325 :رقم الطبا قةالضريبية


سلطنة عمان
SULTANATE OF OMAN
RESIDENT
CARD
بطاقة
مقيم
CIVIL NUMBER
EXPIRY DATE
DATE OF BIRTH
76424019
02/12/2022
19/12/1981
الرقم المدني
تاريخ الإنتهاء
تاريخ الميلاد
مكان الميلاد
الإسم
المهنة
باكستان
قيصر محمود
سائق شاحنة
عمل بدون مرافقين لـ شركة ترك عمان ش م م


ROYAL OMAN POLICE
D.G. OF CIVIL STATUS
VEHICLE DRIVING LICENCE
تفاصيل رخصة قيادة المركبات
CLASS
NOTE
NAME
QAISAR MEHMOOD
NATIONALITY
PAKISTANI
باكستاني
IDOMN76424019<1<<<<<<<<<<<<<<<
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