

Medical Fitness Certificate

Name of the Examined employee: MUHAMMAD NAEEM

Age: 41

ID NUMBER:

Job Title:

Date of Medical Examination: 28.08.2023

Examining Physician:

Medical Centre: APOLLO HOSPITAL MUSCAT

Company:

Assessment Result:

Fit to work without restrictions

This Certificate is valid for 2 years from the date of medical examination

Fitness Classifications:

- Fit to work without restrictions
- Fit to work with restriction
- Unfit to work Temporarily or Definitely


Restrictions List:

- R1: Unfit to work offshore, on marine vessels and in remote locations.
R2: Unfit for Lifting and strenuous efforts.
R3: Unfit to work in certain countries, check with geomarkethealth advisor.
R4: Unfit to work in jobs requiring precise color vision.
R5: Unfit to work in job with high level of noise.
R6: Unfit to work in high risk of malaria countries.
R7: Unfit to work in extreme heat.
R8: Unfit to work in extreme cold.
R9: Contact Geomarket health advisor/international medical coordinator – there exist specific restriction.
R10: Unfit to work for a temporarily of time until further notice.
R11: Unfit to work in jobs requiring good visual acuity (eg: driving company vehicle).
R12: Fit only for defined period of time (1, 3 or 6 months) and must be reassessed and fitness redefined.
R13: Unfit to drive company vehicle.
R14: Unfit to fly long haul flights.
R15: Unfit to work in heights and confined spaces.

Examining Physician Stamp and signature



CONFIDENTIAL MEDICAL TO BE COMPLETED BY THE EMPLOYEE

Med-check History Form		Name: <u>Muhammad Naeem</u>	
		GIN # <u>76647418</u>	
Place of examination <u>Apollo Hospital</u>		Date <u>28/8/2023</u>	
Age: <u>41</u>		Nationality: <u>Pakistani</u>	
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated /Divorced	
		Blood Group	
		Mobile # <u>92887274</u>	
		Number of children:	
DO YOU HAVE OR HAVE YOU HAD:- (Tick "Yes" or "No" column or put a (?) if uncertain exclude minor ailments.)			
	Y	N	
1. Sinus trouble		<input checked="" type="checkbox"/>	21. Cancer
2. Neck swelling/glands		<input checked="" type="checkbox"/>	22. Heart Disease
3. Difficulty in vision		<input checked="" type="checkbox"/>	23. Rheumatic fever
4. Any ear discharge		<input checked="" type="checkbox"/>	24. Abnormal heartbeat
5. Asthma/bronchitis		<input checked="" type="checkbox"/>	25. High blood pressure
6. Hayfever /other significant allergy		<input checked="" type="checkbox"/>	26. Stroke
7. Any skin trouble		<input checked="" type="checkbox"/>	27. Serious chest pain
8. Tuberculosis		<input checked="" type="checkbox"/>	28. Any blood disease
9. Shortness of breath		<input checked="" type="checkbox"/>	29. Kidney disease
10. Coughed/vomited blood		<input checked="" type="checkbox"/>	30. Blood in urine
11. Severe abdominal pain		<input checked="" type="checkbox"/>	31. Diabetes
12. Stomach ulcer		<input checked="" type="checkbox"/>	32. Headaches/migraine
13. Recurrent indigestion		<input checked="" type="checkbox"/>	33. Dizziness/fainting
14. Jaundice or hepatitis		<input checked="" type="checkbox"/>	34. Epilepsy
15. Gall Bladder disease		<input checked="" type="checkbox"/>	35. Joints/spinal trouble
16. Marked change in bowel habits		<input checked="" type="checkbox"/>	36. Surgical operation
17. Blood in stools (motions)		<input checked="" type="checkbox"/>	37. Serious accident/fracture
18. Marked change in weight		<input checked="" type="checkbox"/>	38. Tropical disease
19. Varicose veins		<input checked="" type="checkbox"/>	39. Fear of heights
20. Lump in breast/arm/pl		<input checked="" type="checkbox"/>	
		HAVE YOU EVER BEEN:-	
		40. Rejected for employment or insurance for medical reasons	
		41. Awarded benefits for industrial injury/illness	
		42. Treated for a mental condition, e.g. depression	
		43. Treated for problem drinking or drug abuse	
		44. Exposed to toxic substance or noise	
FOR WOMEN ONLY			
Have you ever had:-			
		45. An abnormal smear	
		46. Any gynaecological treatment	
		47. Are you pregnant?	
		48. HAVE YOU HAD AN ILLNESS NOT MENTIONED ABOVE	
How much tobacco each day?		Average daily alcohol consumption	
Have you ever taken illicit drugs? ()			
FAMILY HISTORY: Diabetes () 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 in general terms may be revealed to the Company's Doctors, and the details sent to them by the examining Doctor.			
Date: <u>28-08-2023</u>			
Signature of Applicant: 			

CONFIDENTIAL MEDICAL TO BE COMPLETED BY THE EXAMINING PHYSICIAN

PHYSICAL EXAMINATION IF ABNORMAL, PLEASE DETAIL

Visual Fields:		Color Vision:		
Speech:		Whisper test:		
Near Vision Right eye:	N/G	Near Vision Left eye:	N/G	
Distant Vision Left eye:	0/6	Distant Vision Right eye:	0/6	
Height: 180 cm.	Weight: 92 kg	BMI: 28.4	BP: 140/90 mmHg	Pulse: 88/mnt
Body System/Organ	N	A	Abnormality if any	
Eyes and pupils	/			
Ear/nose/throat	/			
Teeth and mouth	/			
Lungs and chest	/			
Cardiovascular	/			
Abdomen	/			
Hernial orifices	/			
Anus and rectum	/			
Genito-urinary	/			
Extremities	/			
Musculoskeletal	/			
Skin/varicose viens	/			
Neurological	/			
Mental fitness	/			
Breast	/			

TO BE COMPLETED BY THE EXAMINING PHYSICIAN

Name: <u>Mahammad Naem</u>	Age: <u>41</u>	Sex: <u>M</u>	Company:	GIN:
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Past Medical History:	Blood Group:
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Allergies:		
Vaccination	Date of Initial Injection	Booster Due Date
Hepatitis A:		
Hepatitis B:		
Typhoid Fever		
Influenza		

Tests Results	
Audiogram:	<u>Normal</u>
DSU 5 Panel	<u>Negative</u>

ECG:	<u>WNL</u>
Chest X-Ray	<u>WNL</u>

Blood Investigations:					
RBCs	<u>5.61</u>	4.20-6.30 X10 ⁶ /UL	SGOT	<u>21.20</u>	Male: 10-60 Female: 10-35 U/L
WBCs	<u>8.13</u>	4.0-11.0X10 ³ /UL	SGPT	<u>28.90</u>	Male: Up to 41 Female: 10-35 U/L
NEUTRO	<u>49.60</u>	37-72%	GGT	<u>26.50</u>	0-50 U/L
EOSINO	<u>4.40</u>	0-6%	FBS:	<u>96.50</u>	60-110 mg/dl
BASO	<u>0.20</u>	0-1%	CHOLESTEROL:	<u>217.80</u>	Up to 200 mg/dl
LYMPHO	<u>36.70</u>	10-50%	HDL	<u>47.30</u>	20-60 mg/dl
MONO	<u>9.10</u>	0-14%	LDL	<u>144.64</u>	Up to 130 mg/dl
HEMATOCRIT	<u>49.40</u>	37-51%	TRIGLYCERIDES	<u>129.80</u>	35-175 mg/dl
HEMOGLOBIN	<u>16.20</u>	Male: 13.5-18.0 Female: 11.5-16.0 g/dl	CREATININE	<u>0.89</u>	Male: 0.7-1.2 mg/dl Female: 0.5-0.9 mg/dl
ESR	<u>05</u>	Male: 0-10 mm/hr Female: 0-20 mm/hr	URIC ACID	<u>Sickle-Neg</u>	Male: 3.6-7.7 mg/dl Female: 2.5-6.8 mg/dl


Urine Analysis			
Blood	<u>Negative</u>	Sugar	<u>Negative</u>
Albumin	<u>Negative</u>	Others	<u>Normal</u>

Stool Analysis	
Parasites	<u>Nx</u>
Blood:	<u>Nx</u>

Comments	<u>Framingham Score → 2.3%</u> <u>HBP Repeat Lipid Profile after 3 months.</u>
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Examining Physician:

Hospital/Clinic Seal


Dr. RAJESH R.R MBBS
 Medical Officer
 MOH Licence No.: 4744
 Apollo Hospital Muscat

Dr. DIPALI JES
 MEDICAL OFFICER
 MOH Licence No. 15001
 APOLLO HOSPITAL MUSCAT



Schlumberger-Private

DEPARTMENT OF LABORATORY SERVICES

File No: 0396114	Report No: 0573100
Name: MUHAMMAD NAEEM	Sample Date: 28/08/2023 Time: 8:16
Address:	Received Date: 28/08/2023 Time: 9:19
Gender: M Age: 41 Y Nationality: PAKISTANI	Report Date: 28/08/2023 Time: 11:11
GSM No.: 92887274 ID Card No.: 76647418	Bill No: 1174876 Bill Date: 28/08/2023
Doctor: DR. RAJESH RAJENDRAN	Company: OTHERS.

INVESTIGATION	RESULT	REFERENCE RANGE
TRUCK OMAN PRE-EMPLOYMENT CHECK UP		
Fasting Blood Glucose	96.50 mg/dL	Normal: <100 mg/dl Prediabetes: 100-125 mg/dl Diabetes: 126 mg/dl or higher
ESR	05 mm/hr	Male : 0-10 mm/hour Female: 0-20 mm/hour
S.Creatinine	0.89 mg/dL	Male : 0.7 - 1.2 mg/dl Female : 0.5 - 0.9 mg/dl
Sickle cell Screen test	Negative	
CBC		
WBC COUNT	8.13 10 ³ /uL	4.0-11.0x10 ³ /mm ³
RBC	5.61 10 ⁶ /uL	4.20 - 6.30 10 ⁶ /uL
HGB	16.20 g/dl	male 13.5 -18.0 g/dl female 11.5 -16.0 g/dl
HCT	49.40 %	37.0 - 51.0 %
MCV	88.10 fL	80.0 - 97.0 fL
MCH	28.90 pg	26.0 - 32.0 pg
MCHC	32.80 g/dL	31.0 - 36.0 g/dL
RDW	12.30 %	11.0 - 14.5 %
NEUT#	4.03 10 ³ /uL	1.50 - 7.00 10 ³ /uL
LYMPH#	2.98 10 ³ /uL	0.60 - 4.10 10 ³ /uL
MONO#	0.74 10 ³ /uL	0.00 - 0.70 10 ³ /uL
EOS#	0.36 10 ³ /uL	0.00 - 0.40 10 ³ /uL
BASO#	0.02 10 ³ /uL	0.00 - 0.10 10 ³ /uL
NEUT%	49.60 %	37.0 - 72.0 %

Reported By:



M RASHID PERVEZ

Lab Technologist

MOH License No: 5966

Printed at: 28/08/2023 11:48:05 AM

Verified By:



Dr. Mohammed Atif Syed

Specialist Pathologist

MOH License No: 20491

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Doctor: DR. RAJESH RAJENDRAN	Company: OTHERS.

INVESTIGATION	RESULT	REFERENCE RANGE
LYMPH%	36.70 %	10.0 - 58.5 %
MONO%	9.10 %	0.0 - 14.0 %
EOS%	4.40 %	0.0 - 6.0 %
BASO%	0.20 %	0.0 - 1.0 %
PLATELET	235.00 10 ³ /uL	140 - 440 10 ³ /uL
LFT		
Total Bilirubin	1.05 mg/dL	Up to 1.1 mg/dL
Direct Bilirubin	0.18 mg/dL	Up to 0.3 mg/dL
Indirect Bilirubin	0.87 mg/dL	0.2 - 0.8 mg/dL
AST (SGOT)	21.20 U/L	Men : 10 - 50 U/L Female : 10 - 35 U/L
ALT (SGPT)	28.90 U/L	Men : Up to 41 U/L Female : 10 - 35 U/L
ALP	67.60 U/L	Men : 40 - 129 U/L Female : 35 - 104 U/L
Total Protein	7.20 g/dL	6.6 - 8.7 g/dL
Albumin	4.10 g/dL	3.4 - 4.8 g/dL
Globulin	3.1 g/dL	1.8 - 3.6 g/dL
GGT	26.50 U/L	0 - 50 U/L
A:G Ratio	1.32258	1.1-1.8
LIPID PROFILE		
Total Cholesterol	217.80 mg/dL	< 200 mg/dL
Triglyceride	129.30 mg/dL	<150 mg/dl
HDL Cholesterol	47.30 mg/dl	>45 mg/dl

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GSM No.: 92887274 ID Card No.: 76647418
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Company: OTHERS.

INVESTIGATION RESULT REFERENCE RANGE

LDL Cholesterol 144.64 mg/dl <100 mg/dl
Total Chol/HDL Chol ratio 4.6 Desirable < 4

URINE DRUG SCREEN

Amphetamine (AMP) Negative Negative
Barbiturates (BAR) Negative Negative
Cocaine (COC) Negative Negative
Morphine (MOR) Negative Negative
Marijuana (THC) Negative Negative

URINE ROUTINE ANALYSIS

Physical

Quantity 30 ml
Colour Pale Yellow Pale yellow
Sp. Gravity 1.030 1.003-1.035
pH 5 5-9
Appearance Clear Clear

Chemical

Glucose Negative Negative
Protein Negative Negative
Ketones Negative Negative
Blood / haemoglobin Negative Negative
Bilirubin Negative Negative
Urobilinogen Normal Normal
Nitrite Negative Negative
Leucocytes Negative Negative

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INVESTIGATION RESULT REFERENCE RANGE

Microscopic Examination

Pus Cells	2 - 3 Cells/hpf	0-5 cells/hpf
RBC	NIL cells/hpf	0-2 cells/hpf
Epithelial Cells	0-1 Cells/hpf	0-8 cells/hpf
Casts	Absent	Absent
Crystals	Absent	Absent
Others	Absent	Absent

STOOL ROUTINE ANALYSIS

PHYSICAL

Colour	Brownish	Yellowish Brown
Consistency	Semi solid	Well Formed
Reaction	Alkaline	Acidic
Adult Worms	Absent	Absent

MICROSCOPIC

Ova:	Absent	Absent
Cyst:	Absent	Absent
Pus Cells:	0-2 Cells/hpf	Few
RBCs	Absent Cells/hpf	Absent
Epithelial cells	Few Cells/hpf	Few
Trophozoites	Absent	Absent
Larvae	Absent	Absent
Eggs	Absent	Absent
Worms	Absent	Absent
Fat globules	Absent	Absent

Reported By:



M RASHID PERVEZ
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DEPARTMENT OF LABORATORY SERVICES

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Doctor: DR. RAJESH RAJENDRAN **Company:** OTHERS.

INVESTIGATION	RESULT	REFERENCE RANGE
Vegetable cells	Present	Present

Remarks and comments - Sickle cell screen test:

- 1.A False negative solubility test result may occur with blood taken from severe anemic patients or if the proportion of Hb-S is less than 20 % or following blood transfusion.
- 2.A False positive result may be caused by the presence of abnormal plasma proteins or when patient is receiving parenteral nutrition.
- 3.This test provides only a preliminary screening result, Hb HPLC must be used to obtain a confirmed results.
- 4.There is a possibility that an interfering substance in the specimen may cause erroneous results.

Urine drug screen

Method:

Rapid Chromatographic Immunoassay

Interpretation:

Negative: The drug concentration is below the designated cut off levels for the particular drug tested.

Positive: The drug concentration is greater the designated cut off levels for the particular drug tested

Remarks and comments - Urine drug screen

- 1.Multi-Drug Rapid Test Panel (Urine) provides only qualitative, preliminary analytical results.
- 2.A secondary analytical method must be used to obtain a confirmed result.
- 3.Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method.
- 4.This test does not distinguish between drug abuse and certain medications
- 5.A positive result may be obtained from certain foods or food supplements.

Reported By:

M RASHID PERVEZ

Lab Technologist

MOH License No: 5968

Printed at: 28/08/2023 11:48:05 AM

Verified By:


Dr. Mohammed Atif Syed

Specialist Pathologist

MOH License No: 20491

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Fitness to Work Certificate for drivers

Employee Data		Date <u>28/8/23</u>	
Name <u>Muhammed Naeem</u>		Department/Company	
I.D No.	Age <u>41</u>	Occupation	
Type of Medical Evaluation		Mark those applying ✓	
A5- HVD- Crane or forklift driving & all heavy vehicles		A7- Professional driving-light vehicles	
<p>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.</p>			
Fit with no restrictions		✓	
Fit with following restriction(s)			
<i>The employee is fit for above work but should avoid the following task(s)</i>	<i>Temporary restriction</i>	<i>Permanent restriction</i>	
Work near moving machinery or sharp edges			
Operate Heavy motor vehicles, forklifts or heavy machinery			
Other (Specify)			
Temporary Unfit until			
Permanently Unfit			
<u>Dr. Rajesh</u> Name of health advisor	 Signature	<u>28/8/23</u> Date	

Id: _____

28/08/2023 08:40:47

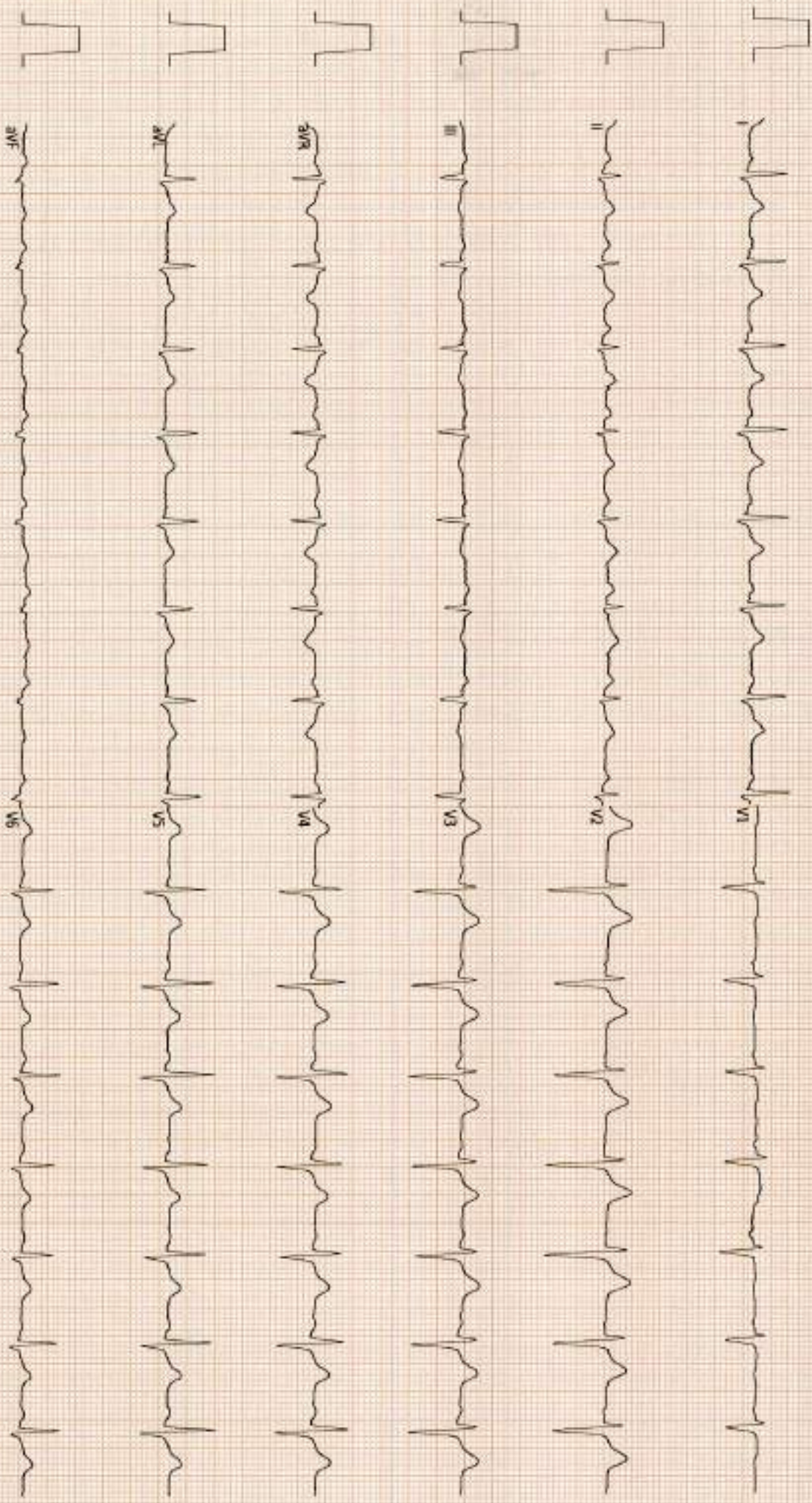
Female - (L) Unknown
Height: 0 cm Weight: 0 kg BP: 0/0 mmHg

Med:
Tech:
Note:

HR: 92 bpm
PR: 142 ms
QRS: 98 ms
QT/QTc: 368/474 ms
QTcB: 456 ms
QTcF: 474 ms

R-R: 0.97/0.67 mV
S-R: 1.64 mV
AVS: 63/5/18°

Muhammad Naem
30E114, 414|M



AUDIOGRAM EXAMINATION SHEET

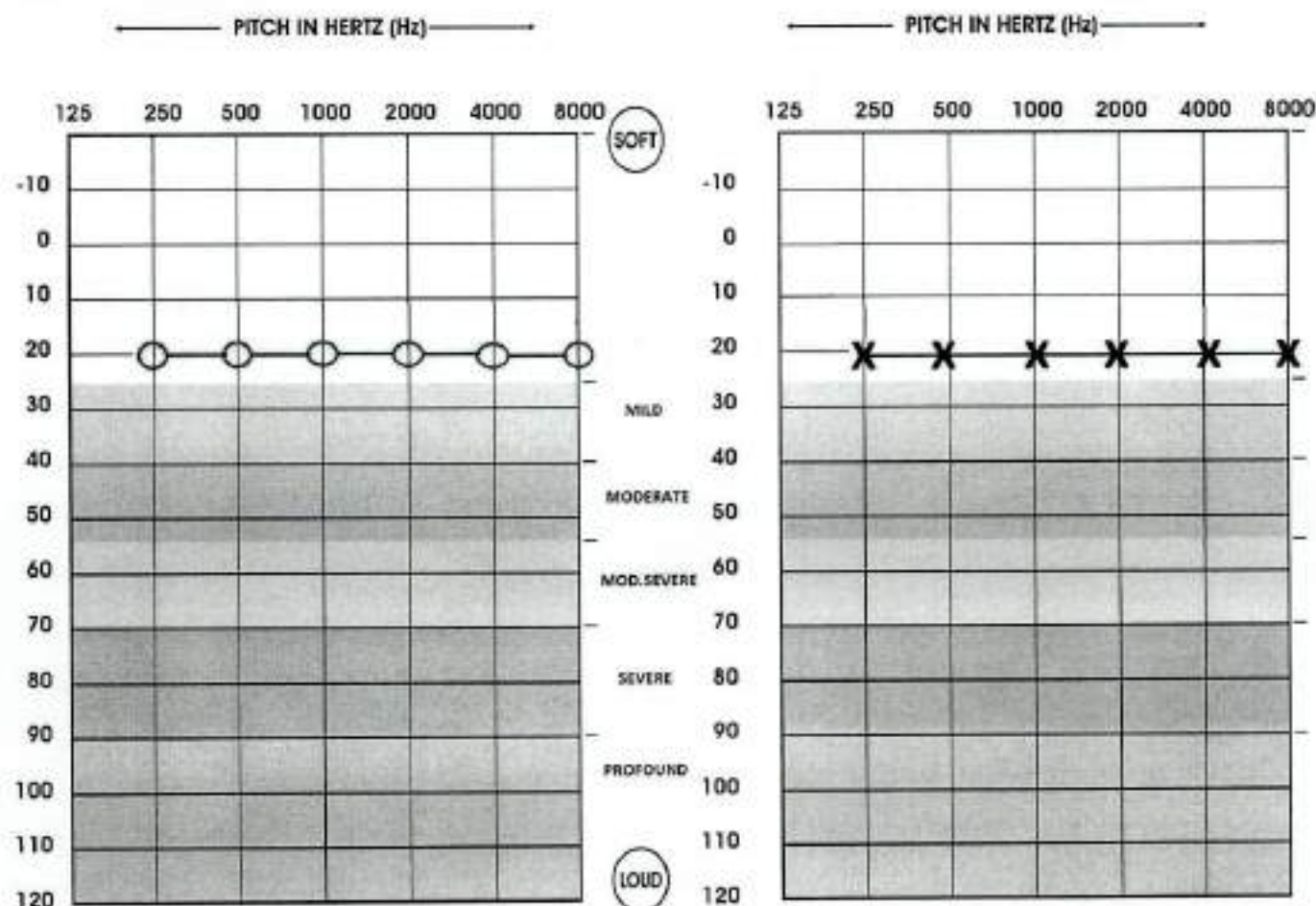
P.O. Box : 1997, Al-Hamriya, Postal Code : 131
Muscat, Sultanate of Oman
Tel.: 2478 7766, Fax: 2470 0093

FILE NO: 396114 BILL NO: DATE: 28-08-23

NAME: MUHAMMAD NAEEM AGE / SEX: 41Y/M

COMPANY: TRUCK OMAN DOB:

CONSULTANT (REF) :



WEBER					

dBHL	PTA	SRT	SIS(%)	MCL	UCL	SPECIAL TESTS			
						SISI	TDT	MLB/BLB	OAE
RIGHT	<u>20</u>								
LEFT	<u>20</u>								

INTERPRETATION :

BILATERAL HEARING SENSITIVITY WITHIN NORMAL LIMITS

RECOMMENDATION :

NAFLA K.V.
AUDIOLOGIST
MOH Licence No.: 22832
Apollo Hospital Muscat
SIGNATURE

RADIOLOGY

SI No: 16772	Date: 28/08/2023	
Patient Name: MUHAMMAD NAEEM	Reg No: 396114	Bill No:
Age: 41 Y	Gender: Male	Nationality: PAKISTANI
Address: al-hamria		Phone:
Company: OTHERS.	Policy No:	
Certificate No:	Consultant Name: DR. RAJESH RAJENDRAN	
Region: CHEST PA		

RADIOGRAPH CHEST PA VIEW

OBSERVATION : Allowing for the rotation and mid inspiratory film
Trachea appears to be in mid line.

Bilateral lung fields appear clear. No mass lesion or opacification.

Bilateral costophrenic and cardiophrenic angles appear normal.

Bilateral hilum appears symmetrical and normal in size.

Cardiac silhouette appears within normal limits.

Bony thoracic appears normal.

No Soft tissue mass or calcification can be seen

IMPRESSION:

Unremarkable chest radiograph

Please correlate clinically & other investigation.

Please note: This is a imaging study and has its own limitations. This is a opinion based on image interpretation and it is not a diagnose on itself. Impression should be considered as professional opinion & correlated with clinical evidence ,reconfirmed by further investigations and relevant data as indicated .If possible the findings should be reconfirmed on higher resolution imaging, spectral sequences and sequences and with other modalities.

DR. SARADA NUTAKKI

RADIOLOGIST