



Appendix 15: Fitness to Work Certificate

Employee Data		Date 30/08/2025	
Name NOOR KHAN GHILAM HAIDER		Department/Company PVT	
I.D No. 79145806	Age 58	Occupation A.D. Driver	
Type of Medical Evaluation		Mark those applying ✓	
A1 Aircraft refuelling		A6 Fire / Emergency response team work	
A2 Breathing apparatus		A7 Professional driving	
A3 Business traveller		A8 Remote location work	✓
A4 Catering and food preparation		A9 Transfers – group A country	
A5 Crane or forklift driving & all heavy vehicles		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 his/her fitness to work status for the above tasks is as follows.			
Fit with no restrictions		FIT	
Fit with following restriction(s)			
The employee is fit for above work but should avoid the following task(s)	Temporary restriction	Permanent restriction	
Work near moving machinery or sharp edges			
Working at height			
Pulling, pushing, or carrying weight over ____ Kg			
Ascend/descend ladders or stairs			
Operate motor vehicles, forklifts or heavy machinery			
Use of a respirator			
Repetitive twisting of valves or wrenches			
Flying			
Other (Specify)			
Temporary Unfit until			
Permanently Unfit		Date 30/08/24	
Page 62		Specification	
The controlled version of this CMF Document resides online in Livelink®. Printed copies are UNCONTROLLED.			

**Appendix 20: (Form SQ5): Epworth Screening Quest. for Sleep Apnoea**

Employee Data		Date: 30/08/2021
Name: NOOR KHAN GHILAM HAIDER		Department/Company: PVT
I. D No. 79145806	Tel #	Occupation: H.D Driver

This questionnaire will help identify if you have any health condition which may need a more detailed medical assessment as part of your fitness to work determination. If you have any queries please contact your local Health Services staff. All information provided on this form and during consultations remains strictly confidential. When further clinical evaluation is required following completion of a screening questionnaire, the details should be recorded on Q1 and E1 forms.

How likely are you to fall asleep in the following situations? (use 0 to 3 score as shown below)

0 Would never doze

1 Slight chance of dozing

2 Moderate chance of dozing

3 High chance of dozing

0 sitting and reading

0 watching TV

0 sitting inactive in a public place (e.g. theatre or meeting)

0 as a passenger in the car for an hour without a break

0 Lying down to rest in the afternoon when circumstances permit

0 Sitting a talking with someone

0 Sitting quietly after lunch without alcohol

0 In a car, while stopped for a few minutes in traffic

Total 0

If you score a total of 15 or more you should seek advice from medical personnel on site before continuing to drive or operate machinery in the workplace.

Declaration: I, NOOR KHAN (Print Name) certify that to the best of my knowledge the above information supplied by me is true and correct.

Signature: نور خان **Date:** 30/08/2021

MEDICAL – CONFIDENTIAL

PLEASE COMPLETE YOUR PERSONAL DETAILS IN BLOCK CAPITALS



Petroleum Development Oman
MEDICAL DEPARTMENT

INITIAL EXAMINATION REPORT

Surname		GILLIAM HAIDER	
Forenames		NOOR KHAN	
Address			
Home telephone number		PVT.	
Place of examination	Al melleh	Date	30/08/2025
If a dependant enter employee's name here:			
Surname:		Ghulam Haider	
Forenames:		Noor Khan	
Birth date:	Nationality:	Country of birth:	Religion:
	Pakistan	Pakistan	
☒ Male ☐ Female	☒ Married ☐ Single ☐ Separated / Divorced	Relationship to employee ☐ Wife ☐ Son ☒ Daughter	Number of children: 1
Reason for examination		Job: AD Driver	
Pre-Employment ☒ Pre-Overseas ☐		Area:	
Name and address of family doctor		List your last 3 jobs	
		(1)	
		(2)	
		(3)	
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	
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. Hay fever/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? No		Average daily alcohol consumption No	
Have you ever taken elicited drugs? () PDO test all new / potential employees for elicited / recreational drugs			
FAMILY HISTORY: Diabetes () Tuberculosis () Epilepsy () Asthma () Eczema ()			
No Heart disease () High blood pressure () Stroke () Blood Disease () Cancer ()			
PLEASE READ THE FOLLOWING STATEMENT AND IF YOU AGREE KINDLY SIGN IT:-			
I declare 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 if required, and the details sent to my own doctor if this is considered necessary by the examining medical officer. I am also aware that the company reserves the right to dismiss me if it was found that I have purposely withheld important medical information.			
Date: 30/08/2025		Signature of Applicant:	

FOR COMPLETION BY EXAMINING DOCTOR

Further details of medical history and recreational activities:

Diabetic diet + exercise
weight loss

N = Normal A = Abnormal (please describe)

PHYSICAL EXAMINATION

N	A	
22		1. Eyes & Pupils
22		2. E.N.T.
22		3. Teeth & Mouth
22		4. Lungs & Chest
22		5. Cardiovascular System
22		6. Abdo. Viscera
22		7. Hernial Orifices
22		8. Anus & Rectum
22		9. Genito-urinary
22		10. Extremities
22		11. Musculo-skeletal
22		12. Skin & Varicose Vns.
22		13. C.N.S.

HEIGHT cm	WEIGHT kg	BMI	B.P.	PULSE /mins.	HEARING L R	VISION DISTANT R L Uncorrected Corrected	NEAR R L M N	Colour Vision	Blood Group
180	91	28.1	150 100	78	N	6/6 6/6	M N	Normal	

N	A		LABORATORY AND OTHER SPECIAL INVESTIGATIONS	N	A		
☒		1. Urinalysis	T.M.T -ve	☒		7. Audiogram	
☒		2. Hb, Blood count, ESR					8. Lung Function / Spirometry
	☒	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. Sickling test					12. HIV, Hepatitis screening

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

Advances 50 mg up to 100 mg
Lipid levels 145 mg ON statins
ATIN (New)
Folks up

ASSESSMENT:

☒ FIT ALL AREAS ☐ FIT WITH RESTRICTION ☐ TEMPORARY UNFIT ☐ UNFIT

FIT

Date: 30/08/2024 Name (Block Capitals): Dr.

Signature:

REVIEW / CONSULTATION

Date: 30/08/2025 Name (Block Capitals): Dr.

Signature:

Dr. Hussein Mohammad Ali Faddal
MBBS
MOH Reg. No: 11658



30/08/2025 06:38:55

Id: pdo

Name: Moaz Kham Ghilam Haider

Unknown -- (-) Unknown

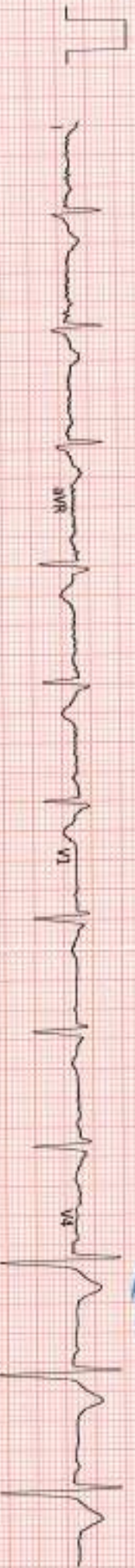
Height: -- cm Weight: -- kg BP: 0/0 mmHg

Med:

Techn:

Note:

HR:	74 bpm (804 ms)	Res: 5 sec	1.32/0.94 mV	UNCONFIRMED REPORT*
PR:	152 ms	Sok-Lyon:	2.26 mV	
QRS:	108 ms	Axis:	28/34/46°	
QT/QTc:	368/393 ms			
QTcB/QTcF:	409/395 ms			
TP/TP-Te:	146/114 ms			



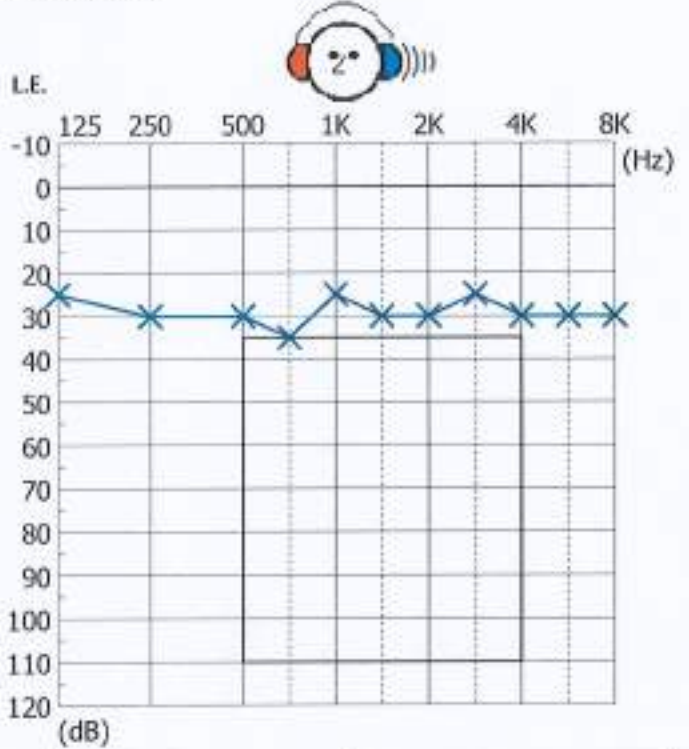
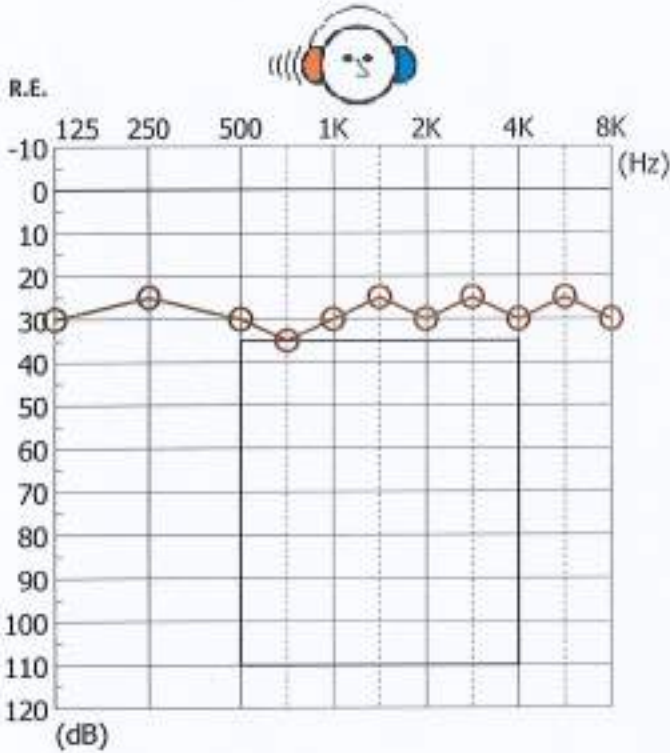
AL MAHA POLYCLINIC

AUDIOMETRY REPORT

Name: NOOR KHAN GHILAM HAIDER ,
Age(y): 58
Sex: Man
Height (cm): 180
Weight(Kg): 91
BMI: 28.1

SIBELMED W50

Test date: 30/08/2025
Reference: PVT
Technician:
Reason: PDO
Origin: PAKISTANI
Equipment:
Device serial numb.:
Flash Version:



MINISTRY OF LABOUR AND SOCIAL AFFAIRS

	R.E.	L.E.
Hearing Loss (%)	5.6	3.8
Average dBs	28.8	27.5
Bilateral Loss (%)	4.1	

Right ear Normal
Left ear Normal

COMMENTS:

SISI TEST

Hz	500	1000	2000	4000
R.E. %	30	30	30	30
L.E. %	30	25	30	30

LÜSCHER TEST

Hz	500	1000	2000	4000	8000
R.E. dB	---	---	---	---	---
L.E. dB	---	---	---	---	---



DEPARTMENT OF LABORATORY

Patient ID : 291155
Name : NOOR KHAN GHILAM HAIDER
Age, Gender : 58Y, Male
Nationality : PAKISTANI
GSM No : 94838792
Doctor's Name : PDO MEDICAL
Customer : PRIVATE PATIENT - (PDO MEDICAL)

Doc No : 265512
Doc Date : 30/08/2025 20:40
Bill No : 545914
Bill Date : 30/08/2025 18:31
Approved Date : 31/08/2025 17:27:00
Collected Time : 30/08/2025 20:04
Recieved Time : 30/08/2025 18:32

Test	Result	Unit	Normal Range
PDO MEDICAL -ABOVE 40 YERAS			
COMPLETE BLOOD COUNT			
TOTAL WBC COUNT	8.9	10 ³ /cumm	4000 - 11000
TOTAL RBC COUNT	5.39	10 ¹² /L	4.50-6.50
HB	14.6	gm/dl	14.0-18.0
PLATELETS COUNT	263	10 ⁹ /L	150.0-400
NEUTROPHILS	45	%	40-70
EOSINOPHILS	02	%	1.0-6.0
LYMPHOCYTES	48	%	20.0-45.0
MONOCYTES	05	%	2-10
BASOPHILS	00	%	0-1.0
HCT	42.4	%	35.0-60.0
MCV	78.7	fl	80.0-97.0
MCH	27.1	pg	26.50-35.5
MCHC	34.5	gm/dl	32.50-36.0
E S R	11		up-20
BLOOD SUGAR[FASTING]	116.9	mg/dl	60 - 110 mg/dL
LIVER FUNCTION TEST			
ALKALINE PHOSPHATASE	88.9	IU/L	Men : 40 - 129 U/L Female : 35 - 104 U/L
SGOT (AST)	43	IU/L	Men : 10 - 50 U/L Female : 10 - 35 U/L
SGPT (ALT)	62.5	IU/L	Men : Up to 41 U/L Female : 10 - 35 U/L
TOTAL BILIRUBIN	0.41	mg/dl	Up to 1.1 mg/dL
DIRECT BILIRUBIN	0.2	mg/dl	0.0-0.3
INDIRECT BILIRUBIN	0.2100	mg/dl	0-0.7
PROTEIN TOTAL	7.55	gm/dl	6.0-8.3 gm/dl
ALBUMIN	4.68	gm/dl	3.4 - 4.8 g/dL
GLOBULIN	2.87	gm/dl	1.8-3.6
RENAL FUNCTION TEST			
UREA	15.5	mg/dl	10 - 50 mg/dL
CREATININE	0.89	mg/dl	Male : 0.7 - 1.2 mg/dl Female : 0.5 - 0.9 mg/dl

Remarks:

Reported By:
RAJEEV

Verified By:
RAJEEV

Approved By:
RAJEEV

Sr. Lab Technologist

Sr. Lab Technologist



DEPARTMENT OF LABORATORY

Patient ID : 291155
Name : NOOR KHAN GHILAM HAIDER
Age, Gender : 58Y, Male
Nationality : PAKISTANI
GSM No : 94838792
Doctor's Name : PDO MEDICAL
Customer : PRIVATE PATIENT - (PDO MEDICAL)

Doc No : 265512
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Test	Result	Unit	Normal Range
URIC ACID	7.3	mg/dl	Male:3.6 - 7.7 mg/dL Female:2.5 - 6.8 mg/dL
LIPID PROFILE			0-0
CHOLESTEROL(TOTAL)	190.8	mg/dL	Up to 200 mg/dL
CHOLASI	4.8	mmol/L	Upto 5.5 mmol/L
CHOLESTEROL(HDL)	30.2	mg/dL	20 - 60 mg/dl
HDL C	0.8	mmol/l	>0.906 mmol/l
CHOLESTEROL (LDL)	76	mg/dl	Up to 130 mg/dl
LDL		mmol/L	Up to 4 mmol/L
TRIGLYCERIDES	421.4	mg/dL	Desirable : <250mg/dL Boderline high : 250 - 500 mg/dL Hypertriglyceridemia : >500 mg/dL
TRG	4.6	mmol/L	up to 1.76 mmol/L
NON HDL CHOLESTEROL	160.60	mg/dl	Moderate Risk: <130.0 mg/dL High Risk: <100 mg/dL Very High Risk: <85 mg/dL
NON HDL	4.16	mmol/L	Moderate Risk: <3.37 mmol/L High Risk: <2.59 mmol/L Very High Risk: <2.2 mmol/L
SICKLE CELL TEST	Negative		
URINE ROUTINE EXAMINATION			
Colour.	Pale Yellow		
Reaction.	Acidic		
Sp Gravity	1.020		
sugar	Nil		NIL
Albumin.	Nil		NIL
Actone	NIL		NIL
Bile salt	NIL		NIL
Bilepigments	NIL		NIL
urobilinogen	NORMAL		NORMAL
puscells.	2 - 3		0-1/HPF
R.B.C.S.	1 - 3		NIL/HPF
Epithelialcells	1 - 2		1-2/HPF
Casts	nil		

Remarks:

 Reported By:
RAJEEV

 Verified By:
RAJEEV

 Approved By:
RAJEEV

Sr. Lab Technologist

Sr. Lab Technologist



DEPARTMENT OF LABORATORY

Patient ID : 291155
Name : NOOR KHAN GHILAM HAIDER
Age, Gender : 58Y, Male
Nationality : PAKISTANI
GSM No : 94838792
Doctor's Name : PDO MEDICAL
Customer : PRIVATE PATIENT - (PDO MEDICAL)

Doc No : 265512
Doc Date : 30/08/2025 20:40
Bill No : 545914
Bill Date : 30/08/2025 18:31
Approved Date : 31/08/2025 17:27:00
Collected Time : 30/08/2025 20:04
Recieved Time : 30/08/2025 18:32

Test	Result	Unit	Normal Range
Crystals	nil		
parasites	nil		
Bacteria	nil		
Others.	nil		

Remarks:

 Reported By:
RAJEEV

 Verified By:
RAJEEV

 Approved By:
RAJEEV

Sr. Lab Technologist

Sr. Lab Technologist





Welcome to the QRISK[®]3-2018 risk calculator <https://qrisk.org>

This web site should not be used for direct patient care by health professionals. This calculator is only valid if you do not already have a diagnosis of coronary heart disease (including angina or heart attack) or stroke/transient ischaemic attack, and not on statins.

Reset

Information

Publications

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Algorithm

Software

About you

Age (25-84): 58

Sex: ☒ Male ☐ Female

Ethnicity: Pakistani ▼

UK postcode: leave blank if unknown

Postcode:

Clinical information

Smoking status: non-smoker ▼

Diabetes status: none ▼

Angina or heart attack in a 1st degree relative < 60? ☐Chronic kidney disease (stage 3, 4 or 5)? ☐Atrial fibrillation? ☐On blood pressure treatment? ☒Do you have migraines? ☐Rheumatoid arthritis? ☐Systemic lupus erythematosus (SLE)? ☐Severe mental illness?
(this includes schizophrenia, bipolar disorder and moderate/severe depression) ☐On atypical antipsychotic medication? ☐Are you on regular steroid tablets? ☐A diagnosis of or treatment for erectile dysfunction? ☐

Leave blank if unknown

Cholesterol/HDL ratio: 6.3

Systolic blood pressure (mmHg): 160

Standard deviation of at least two most
recent systolic blood pressure
readings (mmHg):

Body mass index

Height (cm): 180

Weight (kg): 91

Calculate risk

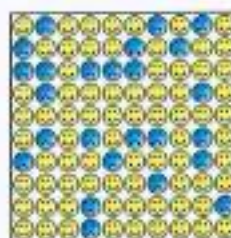
Your results

Your risk of having a heart attack or stroke within the next 10 years is:

24.7%

Note. The score is based on a cohort of patients without pre-existing cardiovascular disease and not on statins at the start. The cohort includes patients who subsequently started statins (or other lifestyle modifications). Consequently the actual risk of a patient may be more than this score implies if they do not take preventative actions. If they do take preventative actions the risk would be reduced.

In other words, in a crowd of 100 people with the same risk factors as you, 25 are likely to have a heart attack or stroke within the next 10 years.



Risk of
a heart attack or stroke

Your score has been calculated using estimated data, as some information was left blank.

Your body mass index was calculated as 28.09 kg/m².

How does your 10-year score compare?

Your score

Your 10-year QRISK [®] 3 score	24.7%
The score of a healthy person with the same age, sex, and ethnicity [*]	11.4%
Relative risk ^{**}	2.2
Your QRISK [®] 3 Healthy Heart Age ^{***}	70

^{*} This is the score of a healthy person of your age, sex and ethnic group, i.e. with no adverse clinical indicators and a cholesterol ratio of 4.0, a stable systolic blood pressure of 125, and BMI of 25.

^{**} Your relative risk is your risk divided by the healthy person's risk.

^{***} Your QRISK[®]3 Healthy Heart Age is the age at which a healthy person of your sex and ethnicity has your 10-year QRISK[®]3 score.

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International Specialised Centre for Heart & Vascular disease
EXERCISE STRESS TEST REPORT

Fax:

International Specialised Centre for Heart & Vascular disease REAL TIME PRINT

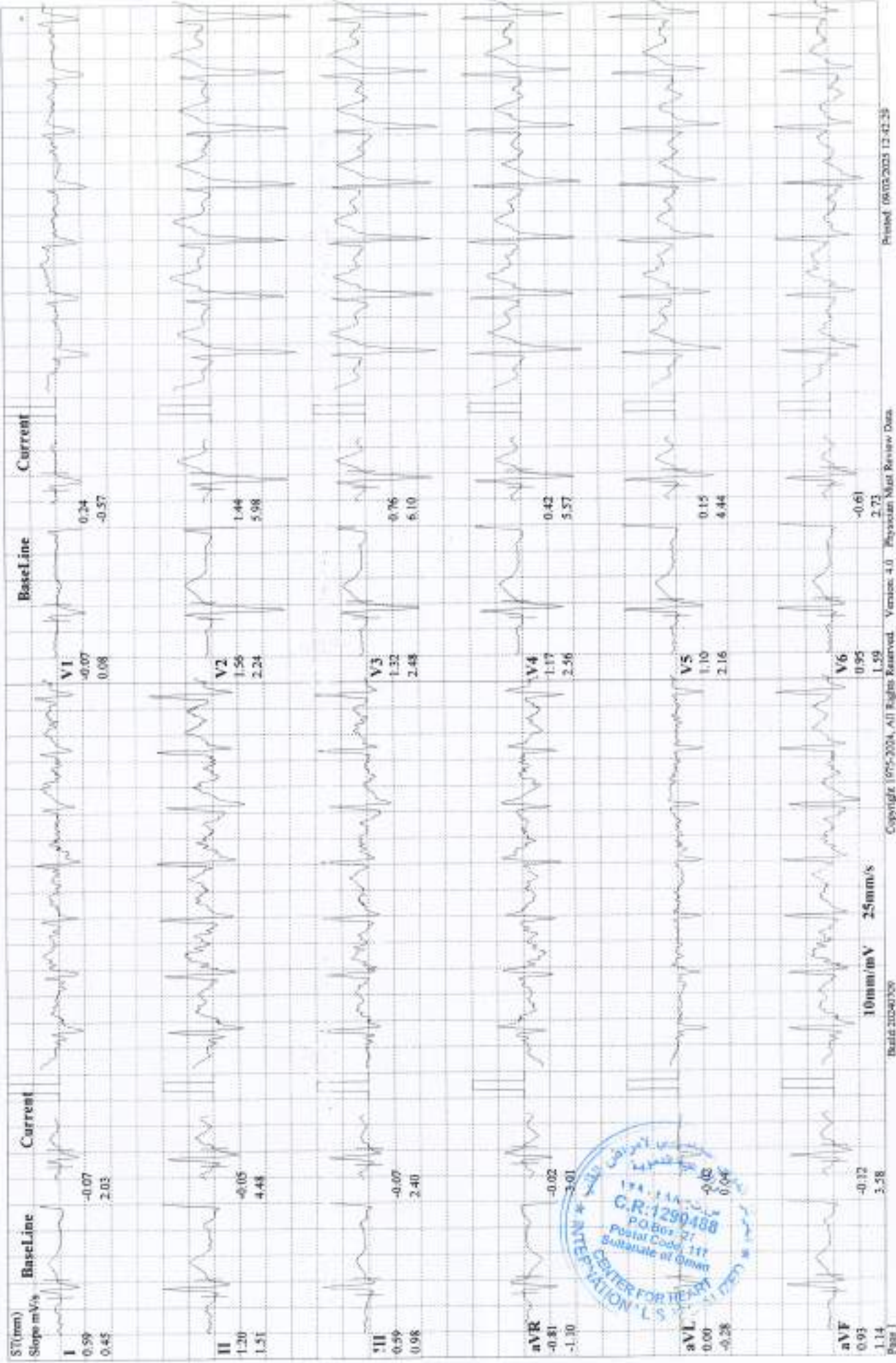
Patient: Noor Khan Ghulam Haider 58 Male 180cm 90kg
 ID: 16112
 Test Date: 09/03/2025 12:33

HR:140 bmp TargetHR:162 bmp Percent:86%
 9.0METs

Recovery
 Stage 1
 00:00(07:12-07:15)

Bruce
 5.5km/h
 14.0%

1000Hz
 ADS Filter
 Main Filter



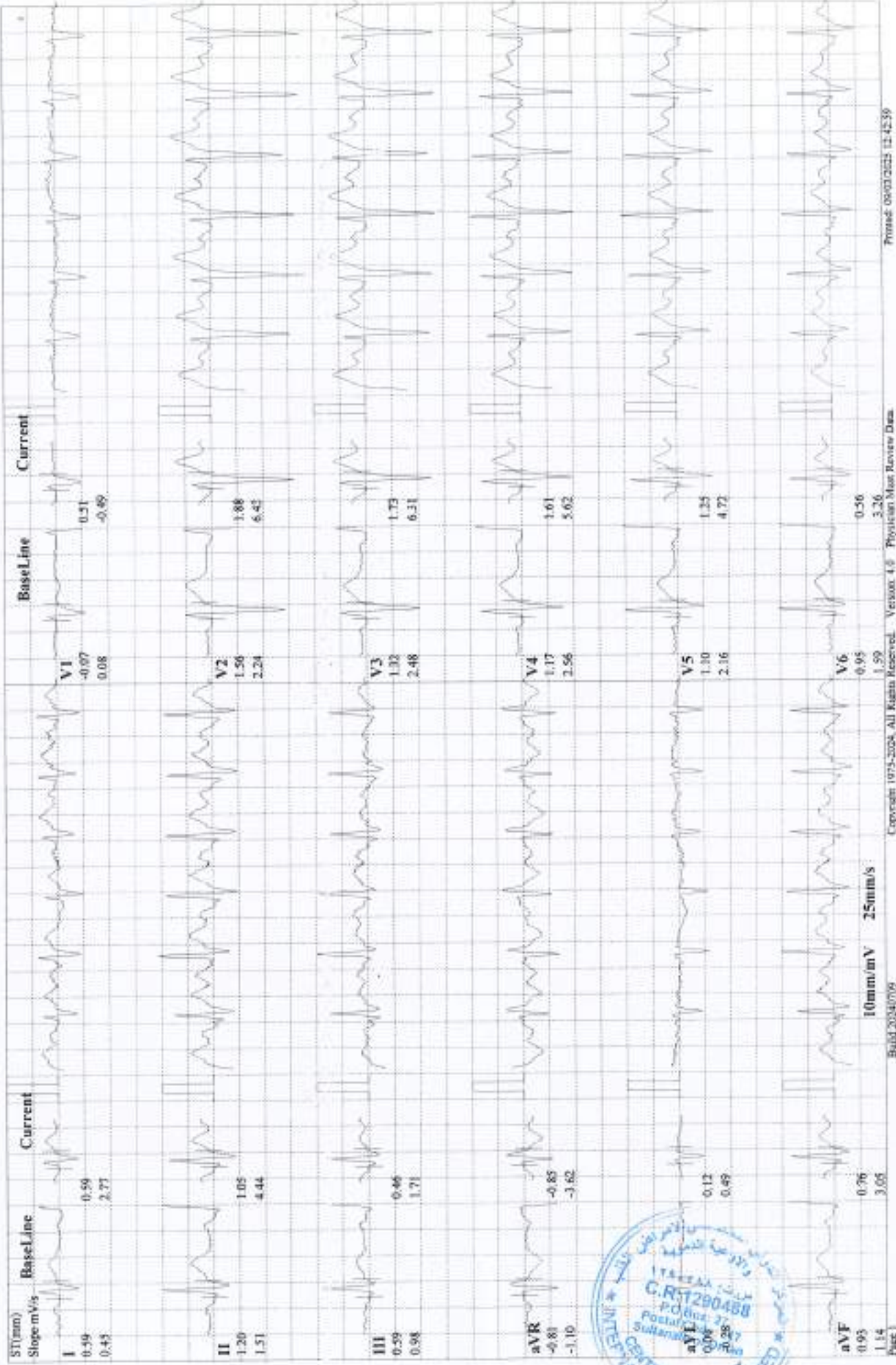
International Specialised Centre for Heart & Vascular disease REAL TIME PRINT

Patient: Noor Khan Ghulam Haider 58 Male 180cm 90kg
 ID: 16112
 HR:131 bpm TargetHR:162 bpm Percent:80%
 Test Date: 09/03/2025 12:33 7.3METs

Recovery
 Stage 1
 00:30(07:42-07:45)

1000Hz
 ADS Filter
 Main Filter

Bruce
 2.0km/h
 0.0%



International Specialised Centre for Heart & Vascular disease REAL TIME PRINT

Patient: Noor Khan Ghulam Haider 58 Male 180cm 90kg
 ID: 16112
 Test Date: 09/03/2025 12:33

HR: 117 bmp TargetHR: 162 bmp Percent: 72%
 5.5 METs

Recovery
 Stage 1
 01:00(08:12-08:15)

1000Hz
 ADS Filter
 Main Filter

