



**Al Nile
Hospital**
مستشفى النيل

Fitness to Work Certificate

| | | | |
|----------------------------------|--------|---------------------------------|----------|
| Employee Data | | Date | 27/05/25 |
| Last Name NIAMATULLAH | | First Name | IMRAN |
| I.D No. 87062381 | Age 40 | Occupation | DRIVER |
| Type of Medical Evaluation | | Mark those applying | |
| A1 Aircraft refueling | | A6 Emergency response team work | |
| A2 Breathing apparatus | | A7 Professional driving | |
| A3 Business traveler | | A8 Remote location work | |
| A4 Catering and food preparation | | A9 Transfers- group A country | |
| A5 Crane or forklift driving | | 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 their fitness to work status for the above tasks is as follows

| | | |
|---|-------------------------------------|--|
| Fit with no restrictions | <input checked="" type="checkbox"/> | FIT |
| Fit with following restrictions | | |
| The employee is fit for above work but should avoid the following tasks | | |
| Work near moving machinery or sharp edges | | Operate motor vehicles, forklifts or heavy machinery |
| Working at height | | Use a respirator |
| Pull push carry weight over Kg | | Repetitive twisting of valves or wrenches |
| Ascend/descend ladders or stairs | | Flying |
| Other(Specify) | | |
| These restrictions are permanent | | |
| These restrictions are temporary until | | (date) |
| Temporary Unfit until | | (date) |
| Permanently Unfit | | |
| Date 27/05/25 | Signature | Print Name |





Al Nile Medical Complex
مجمع النيل الطبي

Patient Name: IMRAN
NIAMATTULLAH
File No: 25009059
Age: 40y 2m 25d
Gender: Male
Nationality: Pakistan



Petroleum Development Oman
MEDICAL DEPARTMENT

Surname/Forenames: **IMRAN NIAMATTULLAH**

PLEASE COMPLETE YOUR PERSONAL
DETAILS IN BLOCK CAPITALS

Nationality: **PAKISTANI**

Mobile No. **91293143** Home/Leave Address: Company Number: 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: **4**

Reason for Examination (tick as appropriate)

Periodic Medical Examination Final / Retirement Other Reason

Employee only

B Present Job and Location: **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? | N | | |
| 1 Ear, nose, eye or throat problems | N | | with glass |
| 2 Chest problems like asthma, bronchitis, other bad cough | N | | |
| 3 Heart abnormality, chest pains | N | | |
| 4 Abdominal pains, abnormal bowel motions | N | | |
| 5 Urogenital problems (kidney disease, menstrual disorder) | N | | |
| 6 Skin trouble or allergies | N | | |
| 7 Epileptic fits, dizzy spells or migraine | N | | |
| 8 History of mental illness, depression anxiety | N | | |
| 9 Diabetes, thyroid disease | N | | |
| 10 Blood disorder e.g. anaemia, blood cancer e.g. leukaemia | N | | |
| 11 Any history of accidents or fractures | N | | |
| 12 Have you had any serious allergies | N | | |
| 13 Do any dependants have a significant ongoing illness? | N | | |
| 14 Any family history of cancers | N | | |
| Do you take any regular medicines, or have you taken in the past? | N | | |
| Do you smoke? if yes, what and how much each day? | N | | |
| Do you drink alcohol? If yes, what is your average weekly intake? | N | | |
| Have you ever taken illicit/recreational drugs? | N | | |
| Are you doing regular sports or physical activities? | N | | |

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 the concerned medical institute and may be copied (by paper or secure electronic transmission) to PDO the Occupational Health Services for the purpose of Health Surveillance and other Occupational Health review.

Date: **27/05/25**

Signature of Applicant:

(Handwritten signature)





FOR COMPLETION BY EXAMINING DOCTOR
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 <i>murmurs</i> |
| ✓ | | 6. Abdo. Viscera |
| ✓ | | 7. Hemial 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 | HEARING | VISION | Colour Vision | Blood Group |
|--------------|--------------|-----|-----------|---------|---------|---|------------------|----------------|
| 172 | 77 | 26 | 139 80 | 76/min. | L R | DISTANT NEAR Uncorrected Corrected R L R L E L G G G G G G <i>6 hi glass</i> | | |

| N A | | LABORATORY AND OTHER SPECIAL INVESTIGATIONS | N A |
|-----|--|---|----------------------------------|
| ✓ | | 1. Urinalysis | ✓ |
| ✓ | | 2. Hb, Blood count, ESR | |
| ✓ | | 3. LFT, RFT, RBS | |
| | | 4. Drug Screen | |
| ✓ | | 5. Lipids (40 years +) | |
| | | 6. Sickle Cell test | |
| | | <i>glucose ++ Creatinine ↑ FBS ↑ TG</i> | |
| | | | 7. Audiogram |
| | | | 8. Lung Function |
| | | | 9. Chest X-Ray |
| | | | 10. ECG |
| | | | 11. CVS risk for 40 yrs. & above |
| | | | 12. HIV, Hepatitis screening |

OTHER FINDINGS (Physique, scars, disabilities, mental stability including behaviour, etc.)

*cardiac consultation + DM treatment Follow up later
asymptomatic MI + moderate CKD*

ASSESSMENT:

FIT ALL AREAS FIT WITH RESTRICTION TEMPORARY UNFIT UNFIT

Date: _____ Name (Block Capitals): Dr. *Ali Darsah*

Signature:

REVIEW/CONSULTATION

Date: _____ Name (Block Capitals): Dr. _____

Signature: _____



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| | |
|-------------------------|---------------------|
| Employee Data | DATE 27/05/25 |
| NAME: IMRAN NIAMATULLAH | Company: TRUCK OMAN |
| ID No. 87062381 | Occupation: DRIVER |

The Epworth Sleepiness Scale

How likely are you to doze off or fall asleep in the following situations? You should rate your chances of dozing off, not just feeling tired. Even if you have not done some of these things recently try to determine how they would have affected you. For each situation, decide whether or not you would have:

- No chance of dozing =0
- Slight chance of dozing =1
- Moderate chance of dozing =2
- High chance of dozing =3

Write down the number corresponding to your choice in the right-hand column. Total your score below.

| Situation | Chance of Dozing |
|---|------------------|
| Sitting and reading | • 0 |
| Watching TV | • 0 |
| Sitting inactive in a public place (e.g., a theater or a meeting) | • 0 |
| As a passenger in a car for an hour without a break | • 0 |
| Lying down to rest in the afternoon when circumstances permit | • 0 |
| Sitting and talking to someone | • 0 |
| Sitting quietly after a lunch without alcohol | • 1 |
| In a car, while stopped for a few minutes in traffic | • 0 |

Total Score =

1

Analyze Your Score

Interpretation:

- 0-7: It is unlikely that you are abnormally sleepy.
- 8-9: You have an average amount of daytime sleepiness.
- 10-15: You may be excessively sleepy depending on the situation. You may want to consider seeking medical attention.
- 16-24: You are excessively sleepy and should consider seeking medical attention.

Reference: Johns MW. A new method for measuring daytime sleepiness: The Epworth Sleepiness Scale.



MR: IMRAN NIAMATTULLAH

Estimated 10-year Global CVD Risk: 11.2%*

Risk Category: High Risk*

Estimated Vascular Age: 57 Years*

*Due to this patient being diabetic, they are placed in the High Risk Category and should be treated based on the following guidelines.

1. Gender? — Male
2. Age? — 40-44
3. Total Cholesterol? — <4.14 mmol/L
4. HDL? — 0.9-1.16 mmol/L
5. Systolic Blood Pressure? — 140-149 mmHg
6. On Medication for Hypertension? — No
7. Smoker? — No
8. Diabetic? — Yes
9. Known Vascular Disease (CAD, PVD, Stroke)? — No






Al Nile
Medical Complex
مجمع النيل الطبي

P.O.BOX:300, POSTAL CODE – 611 NIZWA, SULTANATE OF OMAN C.R.NO.1128642

PH : 25426665, 25426228 \ WHATSAPP:94146648

Instagram:https://www.instagram.com/alnile_medical

Lab Report

| | | | |
|--------------------|--------------------------|-------------------------|---------------------|
| Patient Name: | IMRAN NIAMATTULLAH | Date: | 27/05/2025 08:21:16 |
| File No: | 25009059 | Age/Gender: | 40y 2m 25d/M |
| Payer Name: | | Sid No: | Bill#20886 |
| Insurance Card No: | -- | Collection Date & Time: | 27/05/2025 08:03:14 |
| Doctor: | Dr. Ali Mohammad Ghassah | Received Date & Time: | 27/05/2025 08:21:15 |
| Billing Time: | 27/05/2025 07:57:39 | Reported Date & Time: | 27/05/2025 08:30:41 |
| | Mobile: 91293143 | Id Card No: | 87062381 |

| Test Name | Result | Biological Reference |
|-----------------------------|----------------------|-----------------------|
| BLOOD SUGAR FASTING | 9.63 mmol/m | 3.3 - 6.1 |
| SGPT | 51.9 U/L | < 41.0 |
| BILIRUBIN TOTAL | 0.669 mg/dl | < 1.1 |
| LDL CHOLESTEROL | 27.0 mg/dl | < 150.0 |
| HDL CHOLESTEROL | 39.78 mg/dl | 40.0 - 60.0 |
| CHOLESTEROL | 116.1 mg/dl | < 200.0 |
| TRIGLYCERIDE | 244.5 mg/dl | 40.0 - 160.0 |
| SGOT | 31.2 U/L | < 40.0 |
| TOTAL PROTEIN | 7.92 g/dl | 6.6 - 8.7 |
| URIC ACID | 2.8 mg/dl | 3.4 - 7.0 |
| CREATININE | 1.04 mg/dl | 0.7 - 1.4 |
| ALKALINE PHOSPHATASE | 82.0 U/L | 35.0 - 104.0 |
| UREA | 23.7 mg/dl | 15.0 - 45.0 |
| ESR(AUTOMATED) | 10.0 mm/hr | < 15.0 |
| Complete Blood Count | | |
| Haemoglobin | 15.2 mg/dl | 13.0 - 18.0 |
| Total leucocyte count | 10,630.0 Cells /Cumm | 3,999.0 - 11,000.0 |
| Differential count | | |
| Neutrophil | 57.6 % | 40.0 - 75.0 |
| Lymphocytes | 30.2 % | 15.0 - 45.0 |
| Eosinophils | 3.3 % | 1.0 - 6.0 |
| Monocyte | 7.6 % | 2.0 - 8.0 |
| Basophils | 0.9 % | < 10.0 |
| Packed cell volum | 45.4 % | < 54.0 |
| RBC count | 5.13 millions/mm | 4.5 - 5.5 |
| MCV | 88.5 fl | 81.8 - 95.5 |
| MCH | 29.7 pg | 27.0 - 32.3 |
| MCHC | 33.5 g/dl | 32.4 - 35.0 |
| Platelet count | 305,000.0 Cumm | 150,000.0 - 400,000.0 |
| RDW-CV | 12.6 % | 11.0 - 16.0 |
| RDW-SD | 40.7 fl | 35.0 - 56.0 |
| URINE ANALYSIS | | |
| Color | Yellow | |





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PH : 25426665, 25426228 \ WHATSAPP:94146648

Instagram:https://www.instagram.com/alnile_medical

| Test Name | Result | Biological Reference |
|--------------------------|----------------|----------------------|
| Transparency | Clear | - |
| Specific Gravity | 1.02 | - |
| PH | Acidic | - |
| Glucose | ++ | - |
| Acetone | NIL | - |
| Bilirubin | NIL | - |
| Blood | NIL | - |
| Urobilinogen | NIL | - |
| Protein | NIL | - |
| Nitrate | NIL | - |
| Leukocyte | NIL | - |
| Pus cells | 1-3 | - |
| Erythrocytes | 1-2 | - |
| Squamous Epithelial Cell | FEW | - |
| Crystal | Ca Oxalate few | - |
| Cast | NIL | - |
| Bacteria | NIL | - |
| Others | NIL | - |

2025-05-27 08:56:23

End of Report



Technician: Hajar Mohammed
Hussin Mousa
License No: 9245



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Instagram:https://www.instagram.com/alnile_medical

Lab Report

| | | | |
|--------------------|-------------------------|-------------------------|---------------------|
| Patient Name: | IMRAN NIAMATTULLAH | Date: | 27/05/2025 11:23:32 |
| File No: | 25009059 | Age/Gender: | 40y 2m 25d / M |
| Payar Name: | | Sid No: | Bill#20952 |
| Insurance Card No: | -- | Collection Date & Time: | 27/05/2025 11:23:28 |
| Doctor: | Dr. Bassel Ali Al Ratei | Received Date & Time: | 27/05/2025 11:23:32 |
| Billing Time: | 27/05/2025 11:03:28 | Reported Date & Time: | 27/05/2025 11:30:54 |
| | Mobile: 91293143 | Id Card No.: | 87062381 |

| Test Name | Result | Biological Reference |
|-----------|--------|----------------------|
| HBA1C | 9.4 % | 4.0 - 6.0 |

2025-05-27 12:51:33
End of Report



Technician: Hajar Mohammed
Hussin Mousa
License No: 9245

Hajar



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Instagram:https://www.instagram.com/alnile_medical

Lab Report

| | | | |
|--------------------|-------------------------|-------------------------|---------------------|
| Patient Name: | IMRAN NIAMATTULLAH | Date: | 27/05/2025 11:58:38 |
| File No: | 25009059 | Age/Gender: | 40y 2m 25d / M |
| Payer Name: | | Sid No: | Bill#20970 |
| Insurance Card No: | – | Collection Date & Time: | 27/05/2025 11:58:30 |
| Doctor: | Dr. Bassel Ali Al Ratel | Received Date & Time: | 27/05/2025 11:58:38 |
| Billing Time: | 27/05/2025 11:39:37 | Reported Date & Time: | 27/05/2025 12:05:41 |
| | Mobile: 91293143 | Id Card No.: | 87062381 |

| Test Name | Result | Biological Reference |
|--------------------|------------|----------------------|
| ESR(AUTOMATED) | 11.0 mm/hr | < 15.0 |
| C-REACTIVE PROTEIN | 4.41 ng/ml | < 6.0 |

2025-05-27 12:51:08

End of Report



Technician: Hajar Mohammed
Hussin Mousa
License No: 9245



Patient Name: IMRAN
 NIAMATTULLAH
 File No: 25009059
 Age: 40y 2m 25d
 Gender : Male
 Nationality: Pakistan

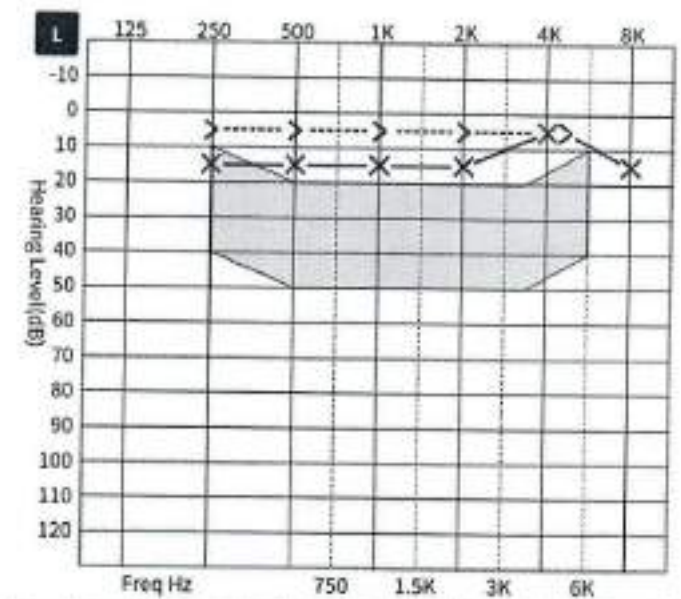
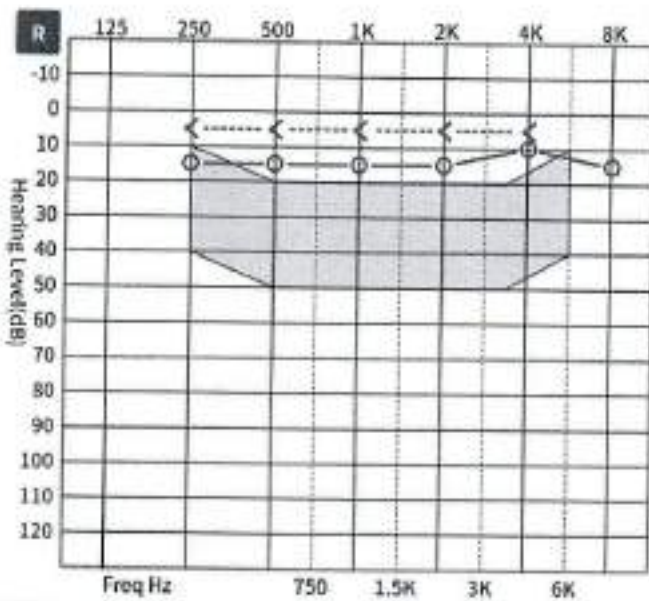
PTA Test Report

ID:25009059

Name: MR. IMRAN NIAMATTULLAH

Gender:Male

Age:40Y



| | 125 | 250 | 500 | 750 | 1K | 1.5K | 2K | 3K | 4K | 6K | 8K |
|------|-----|-----|-----|-----|----|------|----|----|----|----|----|
| Air | | 15 | 15 | | 15 | | 15 | | 10 | | 15 |
| Bone | | 5 | 5 | | 5 | | 5 | | 5 | | |

| | 125 | 250 | 500 | 750 | 1K | 1.5K | 2K | 3K | 4K | 6K | 8K |
|------|-----|-----|-----|-----|----|------|----|----|----|----|----|
| Air | | 15 | 15 | | 15 | | 15 | | 5 | | 15 |
| Bone | | 5 | 5 | | 5 | | 5 | | 5 | | |

Test Result:

B/L HEARING SENSITIVITY WITHIN NORMAL LIMITS



Test Date:2025-05-26 21:56

Printing Date:2025-05-26 01:52

Examiner: _____





Medical Report

| | | |
|----------------------------------|----------------------------|---------------------------------|
| Patient Name: IMRAN NIAMATTULLAH | | Date: 27/05/2025 11:03:12 |
| File No: 25009059 | Age/Gender: 40y 2m 25d / M | Nationality: Pakistan |
| Payer Name: -- | | Doctor: Dr. Bassel Ali Al Ratel |
| Insurance Card No: | ID Card No: 87062381 | Phone: 91293143 |

Vitals:-

| Temperature | BP (SBP/DBP) | Pulse Rate | Respiratory Rate | Weight | Height | SpO2 | RBS: | Pain Level | Abdominal Circumference | Head Circumference | CVP | Body Mass Index |
|-------------|---------------|------------|------------------|--------|--------|-------|------|------------|-------------------------|--------------------|-----|-----------------|
| 36.0° C | 140 / 80 mmHG | 88 bpm | 0 bpm | 0.0kg | 0.0cm | 05PO2 | | 0 | 0.0 | 0.0 | | 0.0 |

Chief Complaints:-

elevated fasting blood glucose

Patient History:-

the patient was referred by the GP for evaluation of high FBG= 9.4 and high TG=244, and an incidental cardiac murmur, the patient works as a driver the patient denies any history of diabetes or hyperlipidaemia, the patient is totally asymptomatic and denies chest pain, dyspnoea or dizziness, no thrust or frequent urination, no visual disturbances, Social. H: non-smoker, non-alcoholic medications: none PE: RESP: clear no wheezing, heart: S1S2 regular, with late systolic murmur at the apex that radiates to the axilla

Radiology Report:-

ECG: Diagnosis: Sinus, Reg. axis: mild LAD, HR=75bpm, P-Wave: WNL, no ST segment deviation, QRS complex: WNL, T-Wave: normal axis and amplitude, no conduction abnormalities, no pathologic Q waves, QT interval: normal Echocardiography: LV: normal in size and function EF=67%, no RWMA, LA: Mildly dilated MV: mildly dilated annulus, the posteromedial leaflet is prolapsed at its distal third with moderate to severe MR AV: 3 leaflets, normal flow and structure RV: normal size, walls, function RA: normal size TV: mild regurgitation, PASP= 250mmhg, normal structure, PV: normal structure and flow Tapse; 38 mm pericardium: dry conclusion: severe MVP with moderate-severe MR.

Management Plan:-

severe MVP+moderate MR, no symptoms and no increase in Pulmonary artery pressure, no dilatation of the left ventricle for follow up after 3 months Type 2 DM newly discovered: start treatment with diet and exercise review 15 days mild hypertriglyceridemia

Investigations:-

| No. | Internal Code | Name |
|-----|---------------|-------------------------------|
| 1 | | HBA1C |
| 2 | | CONVENTIONAL ECHOCARDIOGRAPHY |





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| | | |
|---|-------|---------------------|
| 3 | 86140 | C- REACTIVE PROTEIN |
| 4 | 85652 | ESR |

Prescriptions:-

| No. | MOH Code | Medicine | Dosage | Duration | Remarks |
|-----|----------|--------------------------|--------|----------|---------|
| 1 | | GALYUSMET TAB 50/500 60S | | 30 Days | |

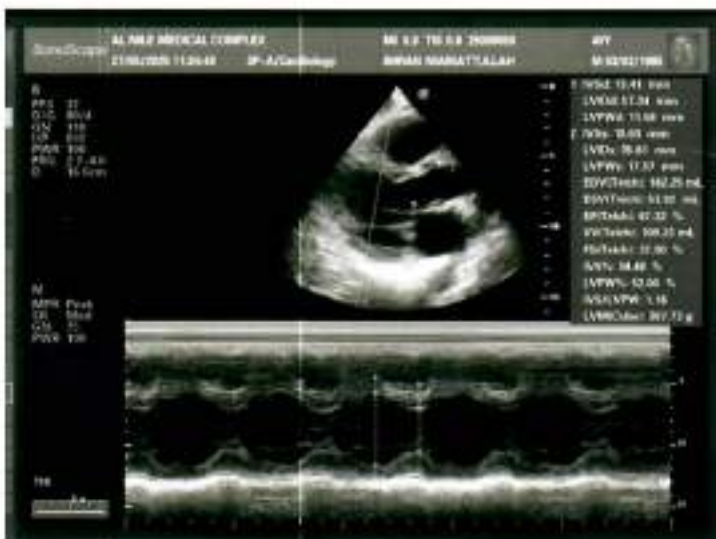
Dr. Bassel Ali Al Ratef

Licence Number : 19770

2025-05-27 12:34:23

End of Report





2025-05-27 08:59:04

Name : imran niematullah

Sex : Male Age : 40

Section: Dr ALI

RoomID: _____

BedID: _____

Operator: asia

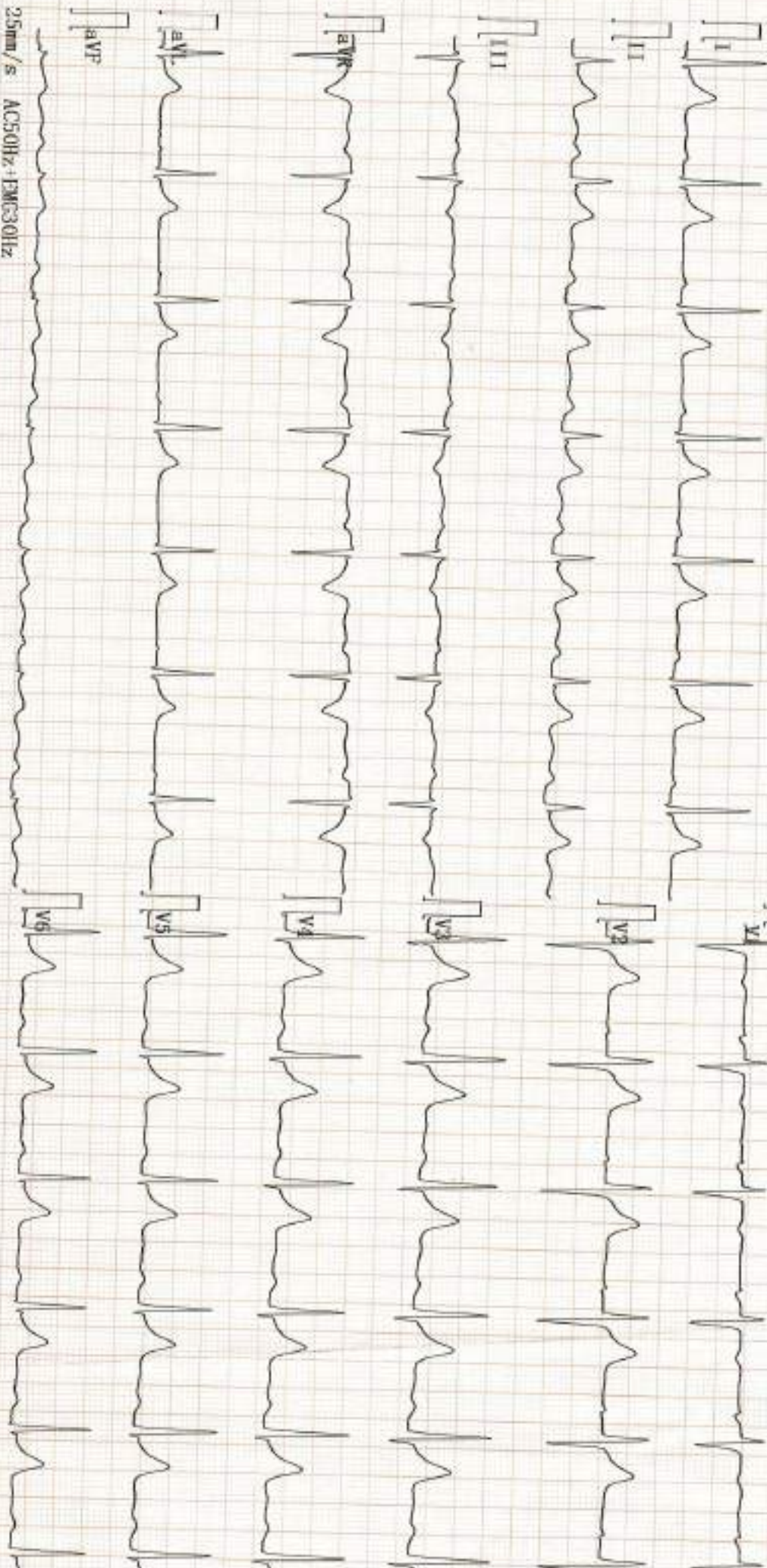
Longitudinal left axis deviation,
I AV block,

Report need physician confirm

Physician: _____



Patient Name: IMRAN
N/A/MS/TT/ELAH
File No: 25009055
Age: 40y 2m 25d
Gender: Male
Nationality: Pakistan



AUTO 10mm/mV

10mm/mV

25mm/s ACS01Hz+EMG30Hz