



Al Nile
Medical Complex
مجمع النيل الطبي

Medical Fitness Certificate

Name of the Examined : Mr. YOUNIS HUMAID SALEEM

Age : 30yrs/M

ID Number : 18936216

Date of medical Examination: 20/02/2025

Examining physician : DR. ISLAM ATEYA

Medical centre : AL NILE MEDICAL CENTER

Assessment Results

The certificate is valid for 2 years from the date of medical examination

Fitness classifications:

- Fit to work without restrictions ✓
- Fit work with restrictions
- Unfit to work temporarily or definitely

FIT

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 geo market health 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 Geo market 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.

COMMENTS

the scp asymptomatic

Examining physician stamp and signature

Islam Ateya



Hospital/ Clinic seal



CONFIDENTIAL MEDICAL TO BE COMPLETED BY THE EMPLOYEE

Med – check History form		Name: MR. YOUNIS HUMAID	
		GIN:	
Place of examination Al Nile Medical Complex		Date 18/02/25	Mobile: 98521504
Age: 30y	Nationality: OMANI	Blood Group	O' positive
☒ Male ☐ Female	☒ Married ☐ Single ☐ Separated / Divorced	Number Of Children: 5	
Do You Have You Had: (Tick "Yes " or "No " column or put a (?) if uncertain exclude minor ailments.)			
	Y	N	
1- SINUS TROUBLE		☒	21- CANCER
2- NECK SWELLING / GLANDS		☒	22- HEART DISEASE
3- DIFFICULTY IN VISION		☒	23- RHEUMATIC FEVER
4- ANY EAR DISCHARGE		☒	24- ABNORMAL HEARTBEAT
5- ASTHMA / BRONCHITIS		☒	25- HIGH BLOOD PRESSURE
6- HAYFEVER / OTHER SIGNIFICANT ALLERGY		☒	26- STROKE
7- ANY SKIN TROUBLE		☒	27- SERIOUS CHEST PAIN
8- TUBERCULOSIS		☒	28- ANY BLOOD DISEASE
9- SHORTNESS OF BREATH		☒	29- KIDNEY DISEASE
10- COUGHED / VOMITED BLOOD		☒	30- BLOOD IN URINE
11- SEVERE ABDOMINAL PAIN		☒	31- DIABETES
12- STOMACH ULCER		☒	32- HEADACHES / MIGRAINE
13- RECURRENT INDIGESTION		☒	33- DIZZINESS / FAINTING
14- JAUNDICE OR HEPATITIS		☒	34- EPILEPSY
15- GALL BLADDER DISEASE		☒	35- JOINTS / SPINAL TROUBLE
16- MARKED CHANGE IN BOWEL HABITS		☒	36- SURGICAL OPERATION
17- BLOOD IN STOOLS (MOTIONS)		☒	37- SERIOUS ACCIDENT / FRACTURE
18- MARKED CHANGE IN WEIGHT		☒	38- TROPICAL DISEASE
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 ILICITED 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 COMPANYS DOCTORS, AND THE DETAILS SENT TO THEM BY THE EXAMINING DOCTOR.			
DATE: 18/2/25			
SIGNATURE OF APPLICANT: 			



VISUAL FIELDS:	N	COLOR VISION:	N
SPEECH:	N	SHISPER TEST:	N
NEAR VISION RIGHT EYE:	6/6	NEAR VISION LEFT EYE:	6/6
DISTANT VISION LEFT EYE:	6/6	DISTANT VISION RIHT EYE:	6/6
HEIGHT: 165cm	WEIGHT: 77kg	BMI: 28.2	BP: 140/90
			PULSE: 94/min

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	✓		

محمد بن عبد الله
 Dr. Mohamed Bakr
 General Practitioner
 Signature



CONFIDENTIAL MEDICAL

TO BE COMPLETED BY THE EXAMINING PHYSICIAN

NAME: <u>Younis Humaid</u>	AGE: <u>30y</u>	SEX: <u>M</u>	COMPANY:	GIN:
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PAST MEDICAL HISTORY		BLOOD GROUP	
		O +ve	
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>-ve</u>

ECG: <u>Normal</u>
CHEST X-RAY: <u>Normal</u>

BLOOD INVESTIGATIONS					
RBCS	<u>5.38</u>	4.20-6.30*10 ⁶ /UL	SGOT	<u>23.1</u>	MALE:10-50 FEMALE:10-35U/L
WBCS	<u>5.410</u>	4.0-11.0*10 ³ /UL	SGPT	<u>31.40</u>	MALE:UP TO 41 FEMALE:10-35U/L
NEUTRO	<u>42.1</u>	37-72%	GGT	<u>21</u>	0-50/U/L
EOSINO	<u>1.7</u>	0-6%	FBS:	<u>8.3</u>	60-110 MG/DL
BASO	<u>0.4</u>	0-1%	CHOLESTEROL	<u>175.7</u>	UP TO 200 MG/DL
LYMPHO	<u>48.40</u>	30-58%	HDL	<u>48.18</u>	20-60 MG/DL
MONO	<u>7.3</u>	0-14%	LDL	<u>103</u>	UP TO 130 MG/DL
HEMATOCRIT	<u>44.80</u>	37-51%	TRIGLYCERIDES	<u>121.50</u>	35-175 MG /DL
HEMOGLOBIN	<u>15</u>	MALE:13.5-18.0 FEMALE:11.5-16.0G/DL	CREATININE	<u>1.3</u>	MALE:0.7-1.2 MG/DL FEMALE:0.5-0.9MG/DL
ESR	<u>6.0</u>	MALE: 0-10 MM/HR FEMALE:0-20 MM/HR	URIC ACID	<u>7.6</u>	MALE:3.6-7.7 MG /DL FEMALE:2.5-6.8 MG /DL

URINE ANALYSIS			
BLOOD	<u>NIL</u>	SUGAR	<u>NIL</u>
ALBUMIN	<u>NIL</u>	OTHERS	<u>NIL</u>
STOOL ANALYSIS			
PARASITES	<u>NIL</u>	BLOOD	<u>+</u>

COMMENTS	<u>N</u>
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EXAMINING PHYSICIAN

Signature
 Dr. BLAS ATEYA MOHAMMED SAKR
 General Practitioner





Patient Id :

Name :

Consultant :

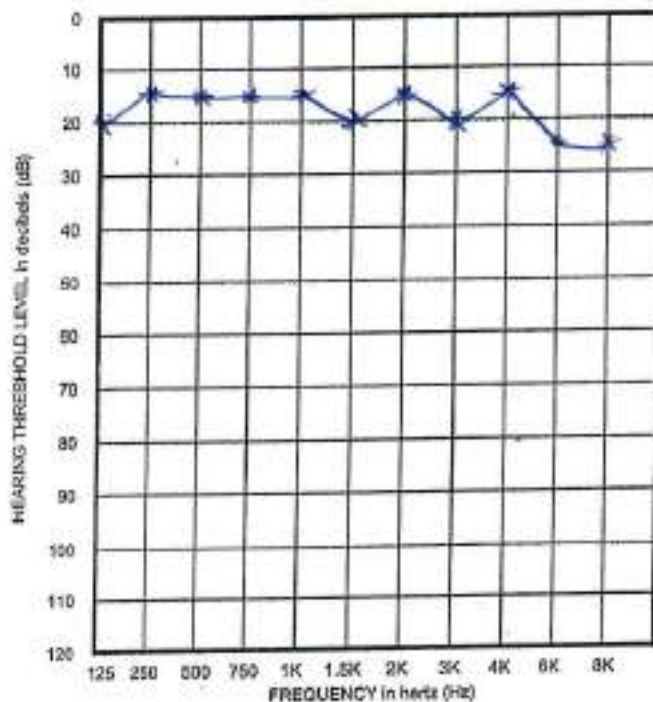
Test: SCHLUMBERGER FITNESS TO W
Name: YOUNIS HUMAID SALEEM A
File No: 25052207 Age/Sex: 30 (Y) / M
Date: 2025-02-18 Specimen ID: 2982



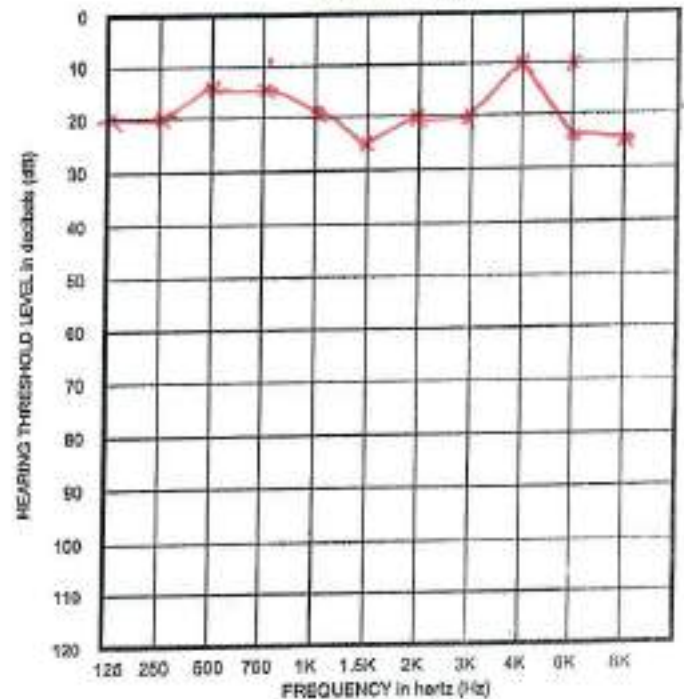
Age / Gender : 30y / M

Report Date : 18/2/25

LEFT EAR



RIGHT EAR



PURE TONE AVERAGE (500-1000-2000 Hz)

Ear	Air	Bone
RIGHT		
LEFT		

Provisional Diagnosis:

Bilateral hearing capacity is within the normal limits



Signature Audiologist

2025-02-18 08:36:48

Name : Younis

Sex : Male Age : 30

Section: dr islam

RoomID:

BedID:

ID: 25002207

Operator: haryanu

Custom2:

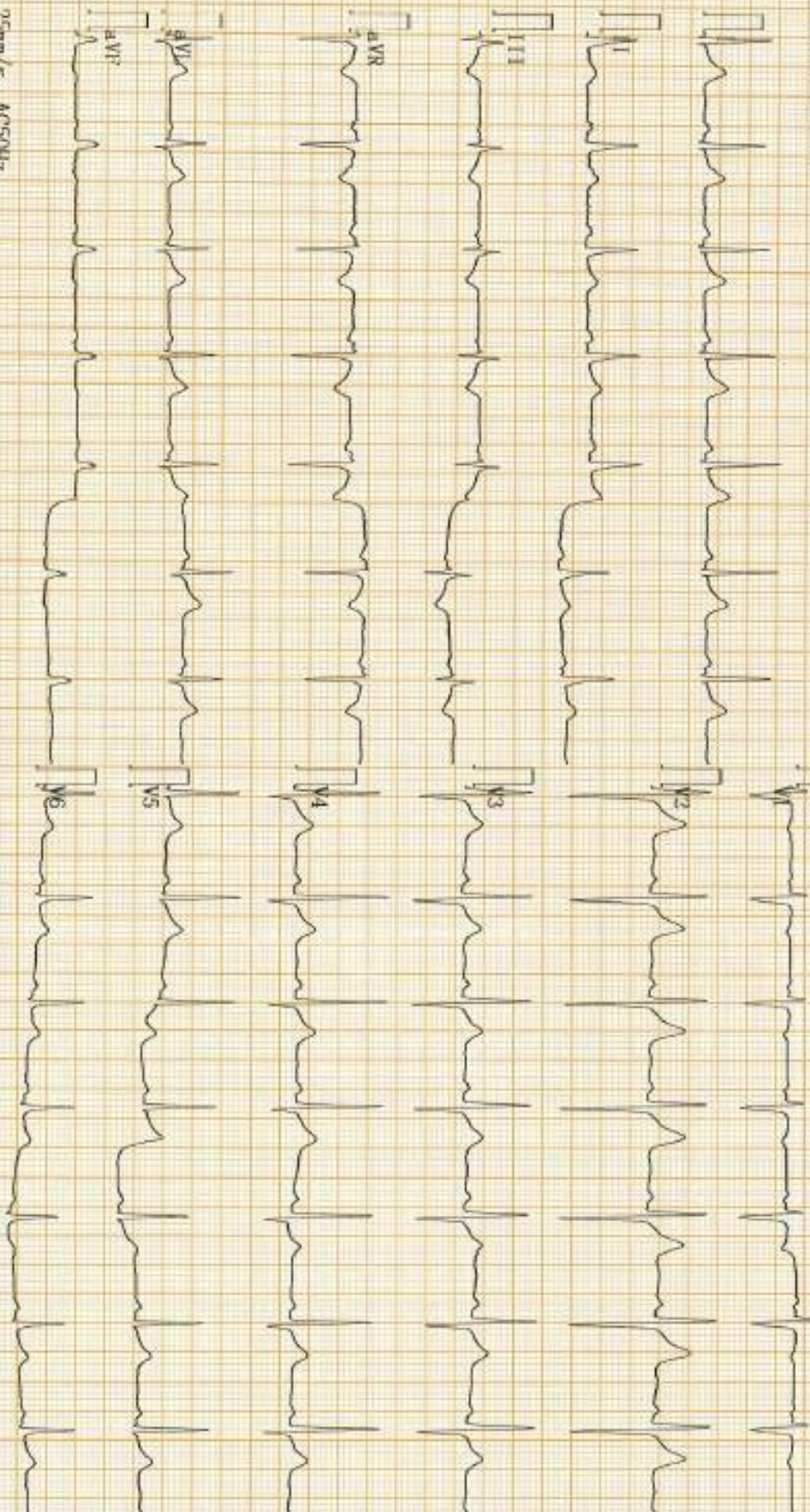
Normal Sinus Rhythm,
Cardiac electric axis normal;

Report need physician confirm

Physician:

AUTO 10mm/mV

10mm/mV



25mm/s ACS042

Test: SCHLIMMERGER FITNESS TO W
 Name: YOUNIS HUMAD SOLEEM A
 File No: 25002207 Age/Sex: 30 Y / M
 Date: 2025-02-18 Specimen ID: 3982



دكتور اسلام محمد صقر
 Dr. ISLAM ATEYA MOHAMMED SAKR
 General Practitioner





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Medical Complex
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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:	YOUNIS HUMAID SALEEM ALHATTALI	Date:	18/02/2025 08:17:46
File No:	25002207	Age/Gender:	30y 2m 27d / M
Payer Name:		Sid No:	Bill#3982
Insurance Card No:	--	Collection Date & Time:	18/02/2025 08:04:42
Doctor:		Received Date & Time:	18/02/2025 08:17:46
Billing Time:	18/02/2025 07:56:11	Reported Date & Time:	19/02/2025 18:34:35
	Mobile: 98521504	Id Card No.:	18936216

Test Name	Result	Biological Reference
SICKLING TEST	POSITIVE	-

2025-02-19 18:35:03

****End of Report****



Technician: Hajar Mohammed
Hussin Mousa
License No: 9245



Patient ID: 25002207

Name: MR. YOUNIS HUMAID SALEEM ALHATTALI

Age / Gender: 30 / M

Consultant: Dr. ISLAM ATEYA MOHAMMAD SAKR

Report Date: 18/02/2025

CHEST X-RAY - PA VIEW

Both lung fields are clear with no obvious focal or diffuse parenchymal or interstitial lesion.
Normal appearance of aortic and both broncho-vascular shadows.
Mild cardiomegaly with right sided ventricular apex.
No obvious hilar or mediastinal mass lesion or significant lymph nodes enlargement.
Costo-phrenic & cardio-phrenic pleural angles are free
Bony framework & soft tissue shadows are within normal limits.
Incidental right diaphragmatic hump(normal variant).

Dr. Badriya Al-Qassabi
Consultant Radiologist
Staff no : 135





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Lab Report

Patient Name:	YOUNIS HUMAID SALEEM ALHATTALI	Date:	18/02/2025 08:17:46
File No:	25002207	Age/Gender:	30y 2m 26d / M
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Insurance Card No:	--	Collection Date & Time:	18/02/2025 08:04:14
Doctor:		Received Date & Time:	18/02/2025 08:17:46
Billing Time:	18/02/2025 07:56:11	Reported Date & Time:	18/02/2025 08:54:03
	Mobile: 98521504	Id Card No:	18936216

Test Name	Result	Biological Reference
Drug of Abuse Screening-5		
Cocaine	NEGATIVE	-
Morphine	NEGATIVE	-
Amphetamine	NEGATIVE	-
Barbiturates	NEGATIVE	-
Marijuana	NEGATIVE	-
URIC ACID	7.6 mg/dl	3.4-7.0
SGOT	23.1 U/L	<40.0
CREATININE	1.3 mg/dl	0.7-1.4
BLOOD SUGAR FASTING	5.3	-
LDL CHOLESTEROL	103.0 mg/dl	<150.0
HDL CHOLESTEROL	48.18 mg/dl	40.0-60.0
CHOLESTEROL	175.7 mg/dl	<200.0
TRIGLYCERIDE	121.5 mg/dl	40.0-160.0
Gamma-Glutamyltransferase (GGT)	21.0 U/L	5.0-63.0
SGPT	31.4 U/L	<41.0
Complete Blood Count		
Haemoglobin	15.0 mg/dl	13.0-18.0
Total leucocyte count	5,410.0 Cells/Cumm	3,999.0-11,000.0
Differential count		
Neutrophil	42.1 %	40.0-75.0
Lymphocytes	48.4 %	15.0-45.0
Eosinophils	1.7 %	1.0-6.0
Monocyte	7.3 %	2.0-8.0
Basophils	0.4 %	<10.0
Packed cell volum	44.3 %	<54.0
RBC count	5.38 millions/nm	4.5-5.5
MCV	82.4 fl	81.8-95.5
MCH	27.9 pg	27.0-32.3
MCHC	33.9 g/dl	32.4-35.0
Platelet count	234,000.0 Cumm	150,000.0-400,000.0
RDW-CV	13.9 %	11.0-16.0
RDW-SD	41.7 fl	35.0-56.0





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Test Name	Result	Biological Reference
URINE ANALYSIS		
Color	Yellow	-
Transparency	Clear	-
Specific Gravity	0.0	-
PH	Acidic	-
Glucose	nil	-
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	nil	-
Cast	NIL	-
Bacteria	NIL	-
Others	NIL	-
Physical		
Color	Brownish	-
Consistency	Semi Solid	-
Occult Blood		-
Microscopic		
Pus Cells	1-2	-
RBC Cells	0-1	-
E-Hisolytica	NIL	-
E-Coli	NIL	-
Giardia Lambila	NIL	-
Taenia Saginata	NIL	-
Taenia Solium	NIL	-
Schistosoma Haematobium	NIL	-
Ascaris Lumbricoides	NIL	-
Trichis Trichiura	NIL	-
Ancylostoma Duodenals	NIL	-
Others	NIL	-
BLOOD GROUP	O	-
RH Typing	POSITIVE	-
ESR(AUTOMATED)	6.0 mm/hr	< 15.0

