6304

PLEASE COMPLETE YOUR PERSONAL DETAILS IN BLOCK CAPITALS

مركز الرسيل الصحي
RUSAYL HEALTH CENTRE
NIZR, FAHUD, QARNALAY, BHAJA, SAHRAYAL, KARYUL

INITIAL EXAMINATION REPORT

Surname	SINGH
Forenames	BALWINDER
Address	TRUKOMAN
Place of examination: RS PAC CLINIC BAHJA — Date: 13/07/19	DOB: 30/05/1973, CIVIL- 85409033, STAFF- 6364
	Home Telephone number: 93503347

If a dependant or fancee entr employees name jere :-

Surname : Forenames:

Naticnality	Country of birth	Religion
INDIAN	INDIA	SIKHISM

☑ Male	☐ Single	☐ Widow(er)	Relationship to employee: ☑ Wife ☐ Son ☐ Daughter ☐ Fiancee
☐ Female	☑ Married	☐ Divorced / Separated	Number of Children: 2

Reason for examination: ☑ Pre-employment ☐ Pre-overseas — Job :- DRIVER (HEAVY) — Area:- BAHJA

Name and address of family doctor	List your last 3 jobs
	(1)
	(2)
	(3)

C.R. No.: 1125985/4 P.O. Box : 18 P.C.: 124, Rusayl Sultanate of Oman RUSAYL HEALTH CENTRE

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

DO YOU HAVE OR HAVE YOU HAD :- (Tick "yes" or "No" column or put a (?) It uncertain exclude minor ailmenis.)

	Y	N
1. Sirius rouble		✓
2. Neck swellings/flands		✓
3. Difficulty in vision		✓
4. Any ear discharge		✓
5. Asthma/bronchitis		✓
6. Hayfever/other allergy		✓
7. Any skin trouble		✓
8. Tuberculosis		✓
9. Shortness of breath		✓
10. Coughed/vomited blood		✓
11. Severe abdominal pain		✓
12. Stomach ulcer		✓
13. Recurrent indigestion		✓
14. Jaundice or hepatitis		✓
15. Gall bladder disease		✓
16. Marked change in bowel habits		✓
17. Blood in stools (motions)		✓
18. Marked change in weight		✓
19. Varicose veins		✓
20. Lump in breast/armpit		✓
21. Cancer		✓

	Y	N
22. Heart Disease		✓
23. Rheumatic Fever		✓
24. Abnormal heartbeat		✓
25. High blood pressure		✓
26. Stroke		✓
27. Serious chest pain		✓
28. Any blood disease		✓
29. Kidney disease		✓
30. Painful passage of urine		✓
31. Blood in urine		✓
32. Diabetes		✓
33. Headaches /migraine		✓
34. Dizziness/tainting		✓
35. Epilepsy		✓
36. Joints/spinal trouble		✓
37. Surgical operation		✓
38. Serious accident /tracture		✓
39. Tropical disease		✓
40. Fear of heights		✓
HAVE YOU EVER BEEN:- 41. Rejected for employment or insurance for medical reasons		✓

	Y	N
42. Awarded benifities for Industrial injury/lilness		✓
43. Treated for a mental condition. eg . depression		✓
44. Treated for problem drinking or drug abuse		✓
45. Exposed to toxic substance or noise		✓
FOR WOMEN ONLY Have you aver had:-		
46. An abnormal smear		
47. Any gynaecological treatment		
48. Are you pregnant?		
49. HAVE YOU HAD AN ILLNESS NOT MENTIONED ABOVE ?		

How much tabacco each day ? Non-smoker — Average daily alcohol consuption NO

Family history: Diabetes ☐ Tuberculosis ☐ Epilepsy ☐ Asthama ☐ Eczerna ☐ Heart disease ☐ High blood pressure ☐ Stroke ☐ Cancer ☐ Blood disease ☐

PLEASE READ THE FOLLOWING STATEMENT AND IF YOU AGREE KINDLY SIGN IT :-
I declare these statements to be true to the best of my knowledge and belief and I agree that the result of this medical 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.

Date 13-07-19 — Signature of applicant

FOR COMPLETION BY EXAMINING DOCTOR OR SISTER
FURTHER DETAILS OF MEDICAL HISTORY AND RECREATIONAL ACTIVITIES

N	A	N - Normal A - Abnormal Please Describe	PHYSICAL EXAMINATION
✓		1. Eyes & Pupils	BMI - 31.1 kg/m²
✓		2. E.N.T.	HR - 79 b/min
✓		3. Teeth & Mouth	
✓		4. Lungs & Chest	
✓		5. Cardiovascular System	
✓		6. Abdo. Viscera	
✓		7. Hernial Orifices	
✓		8. Anus & Rectum	
✓		9. Genito - urinary	
✓		10. Extremities	
✓		11. Muscula-skeletal	
✓		12. Skin & Varicose Vns.	
✓		13. C.N.S.	
✓		14. Breasts	
		15.	

C.R. No.: 1/2599914
P.O. Box : 18
P.C.: 124, Rusayl
Sultanate of Oman
RUSAYL HEALTH CENTRE

HEIGHT cm	WEIGHT kg	B.P.	HEARING	HEARING	VISION:	DISTANT	NEAR	COLOUR VISION	BLOOD GROUP
166	85.7	127/90	L (N) R (N)	L R	Uncorrected	R (N) L (N)	R (N) L (N)		
					Corrected				

N	A		LABORATORY AND SPECIAL INVESTIGATIONS	N	A	
		1. Urinalysis	TC 225 mg/dl SGPT - 137 U/L			6. Audiogram
		2. Hb Bloodcount ESR	HDL 38.10 mg/dl			7. Lung Function
		3. Sarum Profile	LDL 139.64 mg/dl			8. Chest X-Ray
		4. Stool				9. Drug Screen
		5. E.C.G.				10. CR Screen

OTHER FINDINGS (physique, scars, disabilities, mental stability etc.)

BMI - 31.1 kg/m²

Sickle cell - Negative

Advice
- Regular exercise
- Weight reduction
- Avoid high fat diet
- Repeat LFT after 1 month.

ASSESSMENT

☑ FIT ALL AREAS ☐ FIT HOME SERVICES ONLY ☐ UNFIT/UNSUITABLE ☐ MAY BE REASSESSED

Date 04/07/19 Signature [signature] Name (Block Capitals) DR. HASAN MAHBUB KHAN BAYZID RUSAYL HEALTH CENTRE Doctor / Sister

REVIEW/CONSULTATION

Date Signature Name (Block Capitals) Doctor / Sister