Appendix 32: EX1 Form (Initial Examination Report)

INITIAL EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)

Petroleum Development Oman
MEDICAL DEPARTMENT

PLEASE COMPLETE YOUR PERSONAL DETAILS IN BLOCK CAPITALS

Surname	FEBIN
Forenames	FRANCIS
Address	
Home telephone number	77107938

Place of examination NMC AL HAIL Date 15/08/22

If a dependant enter employee's name here:
Surname: Forenames: FRANCIS

Birth date: 13/11/1984 Nationality: INDIA Country of birth: INDIA 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)
(2)

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		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		✓			
16. Marked change in bowel habits		✓	36. Surgical operation		✓	46. Any gynaecological treatment		
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? Average daily alcohol consumption

Have you ever taken elicited drugs? (✓) PDO test all new/potential employees for elicited/recreational drugs

FAMILY HISTORY: Diabetes (Y) 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 general terms may be revealed to the Company if required, and the details sent to my own doctor if this is considered necessary by t examining medical officer. **I am also aware that PDO reserve the right to dismiss me if it was found that I have purposely withhe important medical information.**

Date: Signature of Applicant:

Petroleum Development Oman LLC	Revision: 5.0 Effective: January 2022

FOR COMPLETION BY EXAMINING DOCTOR OR NURS

Further details of medical history and recreational activities

N	A	N = Normal A = Abnormal (please describe)	PHYSICAL EXAMINATION
	✓	1. Eyes & Pupils	Myopia → Corrected, PDO 6/6
✓		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 /mins.	HEARING	VISION				Colour Vision	Blood Group
						DISTANT		NEAR			
						R	L	R	L		
185	88	25.7	120/85	72	L N R N	Uncorrected Corrected	6/6 6/6	N N	N N	Normal	

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

REVIEW/CONSULTATION

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

DR. MANJOOH LOTFY ABDALLA
General Practitioner

DEPARTMENT OF LABORATORY MEDICINE

File No:	35084180	**Report No:**	0062786		
Name:	FEBIN FRANCIS	**Sample Date:**	15/09/2022	**Time:**	1
		Received By:			
Address:		**Received Date:**		**Time:**	
Gender:	M **Age:** 35 Y **Nationality:** INDIAN	**Report Date:**	15/09/2022	**Time:**	1
GSM No.:	77107938 **ID Card No.:** S5800229	**Bill No:**	0181990	**Bill Date:**	1
Ref. By:	DR MASOOD SIDDIQUE	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
PDO PACKAGE BELOW 40 YEARS		
RANDOM BLOOD SUGAR	5.55 mmol/L	4.11 -7.9mmol/L
CREATININE	77.25 µ mol/L	Adults: MALE: 62 – 106 µ mol/L FEMALE: 44 - 80 µ mol/L
SGPT (ALT)	58.07 U/L	MALE : up to 41 U/L, FEMALE : up to 33 U/L.
TOTAL WBC COUNT	7.50 x 10^3 / µL	4.00-11.00 x 10^3 / µL
DIFFERENTIAL COUNT		
NEUTROPHIL (%)	51.80 %	40-75%
LYMPHOCYTE (%)	36.10 %	20-45%
MONOCYTE (%)	9.50 %	2-8%
EOSINOPHIL (%)	2.30 %	1-6%
BASOPHIL (%)	0.30 %	0-1%
ERYTHROCYTE SEDIMENTATION RATE	02 mm/1st hr	MALE:0-15 mm/ 1st hr FEMALE:0-20 mm/ 1st hr
HAEMOGLOBIN	15.00 gm/dl	Male : 13 -18 gm/dl Female:11-15 gm /dl childrens upto 1year-11.0 upto12years-11.5 - 14.5 g cord blood:13 -19.5 gm /d
SICKLE CELL	NEGATIVE	
Method : Solubility test (If Positive , Hb Electrophoresis / HPLC to be done to confirm Sickle cell anaemia / Trait).		
URINE ROUTINE		
URINE BIOCHEMISTRY		
URINE GLUCOSE	NEGATIVE	NEGATIVE
URINE PROTEIN	NEGATIVE	NEGATIVE
URINE KETONE	NEGATIVE	NEGATIVE

Verified By:

Approved By:

DR ROSE MARY

DEPARTMENT OF LABORATORY MEDICINE

File No:	35084180	**Report No:**	0062786		
Name:	FEBIN FRANCIS	**Sample Date:**	15/09/2022	**Time:**	1
		Received By:			
Address:		**Received Date:**		**Time:**	
Gender:	M **Age:** 35 Y **Nationality:** INDIAN	**Report Date:**	15/09/2022	**Time:**	1
GSM No.:	77107938 **ID Card No.:** S5800229	**Bill No:**	0181990	**Bill Date:**	1
Ref. By:	DR MASOOD SIDDIQUE	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
URINE BILIRUBIN	NEGATIVE	NEGATIVE
NITRITE	NEGATIVE	NEGATIVE
URINE PH	6.0	4.6-8.0
SPECIFIC GRAVITY	1.015	1.010-1.030
BLOOD	1+	NEGATIVE
UROBILINOGEN	NORMAL	NORMAL
URINE MACROSCOPY		
COLOUR	YELLOW	
APPEARANCE	CLEAR	
URINE MICROSCOPY		
RBC	1-2 /hpf	0-3
PUSCELLS	2-4 /hpf	0-5
EPITHELIAL CELLS	1-2 /hpf	NIL
CRYSTAL	NIL /hpf	NIL
CAST	NIL /hpf	NIL
BACTERIA	NIL	NIL
MUCOUS THREAD	NIL	NIL

Verified By:

Approved By:

DR ROSE MARY

AUDIOMETRY REPORT

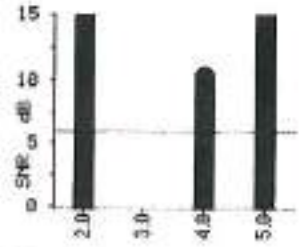
Name of the Patient Febin Francis

Sex M MRN 35084180 Date of Tes

V107.05
14-SEP-22 23:13
DP 4s 4 sec avg
SN: GI1005649 GI2009368

NAME:

Left: Pass



F2	L1	L2	DP	NF	SNR	
2.0	65	55	9	-8	16	P
3.0	65	55	-12	-11	-2	
4.0	65	55	-4	-15	11	P
5.0	65	55	-2	-19	17	P

V107.05
14-SEP-22 23:14
DP 4s 4 sec avg
SN: GI1005649 GI2009368

NAME:

Right: Pass

Signat

Pulmonary Function Report

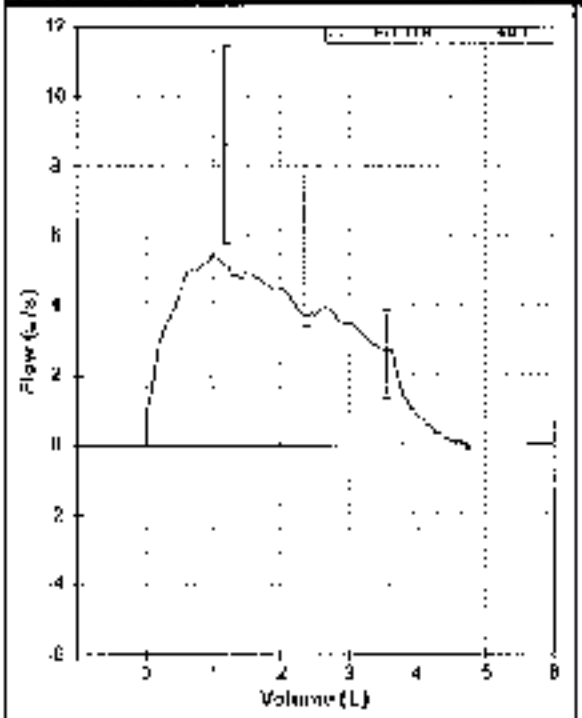
Subject Information

ID:	20220808_111702350	Alternate ID:	35084180		
Last Name:		First Name:	Febin	Middle Name:	Francis
Population:	African/S Indian	Gender:	Male	Date of Birth:	18/11/1998
Age:	35	Height:	185 cm	Weight:	88.0 kg
BMI:	25.7	Smoking:	Non Smoker		

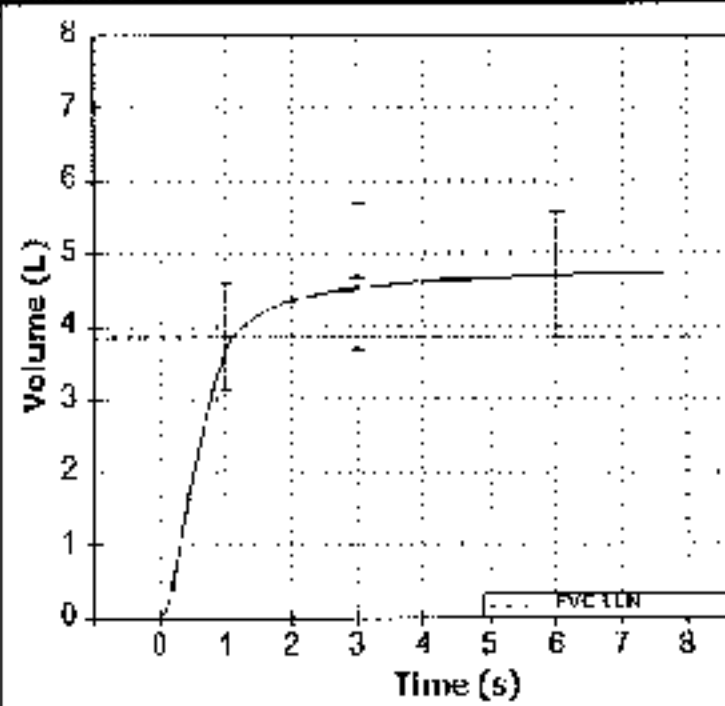
Test Session Information

Test Date:	15/09/2022 11:19	Device:	ALPHA Touch	Serial Number:	32165
No. of Tests:	1	Accuracy Chk.	20/05/2019 15:42	User:	user
Pred. Values:	ERS 93	Pred. Factor:	87%	Posture:	Sitting

Flow Volume Graph



Volume/Time Graph



Results

Parameter	Pred	LLN	Best	% Pred.	Z-Score
FVC (L)	4.71	3.84	4.74	101	0.06
FEV1 (L)	3.87	3.14	3.85	99	-0.04
FEV1 Ratio	0.81	0.69	0.81	100	0.00
FEV6 (L)	4.71	3.84	4.71	100	0.00
PEF (L/min)	600	481	326*	54	-0.78
FEF25-75 (L/s)	4.78	3.07	3.84	80	-0.93

Values at BTPS, *Below lower limit of normal (LLN)

Session Quality and Repeatability Information

FVC Session Grade	FVC Rep:	FEV1 Rep:	Slow Start of test	End of test criteria not achieved	Cough detec in 1st secon
D	-	-	0 blow(s)	0 blow(s)	0 blow(s)

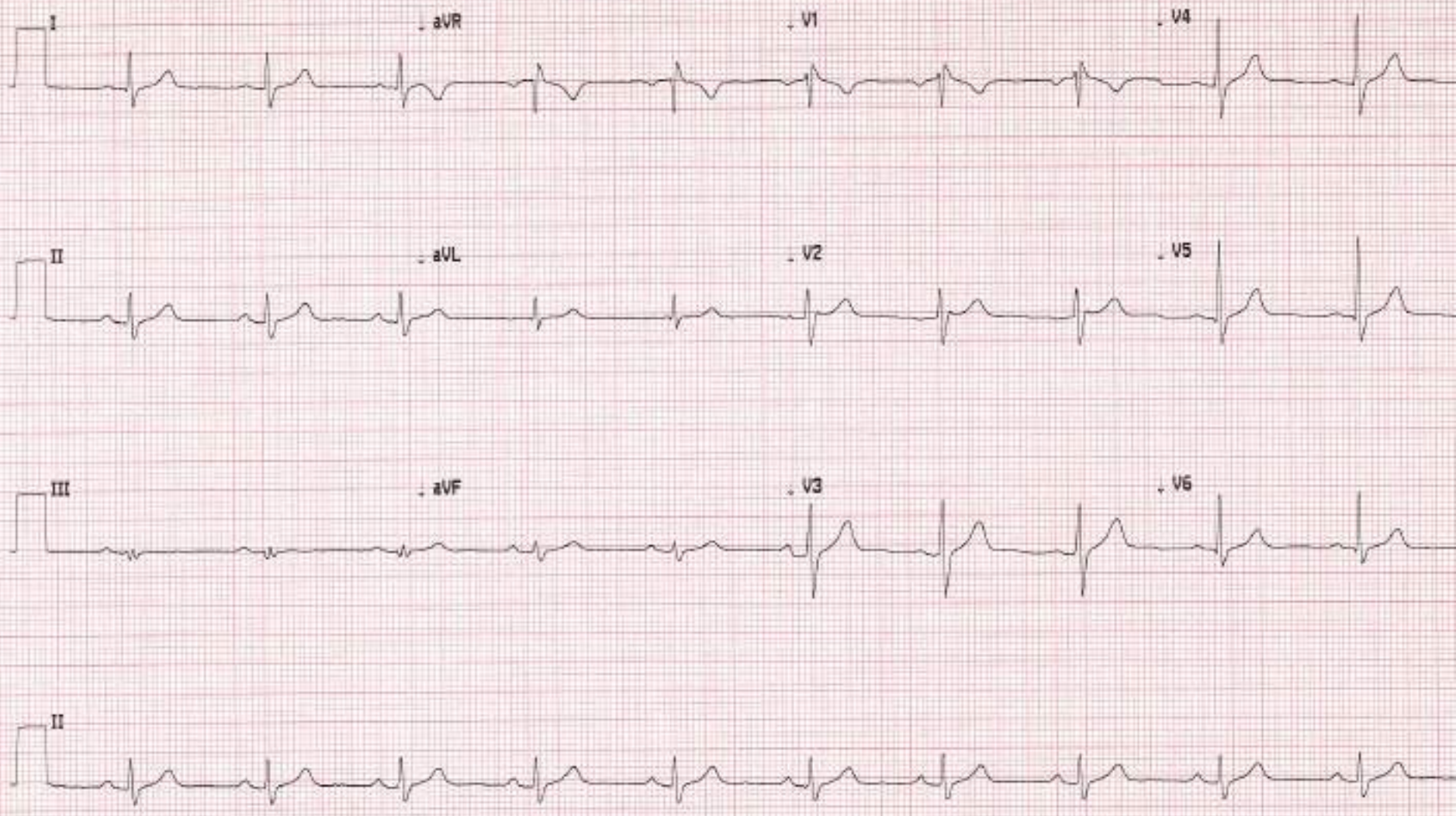
Computer Suggested Interpretation

Computer interpretations cannot be relied upon for diagnosis. Normal ventilatory function.

Reference Histogram

P-R-T axes: 64 32 32

UNCONFIRMED REPORT



119210000837 [redacted] No Site Name Mortara Quintiq

Site # 0 Cart # 0 Version 2.1.0.5 Sequence #06989 25mm/s 10mm/mV 0.05-40 Hz M

भारत गणराज्य REPUBLIC OF INDIA

P

IND

S5800229

FEBIN FRANCIS

भारतीय/INDIAN

M

18/11/1986

THRISSUR KERALA

MUSCAT

22/08/2018

21/08/2028

P<IND<<FEBIN<FRANCIS<<<<<<<<<<<<<<<<<<<<<<<<

S5800229<2IND8611183M2808211<<<<<<<<<<<<<<6