



TON

# Appendix 33: EX2 Form (Routine/Periodic Medical Examination)

## TINE/PERIODIC EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)

Patient: 19642 Reg. Dt: 10/07/202  
Name: SUNIL VASUDEVAN  
Gender: Male Nationality: INDIA  
Age: 56y Mar. Status: Married  
Address:



PLEASE COMPLETE YOUR PERSONAL  
DETAILS IN BLOCK CAPITALS

Surname/Forenames **SUNIL DUTHEZHATH**

Nationality **INDIAN**

D.O.B: **03-01-1969**

Mobile No. **71328219**

Address: **66986995**

Company Number: **6460**

Reference Indicator:

### Personal Details

A ☒ Male ☐ Female

☒ Married ☐ Single ☐ Separated /Divorced /Widow(er)

Home/Leave Address:

Relationship to employee

☐ Wife ☒ Son ☐ Daughter

No of Children: **2**

Reason for Examination (tick as appropriate)

Periodic Medical Examination ☒

Final / Retirement ☐

Other Reason: ☐

### Employee only

B Present Job and Location:

**HD DRIVER**

Next Job and Location:

Are you a registered person with special needs? ☐

Do you belong to any Medical Insurance Scheme? ☐

**Previous Medical History:** All important medical events should be listed and dated at every medical examination. To be completed together with the interviewing Nurses or Doctor who will be able to help by referring to your notes.

Please answer the following questions and tick 'N' (no) or 'Y' (yes) in the column. If 'Y' please describe

	N	Y	Description
Have you, since your last medical been treated by your family doctor or specialist for significant (major) ailments?	✓		
1 Ear, nose, eye or throat problems	✓		
2 Chest problems like asthma, bronchitis, another bad cough	✓		
3 Heart abnormality, chest pains	✓		
4 Abdominal pains, abnormal bowel motions	✓		
5 Urogenital problems (kidney disease, menstrual disorder)	✓		
6 Skin trouble or allergies	✓		
7 Epileptic fits, dizzy spells or migraine	✓		
8 History of mental illness, depression anxiety	✓		
9 Diabetes, thyroid disease, history of Hypertension	✓		<b>✓ DM&amp;HTN ON MEDICATION.</b>
10 Blood disorder e.g. anaemia, blood cancer e.g. leukaemia	✓		
11 Any history of accidents or fractures	✓		
12 Have you had any serious allergies	✓		
13 Do any dependants have a significant ongoing illness?	✓		
14 Any family history of cancers	✓		
Do you take any regular medicines, or have you taken in the past?	✓		<b>✓ T. ATENLOL 50 - OD</b>
Do you smoke? If yes, what and how much each day?	✓		<b>T. VILDAGLIPTIN 50 + METFORMIN (500) - OD</b>
Do you drink alcohol? If yes, what is your average weekly intake?	✓		
Have you ever taken illicit/recreational drugs?	✓		
Are you doing regular sports or physical activities?	✓		

**STATEMENT:** I have read the above questions and the above answers are correct and no information concerning my present or past state of health has been withheld. I understand and agree that this form will be held as a confidential record by PDO Medical Department, and may be copied (by paper or secure electronic transmission) to the Occupational Health Services for the purpose of Health Surveillance and other Occupational Health review.

Date: **10-07-2025**



Signature of Applicant: **Sunil**



**Appendix 33: EX2 Form (Routine/Periodic Medical Examination)**  
**ROUTINE/PERIODIC EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)**

FOR COMPLETION BY EXAMINING DOCTOR OR NURSE

Further details of medical history and recreational activities

N = Normal A = Anormal (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. mmhg	PULSE	HEARING	VISION	Color Vision
167	84	30.1	130/80	70/min.	L N R N	DISTANT R L R L Uncorrected Corrected 6/6 6/6	1. Normal 2. Abnormal

N	A		LABORATORY AND OTHER SPECIAL INVESTIGATIONS	N	A	
✓		1. Urinalysis		✓		7. Audiogram
✓		2. Hb, Blood count, ESR				8. Lung Function
✓		3. LFT, RFT, RBS				9. Chest X-Ray
✓		4. Drug Screen		✓		10. ECG
✓		5. Lipids (40 years +)	2.16	✓		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.)

SMI was done (normal)  
 L.S.M.

**FIT**

**ASSESSMENT AND RECOMMENDATIONS:**

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

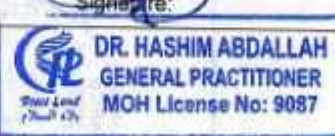
Date: 20/07/2015

Name (Block Capitals): Dr. / Nurse

**REVIEW/CONSULTATION**

Date:

Name (Block Capitals): Dr. / Nurse



Signature:





# مركز بلاد السلام الطبي

## Peace Land Medical Center

Epworth Screening Questionnaire for Sleep Apnoea		
NAME: <u>SUNIL PUTHAZHATH</u>	COMPANY: <u>TRUCKOMAN NORTH</u>	
ID No: <u>66886995</u>	OCCUPATION: <u>HD DRIVER</u>	
Mob.No: <u>71328219</u>	GENDER: <u>M / F</u>	DATE: <u>10/07/2025</u>
<p>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.</p>		
<p>How likely are you to fall asleep in the following situations? (Use 0 to 3 score as Shown below)</p> <p>0 - Would never doze 1 - Slight chance of dozing 2 - Moderate chance of dozing 3 - High chance of dozing</p> <p><input checked="" type="radio"/> Sitting and reading <input checked="" type="radio"/> Watching TV <input checked="" type="radio"/> Sitting inactive in a public place (e.g. Theatre or meeting) <input checked="" type="radio"/> As a Passenger in the car for an hour without a break <input checked="" type="radio"/> Lying down to rest in the afternoon when circumstances permit <input checked="" type="radio"/> Sitting and talking with someone <input checked="" type="radio"/> Sitting quietly after lunch without alcohol <input checked="" type="radio"/> In a car, while stopped for a few minutes in traffic</p> <p>Total: <u>0</u></p> <p>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.</p>		
<p>Declaration: I <u>SUNIL PUTHAZHATH</u> (Print Name) certify that to the best of my knowledge the above information supplied by me is true and correct.</p> <p>Signature: <u>[Signature]</u> Date: <u>10/7/2025</u></p>		



ص.ب. ١٤٠٣ - الرمز البريدي ١٣٣ دوار القليبة - مبنى أبراج المنجوعة عيني / منطقة عمان  
P.O. Box 1403, Postal Code: 133, Al Azaiba, Roundabout al Sahwa Tower, Sultanate of Oman  
هاتف: 24617117 / 24617148 / 24617149 - 1211V149 / 1211V15X / 1211V11V



Peace Land Medical Service LLC, Mukhaizna  
CR No.:2/13627/9, P.O.Box: 1403,  
Postal Code: 133,  
Occidental Camp Mukhaizna, Sultanate of Oman

**PATIENT DETAILS :**

Patient ID : 19642	Doc No : 14314
Name : SUNIL VASUDEVAN	Doc Date : 2025-07-10T18:40:00
Age : 56Y	Bill No : 36246
Gender : Male	Date : 10/07/2025 18:40 PM
Nationality : INDIAN	Customer : TRUCKOMAN OIL & GAS SERVICES
GSM No : 71328219	Ref by : DR.HAMMAD ISMAIL

**TEST RESULT : PDO MEDICAL CHECKUP**

Test	Result	Normal Range	Detailed Description
<b>PDO MEDICAL CHECKUP</b>			
<b>LIVER FUNCTION TEST</b>			
ALKALINE PHOSPHATASE	53 u/l	44-147 U/ L	
T. BILIRUBIN	0.8 mg / dl	up to 2.0 mg/dl	
DIRECT BILIRUBIN	0.4 mg / dl	up to 0.4 mg /dl	
IINDIRECT BILIRUBIN	0.4 mg / dl	up to 1.6 mg /dl	
S.G.O.T.	40 u/l	Male 0-50 u/l Female 0-41 u/l	
S.G.P.T.	42 u/l	Male 0-45 u/l Female 0-32 u/l	
T. PROTEIN	8 g /dl	New born 5.2 - 9.1 g /dl Children 5.4 - 8.7 g /dl Adult 6.7 - 8.7 g /dl	
ALBUMIN	4.5 g / dl	3.6 - 5.5 g/dl	
<b>RENAL FUNCTION TEST</b>			
UREA	28 mg / dl	10-50 mg /dl	
S.CREATININE	0.7 mg / dl	0.7 - 1.2 mg /dl	
S.URIC ACID	6.7 mg / dl	3.4 - 7.2 mg /dl	
FASTING BLOOD SUGAR	104 mg/dl	70 - 110 mg/dl	
<b>URINE ROUTINE ANALYSIS</b>			
<b>PHYSICAL</b>			
Quantity	5 ml		
Colour	Pale yellow		
Sp. Gravity	1.020		
pH	Acidic		
Appearance	Clear		
<b>CHEMICAL</b>			
Nitrite	Negative		
Protein	Negative		
Glucose	Negative		
Ketones	Negative		
Urobilinogen	Normal		
Bilirubin	Negative		
Blood	Negative		
<b>MICROSCOPIC.</b>			
PUS_CELLS			

Reported By:  
Lab Technician

Verified By:  
Lab Technician

Approved By:  
Lab Technician

Sr. Lab Technologist

Sr. Lab Technologist

Sr. Lab Technologist

Printed at: 10/07/2025 18:43:38

Signed at: 10/07/2025 18:43:37



EPITHELIAL CELLS.

Result

Normal Range

Detailed Description

RBCS

1-2

CASTS

NIL

CRYSTALS

NIL

BACTERIA

NIL

OTHERS.

NIL

## COMPLETE BLOOD COUNT

RBC

5.2 Million/c

Male 4.5 - 6.0 million /cu  
Female 4.5 - 5.5 million/cu

HAEMOGLOBIN

15.8 gm %

Male 13 - 18 gm %  
Female 11 - 15 gm %

HCT

45 %

Male 42 -52 %  
Female 37 -47 %

MCV

87 fl

76 - 96 fl

MCH

30 pg

27 - 33 pg

MCHC

34 %

32-36 %

WBC COUNT

8600 cells/cumm

4000 - 11 000 cells / cu mm

## DIFFERENTIAL COUNT

NEUTROPHIL

50 %

40-75 %

LYMPHOCYTE

36 %

20-45 %

EOSINOPHIL

6 %

1-6 %

MONOCYTE

8 %

2-8%

BASOPHIL

0 %

0-1%

PLATELET

2.5 lakhs/cumm

1.5 - 4.5 lakhs / cu mm

## LIPID PROFILE

Total Cholesterol

160 mg/dl

Normal < 200 mg/dl  
Border line : 200 -239 mg / dl  
High > 240 mg / dl

Triglyceride

60 mg/dl

Normal 0.0 - 150 mg/dl

HDL - CHOL

66 mg/dl

35.0 - 79.0 mg /dl

LDL - CHOL

71 mg/dl

&lt; 130 mg/dl

VLDL

12 mg/dl

2-30 mg/dl

NON HDL CHOLESTEROL

94 mg/dl

Less than 130mg/dl

Remarks:




Patient: 19642

Reg. Dt: 10/07/202

Name: SUNIL VASUDEVAN

Gender: Male

Nationality: INDIA

Age: 56Y

Mar. Status: Married

Address:



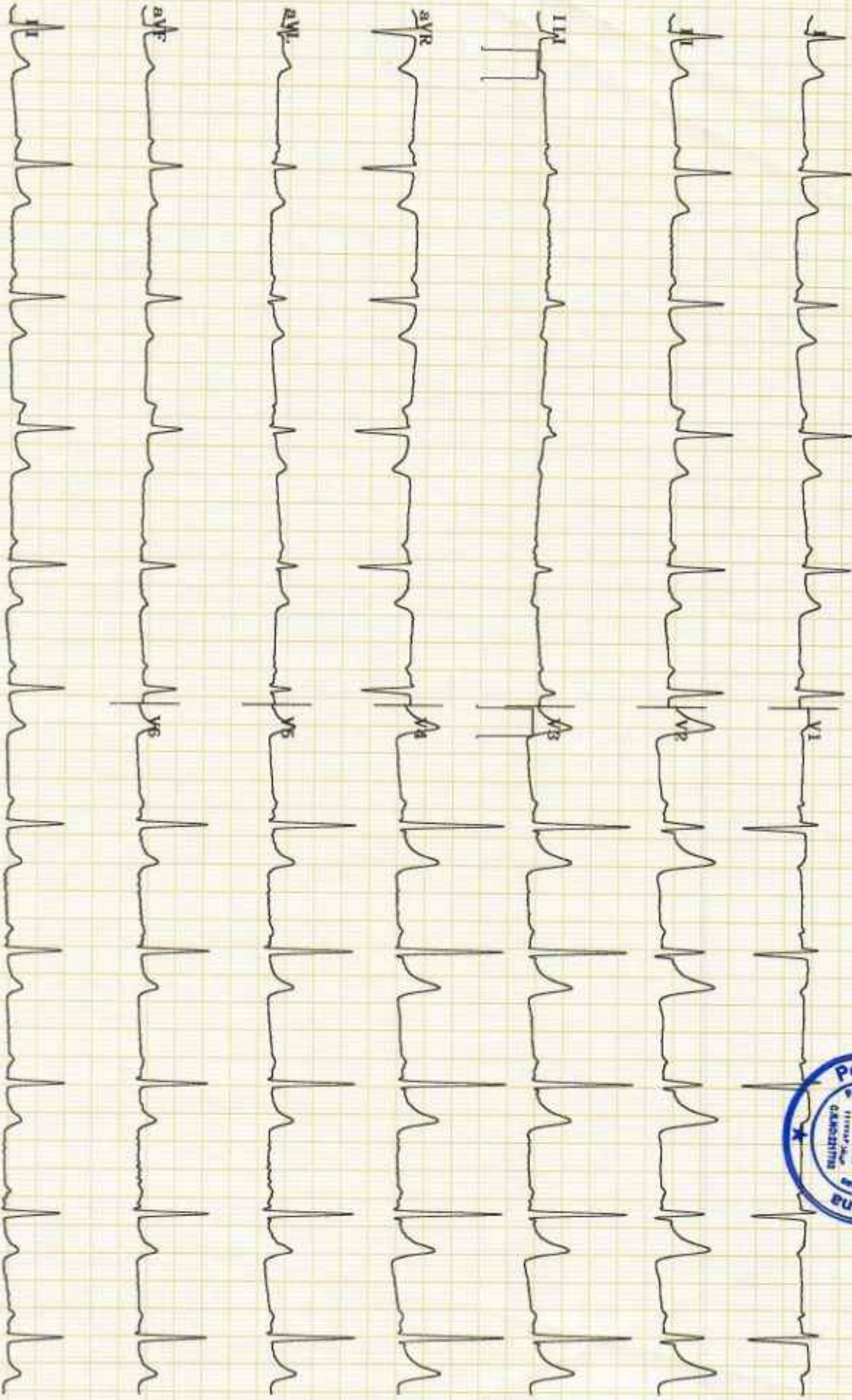


Patient: 19642 Reg. Dt: 10/07/202  
 Name: SUNIL VASUDEVAN  
 Gender: Male Nationality: INDIA  
 Age: 56y Mar. Status: Married  
 Address:



Heart Rate: 63 bpm  
 PR/RR Int.: 160/952 ms  
 QRS Dur: 94 ms  
 QT/QTc: 398/407 ms  
 P-R-T axes: 45 41 14  
 SV1/RV5/R+S: 0.86/1.47/2.33mV

\*\* Analysis Result \*\* (To be finally confirmed by physician)  
 Normal Sinus Rhythm  
 [ Normal ECG ]





بلاد السلام للخدمات الطبية ش.م.م.  
Peace Land Medical Services L.L.C

PATIENT ID: 19642

### Estimated 10-year Global CVD Risk

21.60%

### Risk Category

High Risk

### Estimated Vascular Age

72 Years

### Treatment Guidelines

#### ATP-III (2004)

##### Treatment Targets

LDL <100 mg/dL (<2.59 mmol/L)

Non-HDL <130 mg/dL (<3.37 mmol/L)

#### CCS (2009)

##### 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 <2-2.5 mmol/L (<80-100 mg/dL)

TChol <4-4.5 mmol/L (<155-175 mg/dL)







NAME: <u>SUNIL PUTHAZHATH</u>		COMPANY: <u>TON</u>
AGE: <u>56 YRS</u>	GENDER: <u>MTF</u>	OCCUPATION: <u>HD DRIVER</u>
REF. BY:		DATE: <u>10 APR 2025</u>



### INTERPRETATION

**R** LEFT EAR

## RESULT

**NORMAL  
HEARING LOSS**

☐ RIGHT  
☐ LEFT



ص.ب. ١٢٠٢، الرمز البريدي: ١٢٢، توار القديسة ميري ابراج الصحوة ميري، منطقة عقار  
P.O. Box 1402 Postal Code: 122, Al Azma Roundabout at Salwa Tower, Sultanate of Oman  
تلف: 24871717 / 24871742 / 24871744 / 22131124 / 22131125 / 22131126 / 22131127 / 22131128 / 22131129 / 22131130 / 22131131 / 22131132 / 22131133 / 22131134 / 22131135 / 22131136 / 22131137 / 22131138 / 22131139 / 22131140 / 22131141 / 22131142 / 22131143 / 22131144 / 22131145 / 22131146 / 22131147 / 22131148 / 22131149 / 22131150 / 22131151 / 22131152 / 22131153 / 22131154 / 22131155 / 22131156 / 22131157 / 22131158 / 22131159 / 22131160 / 22131161 / 22131162 / 22131163 / 22131164 / 22131165 / 22131166 / 22131167 / 22131168 / 22131169 / 22131170 / 22131171 / 22131172 / 22131173 / 22131174 / 22131175 / 22131176 / 22131177 / 22131178 / 22131179 / 22131180 / 22131181 / 22131182 / 22131183 / 22131184 / 22131185 / 22131186 / 22131187 / 22131188 / 22131189 / 22131190 / 22131191 / 22131192 / 22131193 / 22131194 / 22131195 / 22131196 / 22131197 / 22131198 / 22131199 / 22131200 / 22131201 / 22131202 / 22131203 / 22131204 / 22131205 / 22131206 / 22131207 / 22131208 / 22131209 / 22131210 / 22131211 / 22131212 / 22131213 / 22131214 / 22131215 / 22131216 / 22131217 / 22131218 / 22131219 / 22131220 / 22131221 / 22131222 / 22131223 / 22131224 / 22131225 / 22131226 / 22131227 / 22131228 / 22131229 / 22131230 / 22131231 / 22131232 / 22131233 / 22131234 / 22131235 / 22131236 / 22131237 / 22131238 / 22131239 / 22131240 / 22131241 / 22131242 / 22131243 / 22131244 / 22131245 / 22131246 / 22131247 / 22131248 / 22131249 / 22131250 / 22131251 / 22131252 / 22131253 / 22131254 / 22131255 / 22131256 / 22131257 / 22131258 / 22131259 / 22131260 / 22131261 / 22131262 / 22131263 / 22131264 / 22131265 / 22131266 / 22131267 / 22131268 / 22131269 / 22131270 / 22131271 / 22131272 / 22131273 / 22131274 / 22131275 / 22131276 / 22131277 / 22131278 / 22131279 / 22131280 / 22131281 / 22131282 / 22131283 / 22131284 / 22131285 / 22131286 / 22131287 / 22131288 / 22131289 / 22131290 / 22131291 / 22131292 / 22131293 / 22131294 / 22131295 / 22131296 / 22131297 / 22131298 / 22131299 / 22131300 / 22131301 / 22131302 / 22131303 / 22131304 / 22131305 / 22131306 / 22131307 / 22131308 / 22131309 / 22131310 / 22131311 / 22131312 / 22131313 / 22131314 / 22131315 / 22131316 / 22131317 / 22131318 / 22131319 / 22131320 / 22131321 / 22131322 / 22131323 / 22131324 / 22131325 / 22131326 / 22131327 / 22131328 / 22131329 / 22131330 / 22131331 / 22131332 / 22131333 / 22131334 / 22131335 / 22131336 / 22131337 / 22131338 / 22131339 / 22131340 / 22131341 / 22131342 / 22131343 / 22131344 / 22131345 / 22131346 / 22131347 / 22131348 / 22131349 / 22131350 / 22131351 / 22131352 / 22131353 / 22131354 / 22131355 / 22131356 / 22131357 / 22131358 / 22131359 / 22131360 / 22131361 / 22131362 / 22131363 / 22131364 / 22131365 / 22131366 / 22131367 / 22131368 / 22131369 / 22131370 / 22131371 / 22131372 / 22131373 / 22131374 / 22131375 / 22131376 / 22131377 / 22131378 / 22131379 / 22131380 / 22131381 / 22131382 / 22131383 / 22131384 / 22131385 / 22131386 / 22131387 / 22131388 / 22131389 / 22131390 / 22131391 / 22131392 / 22131393 / 22131394 / 22131395 / 22131396 / 22131397 / 22131398 / 22131399 / 22131400 / 22131401 / 22131402 / 22131403 / 22131404 / 22131405 / 22131406 / 22131407 / 22131408 / 22131409 / 22131410 / 22131411 / 22131412 / 22131413 / 22131414 / 22131415 / 22131416 / 22131417 / 22131418 / 22131419 / 22131420 / 22131421 / 22131422 / 22131423 / 22131424 / 22131425 / 22131426 / 22131427 / 22131428 / 22131429 / 22131430 / 22131431 / 22131432 / 22131433 / 22131434 / 22131435 / 22131436 / 22131437 / 22131438 / 22131439 / 22131440 / 22131441 / 22131442 / 22131443 / 22131444 / 22131445 / 22131446 / 22131447 / 22131448 / 22131449 / 22131450 / 22131451 / 22131452 / 22131453 / 22131454 / 22131455 / 22131456 / 22131457 / 22131458 / 22131459 / 22131460 / 22131461 / 22131462 / 22131463 / 22131464 / 22131465 / 22131466 / 22131467 / 22131468 / 22131469 / 22131470 / 22131471 / 22131472 / 22131473 / 22131474 / 22131475 / 22131476 / 22131477 / 22131478 / 22131479 / 22131480 / 22131481 / 22131482 / 22131483 / 22131484 / 22131485 / 22131486 / 22131487 / 22131488 / 22131489 / 22131490 / 22131491 / 22131492 / 22131493 / 22131494 / 22131495 / 22131496 / 22131497 / 22131498 / 22131499 / 22131500 / 22131501 / 22131502 / 22131503 / 22131504 / 22131505 / 22131506 / 22131507 / 22131508 / 22131509 / 22131510 / 22131511 / 22131512 / 22131513 / 22131514 / 22131515 / 22131516 / 22131517 / 22131518 / 22131519 / 22131520 / 22131521 /



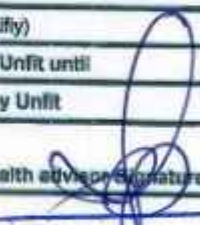


# مركز بلاد السلام الطبي

## Peace Land Medical Center

### Fitness for work certificate

Employee Data		Date 10-7-2025	
Name SUNIL PUTHETHATH		Department/Company TON	
I.D No. 66986995		Occupation HD DRIVER	
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)		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			
Lifting, 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 Signature		Date 20/07/2025	

  
**DR. HASHIM ABDALLAH**  
 GENERAL PRACTITIONER  
 MOH License No: 9087





**nmc specialty hospital, al ghoubra**

P.O BOX : 613, Postal Code : 133  
AL-GHOUBRA  
24504000

### **Fitness Certificate**

**Empno:**

**Date of issue :** 19/07/2025

**Ref No :** 0000111/FIT/NMC/2025

This is to certify that Mr. / Mrs. *SUNIL PUTHEZHATH VASUDEVAN* 6460 with file no 14487701 and Resident card no. 66986995 was *Examined* at *nmc specialty hospital, al ghoubra* on 19/07/2025 and will be *fit to work* from the medical point of view starting from 19/07/2025

#### **DIAGNOSIS**

*Z02.1-Encounter For Pre-Employment Examination*

**Remarks**

*fit to work*

**DR MUHAMMAD SIDDIQUI**

Place: *nmc specialty hospital, al ghoubra*

(Hospital Seal)

Signature





SUNI PUTHZHATH VASUDEVAN,  
14487701

Patient Information

7/19/2025 9:45:40 AM

Bruce

ID: 14487701

Second ID: 2677427

Admission ID:

Date of Birth:

Age: 56 Years

Height:

Weight:

Gender: Male

Race: Unknown

Indications  
PDO FOR FITNESS

Medications  
DM, HTN AND ON MED

Referring Physician: DR.MUHAMMED SIDDIQUI

Location:

Procedure Type: TMT FOR FITNESS

Attending Phy. DR.MUHAMMED SIDDIQUI

Technician:

Target HR: 139 bpm (85%)  
Max HR(%MPHR): 149 bpm (90%)

Reasons for end: ACHIEVED THR  
Symptoms: FATIGUE

Diagnosis

Notes

Conclusions

The patient was tested using the Bruce protocol for a duration of 09:54 minutes and achieved 12.1 METs. A heart rate of 149 bpm with a target predicted heart rate of 91% was obtained at 10:00. A systolic blood pressure of 155/94 was obtained at 08:08 and a diastolic blood pressure of 155/94 was obtained at 08:08. No significant ST changes during exercise or recovery, no evidence of ischemia. Normal Stress stress test.

Reviewed by:

(INCC)NATIMED REPORT

Signed by:

Date:



NID RTH  
PDD  
10/7/25