MEDICAL EVALUATION REPORT FOR OQ CONTRACTORS - SUMMARY T.O

PREMJIT SINGH
0042428 # 47 Y(M) BAS-Rw Bill: 00501
77716 <Blank> 18/05/23 10:35

Civil ID / Passport #	Company ID #	Position
105985642		HDD
Nationality	**Age / Sex**	**Location**
Indian	12/2/76 47 M	

EXAMINATION TYPE

Examination [✓] Pre-employment [ ] Periodic [ ] Exit

VITAL SIGNS & BODY MEASURES

Blood Pressure Category: 140/90 [ ] Normal [ ] Prehypertension [✓] Hypertension Stage 1 [ ] Hypertension Stage 2 [ ] Hypertension Crises
BMI Category: 29 [ ] Underweight [ ] Normal [✓] Overweight [ ] Obese [ ] Morbid Obesity
Remarks:

VISUAL TEST

Visual Acuity Test RT LT
Colour Vision Test [✓] Normal [ ] Abnormal [ ] Not Required
Visual Field Test [✓] Normal [ ] Abnormal
Stereoscopic Vision Test [✓] Normal [ ] Abnormal [ ] Not Required
Pre-existing condition:
Remarks:

RESPIRATORY SYSTEM

Spirometry Test [✓] Normal [ ] Abnormal [ ] Not Required
Chest X-Ray [✓] Normal [ ] Abnormal [ ] Not Required
Physical Assessment [✓] Normal [ ] Abnormal
Pre-existing condition:
Remarks:

ENT SYSTEM

Audiometry Test [✓] Normal [ ] Abnormal [ ] Not Required
Otoscopy [ ] Normal [ ] Abnormal [ ] Not Required
Physical Assessment [✓] Normal [ ] Abnormal (Whisper, Weber & Rinne Tests)
Pre-existing condition:
Remarks:

CARDIOVASCULAR SYSTEM

ECG Test [✓] Normal [ ] Abnormal [ ] Not Required
Physical Assessment [✓] Normal [ ] Abnormal
Pre-existing condition:
Remarks:

NEUROLOGICAL SYSTEM

Physical Assessment [✓] Normal [ ] Abnormal
Pre-existing condition:
Remarks:

MUSCULOSKELETAL SYSTEM

Physical Assess. [✓] Normal [ ] Abnormal
Lumbar X-Ray [✓] Normal [ ] Abnormal [ ] Not Required
Pre-existing condition:
Remarks:

LABORATORY INVESTIGATIONS

Lab Tests: [ ] Normal [✓] Abnormal If abnormal, please specify below:
Pre-existing condition: ↑ Lipids, ↑ Sugar.
Remarks:
Blood Grouping: O +ve.

Glucose Level Category 160 [ ] Normal 80 – 100 mg/dl [ ] Pre diabetic 100 – 125 mg/dl [✓] Diabetic > 126 mg/dl
Cholesterol Risk Category 150 [ ] Low Risk LDL is less 130 mg/dl [✓] Moderate Risk LDL 130-159 mg/dl [ ] High Risk LDL >160 mg/dl
Routine Urine Analysis [✓] Normal [ ] Abnormal [ ] Not Required
Stool Analysis [ ] Normal [ ] Abnormal [ ] Not Required

QUESTIONNAIRES

	Medical & Surgical History Questionnaire	Remarks
	Respiratory Protection Questionnaire	Remarks
	Hearing Conservation Questionnaire	Remarks
	Screening Questionnaire	Remarks

Fagerstrom Test - Smoking [ ] Non-smoker [ ] Low dependence [ ] Low to Mod dependence [ ] Moderate dependence [ ] High dependence
CAGE Questionnaire Alcohol Use [ ] No use of alcohol [ ] Screening negative [ ] Clinically significant
SRQ-20 Self-reported Questionnaire [ ] No positive answers [ ] Positive answers Factor I (1 to 6) [ ] Positive answers Factor II (7 to 12)
[ ] Positive answers Factor III (13 to 16) [ ] Positive answers Factor IV (17 to 20)

Clinic Doctor Name	License #	Hospital/Policlinic	Doctor Signature & Clinic Stamp	Issue Date
				30/5/23

PEACE LAND MEDICAL CENTER 2775

Dr. MOHAMMED AKBAR KHAN
General Practitioner
MOH Lic. No. 4404

FITNESS TO WORK CERTIFICATE - OQ CONTRACTORS

PREMJIT SINGH
0042429 # 47 Y(M) BAS-Rw Bill: 00501
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EMPLOYEE IDENTIFICATION

Civil ID / Passport #	Company ID #		Position
			H DD

Nationality	Age	Sex		Location

EXAMINATION TYPE

- [✓] Pre-employment Examination (PRE)
- [ ] Change of Position Examination
- [ ] Emergency Response Team
- [ ] Periodic Medical Examination (PME)
- [ ] Exit Examination
- [ ] Travelling Examination
- [ ] Post-absence Examination
- [ ] Critical Activities Examination
- [ ] Medical Surveillance

Medical Suitability for Work

Medical Suitability for Work

[✓] Fit to work
[ ] Fit with following restrictions
[ ] Pending Fitness
[ ] Not fit to work

FIT

Restrictions

- [ ] Working at height
- [ ] Working in confined space
- [ ] Working with electricity
- [ ] Working near rotating machinery
- [ ] Working in noise area
- [ ] Working in extreme heat
- [ ] Handling chemical products
- [ ] Use of respirator
- [ ] Pulling, pushing or carrying weight
- [ ] Ascend/descend ladders and stairs
- [ ] Walking or standing for long distance/period
- [ ] Repetitive movements
- [ ] Mobile machinery operation
- [ ] Heavy lifting operation
- [ ] Driving vehicle
- [ ] Emergency response duty

Other, specify

New Position	New Function	New Department
NA	NA	NA

Examanation Date	Exams Perfomed
18/5/23	47M – Diet, exercise, & wt advise - HTN/DLP/DM on Rx to fitness from NMC. - F/U in LHC for B.P. charting / glycemia. - Repeat lab & B.P. charting after 3 months & Review.

Medical Review Date	Employee Signature

Doctor Name	Medical License	Hospital	Medical Doctor Signature

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