مركز الرسيل الصحي
RUSAYL HEALTH CENTRE
ISO 9001- 2015 Certified Co.

70391509

No. B 4164

ROUTINE/PERIODIC EXAMINATION REPORT (MEDICAL- CONFIDENTIAL)

RUSAYL HEALTH CENTRE

PLEASE COMPLETE YOUR PERSONAL DETAILS IN BLOCK CAPITALS

Surname/ Forenames	JEYASINGH RAJAN
Nationality	INDIAN
Mobile No. 95328624	Home/Leave Address:
Company Number: G138	Reference Indicator:

Personal Details DOB: 04/07/1980 (40YRS)

A ☑ Male ☐ Female ☑ Married ☐ Single ☐ Separated /Divorced /Widow(er)

Home/Leave Address:

Relationship to employee ☐ Wife ☐ Son ☐ Daughter

No of Children: 2

Reason for Examination (tick as appropriate)

Periodic Medical Examination ☑ Final / Retirement ☐ Other Reason: ☐

Employee only

B Present Job and Location: RESOURCE MANAGER / NIMR, TRUCKING

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

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

RUSAYL HEALTH CENTRE Sultanate of Oman

Date: 07/11/2020

Signature of Applicant:

9039/589
JEYASINGH RAJAN (40YRS)

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RUSAYL HEALTH CENTRE
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FOR COMPLETION BY EXAMINING DOCTOR OR NURSE

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	
✓		6. Abdo. Viscera	
✓		7. Hernial 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
164	72	26.8 kg/m2	137/97 mmHg	80 /mins.	L N R N	DISTANT R 6/6 L 6/6; NEAR R N6 L N6 (Uncorrected / Corrected)

N	A		LABORATORY AND OTHER SPECIAL INVESTIGATIONS	N	A	
✓		1. Urinalysis	TG — ↑ 223 mg/dl			7. Audiogram
✓		2. Hb, Bloodcount, ESR	T-chol — ↑ 218.21 mg/dl			8. Lung Function
✓		3. LFT, RFT, RBS				9. Chest X-Ray
		4. Drug Screen		✓		10. ECG
	✓	5. Lipids (40 years +)		✓		11. CVS risk for 40 yrs. & above (2-3%)
✓		6. Sickle Cell test				12. HIV, Hepatitis screening

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

Overweight
- Counseled to engage in regular exercise, and avoid unhealthy diets.

ASSESSMENT AND RECOMMENDATIONS:

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

Date 07/11/2020 Name (Block Capitals) Dr. / Nurse IWU MAGNUS C. Signature:

DR. MAGNUS CHIBUZO IWU
MEDICAL OFFICER
RUSAYL HEALTH CENTRE
MOH LIC NO. 17579

مركز الرسيل الصحي
C.R. No.: 1/25908/4
P.O. Box: 18
P.C.: 124, Rusayl
Sultanate of Oman
RUSAYL HEALTH CENTRE

REVIEW/CONSULTATION

Date: Name (Block Capitals) Dr. / Nurse Signature:

Rusayl Industrial Estate
P.O. Box : 18, Rusayl
Postal Code : 124
Sultanate of Oman
Tel.: 24446151 / 54
Fax : 24446833

Timing : O.P.D. 7 a.m. to 5. p.m.

مركز الرسيل الصحي
RHC Rusayl Health Centre
ISO 9001 - 2015 Certified Co.

Date : 7-11-2020

eye - 6/6
Ht - 164cm
Wt - 72 kg

LABORATORY INVESTIGATION

Name : Jayasingh Rajan Sex : M Age : 50Yrs
Dr. : Company : TRUCK OMAN - 6138

HAEMATOLOGY

Total WBC	8.40	(4000-11000cu/mm)
DC - NEUTROPHIL	61.2	(40-75%)
LYMPHOCYTE	24.2	(20-45%)
EOSINOPHIL		(1-6%)
MONOCYTE	4.6	(2-10%)
BASOPHIL		(0-1%)
ESR		(0-12mm/hr)
		(M:12-16 g/dl)
		(F:11-14 g/dl)
HB	15.7	(14gm/dl---16gm/dl)
RBC COUNT	3.97	(4.5-6.6Million/cumm)
Platelet count	219	(150-400cu/mm)
Bleeding Time	/	(3-6min)
Clotting Time		(5-10min)
HCT	52.11	(40-45%)
MCV	87	(78--92fl)
MCH	29.6	(27--32pg)
Sickle cell	Negative	
MCHC	32.9	(31---35gm/dl)
Blood Group		

BIOCHEMISTRY

Diabetic profile	97.44 mg/dl	
Blood sugar(fasting)		(70mg/dl-110mg/dl)(3.8mmol/l---6.1mmol/l)
PPBS		(80mg/dl-130mg/dl)(4.50-7.3mmol/l)
RBS		(64mg/dl-160mg/dl)(3.6mmol/l-8.9mmol/l)
HBA1C		(4--6.5%)
Lipid profile	223 mg/dl	
Triglycerides		(upto 200mg/dl)
Total Cholestrol	213.21 mg/dl	(<200mg/dl)
HDL	49.01 mg/dl	(>40mg/dl)
LDL	129.11 mg/dl	(Up to 130mg/dl)
Liver Function test		
Total bilirubin	0.84 mg/dl	(upto 1.0mg/dl)
SGOT	27.7 U/L	(Up to 40IU/L)
SGPT	46.5 U/L	(up to 41IU/L)
Total Protein		(6-8.3gm/dl)
Renal function Test		
S creatinine	1.01 mg/dl	(0.7-1.4mg/dl)
Urea	35.65 mg/dl	(10-45mg/dl)
Uric acid		(3.4-7.0 mg/dl)
Cardiac profile		
Troponina T		(>0.01ng/ml)

H.Pylori Test

Malaria Parasite

Micro Filaria

URINE ANALYSIS

Colour	Normal
Sp gravity	1.010
pH	Normal
Albumin	
Sugar	
Acetone	
Bile Salts	
Urobilinogen	
Blood	
Nitrate	Normal Study.
Leukocyte Estrase	
Microscopy:	
Pus cells	/HPF
RBC	/HPF
Epithelial cells	/HPF
Casts	/HPF
Crystals	
Bacteria	
Mucus-Thread	

Pregnancy Test

STOOL EXAMINATION

Colour:
Consistancy:
Reaction:
Occult Blood:
Microscopic ova:
Cyst:
Entamoeba:
Flagellates:
Pus Cells:
R.B. Cs:
Epith: cells:
Other:

SEMEN ANALYSIS

Quantity: Reaction:
Total Sperm Count : million/ml
(Normal 60-150 million/ml)
Microscopic: Active motile: %
Sluggish motile: %
Dead Sperms: %
Pus Cells R.B. Cs:
Epith: Cells:
Morphology Normal: %
Abnormal: %

V.D.R.L./Syphilis
R.F.
HBsAg.
HCV.
HIV

DR. MAGNUS CHIBUZO IWU
Medical Officer
MEDICAL OFFICER
RUSAYL HEALTH CENTRE
MOH LIC NO. 17579

Lab. Technician

2020-11-07 08:25:13 6 Channel + 1 Rhythm Report

Hospital:RHC
Prescribed by:

ID :
Name: JEYASINGH
yrs. /
cm / kg

Heart Rate: 67bpm ** Analysis Result ** (To be finally confirmed by cardiologist)
PR Int.: 164 ms Normal Sinus Rhythm
QRS Dur.: 102 ms Normal Axis
QT/QTc: 412/438 ms [Normal ECG]
P-R-T axes:
4 3 -10

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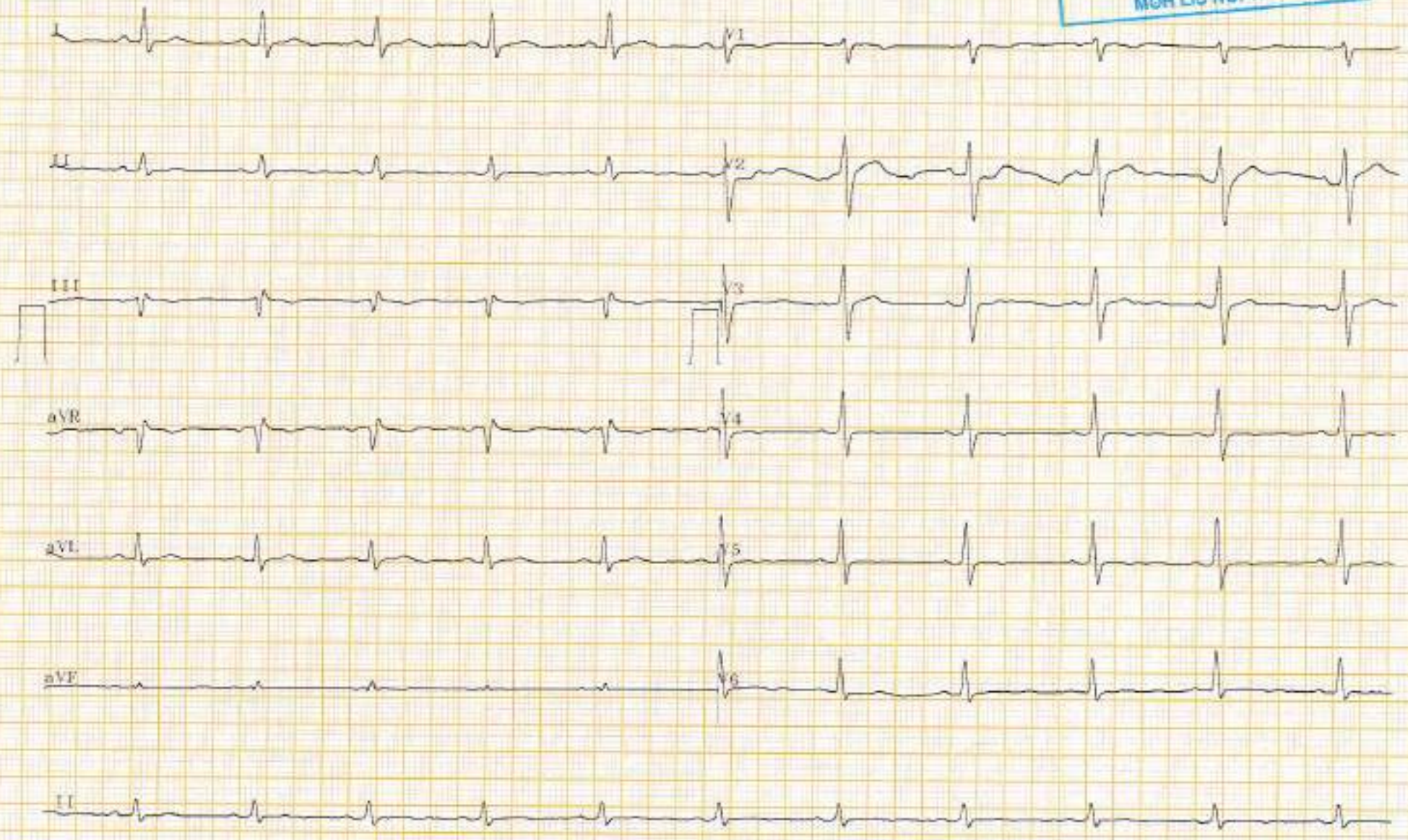

0.1Hz- 150Hz,AC60Hz,EMG. All Channels:10.0mm/mV,25.0mm/sec. EKG2000 Ver5.12M.30 Bionet Co., Ltd.

JEYASINGH RAJRAM

70391509

ClinRisk

Welcome to the QRISK®3-2018 risk calculator https://qrisk.org/three

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.

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About you

Age (25-84): 40

Sex: (●) Male ( ) Female

Ethnicity: Indian

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 disfunction? ☐

Leave blank if unknown

Cholesterol/HDL ratio: 4.35

Systolic blood pressure (mmHg): 137

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

Body mass index

Height (cm): 164

Weight (kg): 72

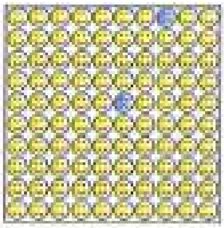
Calculate risk

Your results

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

2.3%

In other words, in a crowd of 100 people with the same risk factors as you, 2 are likely to have a heart a 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 26.77 kg/m².

How does your 10-year score compare?

Your score

Your 10-year QRISK®3 score	2.3%
The score of a healthy person with the same age, sex, and ethnicity*	1.8%
Relative risk**	1.3
Your QRISK®3 Healthy Heart Age***	43

* 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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