Initial Medical Examination Report

INITIAL EXAMINATION REPORT (MEDICAL - CONFIDENTIAL)

Surname / Forenames: Ashley. Joseph. D'Souza
Address:
Home telephone number: 94757959
Project: Truck. Oman
Place of examination: Aster Hospital, Ibri
Date: 26/7/2022
If a dependant enter employee's name here:
Birth date: 9/3/1963 Nationality: Indian Country of birth: India Religion:
☐ Male ☐ Female ☑ Married ☐ Single ☐ Separated /Divorced
Relationship to employee ☐ Wife ☐ Son ☐ Daughter Number of children:
Reason for examination Pre-Employment ☐ Job:
Pre-Overseas ☐ Area:
Name and address of family doctor
List your last 3 jobs
(1)
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		Y	N		Y	N
1. Sinus trouble		✓	21. Cancer		✓	HAVE YOU EVER BEEN:-		
2. Neck swelling/glands		✓	22. Heart Disease		✓	40. Rejected for employment or insurance for medical reasons		✓
3. Difficulty in vision		✓	23. Rheumatic fever		✓			
4. Any ear discharge		✓	24. Abnormal heartbeat		✓	41. Awarded benefits for industrial injury/illness		✓
5. Asthma/bronchitis		✓	25. High blood pressure	✓				
6. Hayfever /other significant allergy		✓	26. Stroke		✓	42. Treated for a mental condition, e.g. depression		✓
7. Any skin trouble		✓	27. Serious chest pain		✓			
8. Tuberculosis		✓	28. Any blood disease		✓	43. Treated for problem drinking or drug abuse		✓
9. Shortness of breath		✓	29. Kidney disease		✓			
10. Coughed/vomited blood		✓	30. Blood in urine		✓	44. Exposed to toxic substance or noise		✓
11. Severe abdominal pain		✓	31. Diabetes		✓			
12. Stomach ulcer		✓	32. Headaches/migraine		✓	FOR WOMEN ONLY		
13. Recurrent indigestion		✓	33. Dizziness/fainting		✓	Have you ever had:-		
14. Jaundice or hepatitis		✓	34. Epilepsy		✓	45. An abnormal smear		
15. Gall Bladder disease		✓	35. Joints/spinal trouble		✓	46. Any gynaecological treatment		
16. Marked change in bowel habits		✓	36. Surgical operation		✓			
17. Blood in stools (motions)		✓	37. Serious accident/fracture		✓	47. Are you pregnant?		
18. Marked change in weight		✓	38. Tropical disease		✓	48. **Have you had an illness not mentioned above**		
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 elicited drugs? ( ) PDO test all new/potential employees for elicited/recreational 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 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 PDO reserve the right to dismiss me if it was found that I have purposely withheld important medical information.**

Date: 26/7/2022 Signature of Applicant: Ashley DSouza

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	wnl
✓		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 /mins.	HEARING	VISION	Colour Vision	Blood Group
160	69·6	27·2	153/84	90	L / R	DISTANT R/L: Uncorrected 6/6; NEAR R/L: 6/6. ; Corrected:		

N	A		LABORATORY AND OTHER SPECIAL INVESTIGATIONS	N	A	
✓		1. Urinalysis				7. Audiogram
✓		2. Hb, Bloodcount, ESR				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
✓		6. Sickle Cell test				12. HIV, Hepatitis screening

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

Adv. Tab. Metolol 50 1-0-0
Diet / Exercise

ASSESSMENT:

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

Date: 26/7/2022. Name (Block Capitals): Dr. Signature:

REVIEW/CONSULTATION

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

DR. KIRAN RAVEENDRAN NAIR

Framingham Risk Assessment form

Framingham Risk Assessment (For all professional drivers, crane operators, forklift operator or other employees who are above 40 years of age):

Employee Name: Ashley Joseph D Souza.
Emp #: 6488626
Date of Assessment: 26/7/2022

1	Age	Years	59
2	Gender	Female/Male	
3	Total Cholesterol	mmol/L	5.43
4	HDL Cholesterol	mmol/L	0.8
5	Smoker	Yes/No	
6	Diabetes	Yes/No	
7	Systolic Blood pressure	mm Hg	153
8	Is the patient being treated for High blood pressure?	Yes/No	

Framingham Risk score: 7.50 %

Framingham Risk Rating (Circle the appropriate score):

Low **Medium** **High**

Any further action or recommendations?

Assessment or Examination conducted by:

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عبري سلطنة عمان
هاتف: ٢٥٦٨٨٠٧٥ +٩٦٨
فاكس: ٢٥٦٨٨٠٢٥ +٩٦٨
نقال: ٧٧٥٥٩٩٧٧/٧١٥٥٩٩٧٧ +٩٦٨

Epworth Screening Quest. for Sleep Apnoea

Employee Data	Date: 26/7/2022
Name: Ashley. Joseph. D. Souza	Department/Company: Trex Oman
I. D No. 64386261-1 Tel # 94757959	Occupation :

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

1 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 1

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, Ashley (Print Name) certify that to the best of my knowledge the above information supplied by me is true and correct.

Signature: Ashley DSouza Date: 26/7/2022

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مستشفى أستر
نحن نعتني بك دائما

Fitness to Work Certificate

Employee Data			Date	26/7/2022
Name	Ashley Joseph D Souza		Department/Company	Truck Oman
I.D No.	64886261	Age 59/41	Occupation	

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 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			
Puling, 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**	
Name of health advisor	**Signature**	**Date** 26/7/22	

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نقال: ٩١٣٩٩٠٧٣ / ٧١٥٥٩٩٧٧ ٩٦٨+

مستشفى عمان الخير ش.م.م
ص.ب ٤٠٠ الرمز البريدي ٥١١
عبري سلطنة عمان

DEPARTMENT OF LABORATORY MEDICINE

File No:	0254538	**Report No:**	0823384		
Name:	ASHLEY JOSEPH D SOUZA	**Sample Date:**	26/07/2022	**Time:**	11:12
		Received By:	181773		
Address:		**Received Date:**	26/07/2022	**Time:**	11:16
Gender:	M **Age:** 59 Y **Nationality:** INDIAN	**Report Date:**	26/07/2022	**Time:**	12:17
GSM No.:	94757959 **ID Card No.:** 64886261	**Bill No:**	0833340	**Bill Date:**	26/07/2022
Ref. By:	EXTERNAL DOCTOR	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
PDO MEDICAL CHECK UP ABOVE 40(truckoman)		
FBS (FASTING BLOOD SUGAR)	6.01 mmol/L	3.9 - 6.1
Method :- Hexokinase	108.18 mg/dL	70 - 110
LIPID PROFILE - SERUM		
CHOLESTEROL (TOTAL)	**5.43 mmol/L**	1 - 5.1
Method:-Enzymatic	**209.92 mg/dl**	40 - 200
HDL (HIGH DENSITY LIPOPROTEIN)	0.830 mmol/L	0.777 - 1.813
" "	32.09 mg/dl	30 - 70
LDL (LOW DENSITY LIPOPROTEIN)	3.14 mmol/L	1.295 - 4.54
" "	121.19	50 - 172
VLDL (VERY LOW DENSITY LIPOPROTEIN)	**1.47 mmol/L**	0.259 - 1.036
" "	**56.64 mg/dl**	10 - 40
RATIO (TOTAL CHOL / HDL CHOL)	**6.54**	3.8 - 5.9
TRIGLYCERIDES	**3.20 mmol/L**	0.564 - 2.146
Method : Enzymatic	**283.2 mg/dl**	50 - 190
LIVER FUNCTION TEST - SERUM		
TOTAL BILIRUBIN - SERUM	0.524 mg/dL	0.1 - 1
Method : Diazo	8.96 µmol/L	1 - 17.1
DIRECT BILIRUBIN - SERUM	0.149 mg/dL	0.1 - 0.5
Method : Diazo	2.55 µmol/L	1 - 8.55
SGOT (AST)-SERUM (IFCC)	21.37 U/L	Male: up to 40.0 Female: up to32.0
SGPT (ALT)-SERUM (IFCC)	26.20 U/L	Male: 10-50 Female:10-35
ALKALINE PHOSPHATASE (ALP)-SERUM (IFCC)	90.52 U/L	Adult : Men -40-129 :Female 35-104 Children:(Aged) 7months - 1Year : <462 1Year - 3 Years : <281 4 Years - 6 Years : <269

Processed By:	Approved By:	Released By:	
181773	JIBI	JIBI	
Lab Technologist	Lab Technologist	Lab Technologist	Specialist Pathologist
MOH License No.		MOH LIC No: 4384	

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INVESTIGATION	RESULT	REFERENCE RANGE
		7 Years - 12 Years :- <300 13 Years - 17 Years(M) :-<390 13 Years - 17 Years(F) :- <187
TOTAL PROTEIN-SERUM(Colorimetric Assay)	8.10 gm/dL	6.6 - 8.7
ALBUMIN - SERUM (Colorimetric Assay)	**5.09 gm/dL**	3.9 - 4.9
GLOBULIN - SERUM (Calculation)	3.01 gm/dL	2.3 - 3.5
ALBUMIN / GLOBULIN RATIO - Calculation	**1.69**	1.2 - 1.5
GGT(GAMMA GLUTAMYL TRANSPEPTIDASE) - SERUM	36.22 U/L	Men : 8-61 Female : 5-36
RENAL FUNCTION TEST (UREA - CREATININE)		
UREA - SERUM	4.85 mmol/L	1.7 - 8.3
Method : Kinetic Assay	29.13 mg/dL	10.2 - 49.8
CREATININE - SERUM	70.02 µmol/L	44.2 - 123.7
Method :-Jaffé Method	0.79 mg/dl	0.5 - 1.4
CBC (COMPLETE BLOOD COUNT)		
TOTAL WBC COUNT	11610 cells/cumm	4000 - 11000 cells/cumm
DC (DIFFERENTIAL COUNT)		
NEUTROPHILS	64.7 %	40-75%
LYMPHOCYTES	23.0 %	20-45%
EOSINOPHILS	3.7 %	2-6 %
MONOCYTES	8.2 %	2-8 %
BASOPHILS	0.4 %	0-1%
HB (HEMOGLOBIN)	16.9 gm/dl	Male-13 - 18 gm/dl Female-11- 15 gm/dl
TOTAL RBC COUNT	5.79 million/cu	MALE: 4.5-6.5million/cu FEMALE: 3.9-5.5million/cu
PLATELET COUNT	2.68 lakhs/cumm	1.0 - 4.0 lakhs / cumm
PCV (PACKED CELL VOLUME)	51.30 %	Males : 42% - 52% Females : 37% - 47%

Processed By:	Approved By:	Released By:	
181773	JIBI	JIBI	
Lab Technologist	Lab Technologist	Lab Technologist	Specialist Pathologist

MOH License No. 4384

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Ref. By:	EXTERNAL DOCTOR	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
MCV (MEAN CORPUSCULAR VOLUME)	88.60 FL	76 - 96 FL
MCH (MEAN CORPUSCULAR HEMOGLOBIN)	29.20 PG	27 - 33 PG
MCHC(MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION)	32.90 g/dl	32 - 36 g/dl
ESR (ERYTHROCYTE SEDIMENTATION RATE)	05 mm/ 1st hr	MALE:0-9 mm/ 1st hr FEMALE:0-20 mm/ 1st hr
Capillary Photometry Technology Measures the kinetics of red cells aggregation.Clinical Laboratory and Standard Institute (CLSI) procedure for the ESR Test.		
SICKLE CELL	NEGATIVE	
URINE ROUTINE		
URINE BIOCHEMISTRY		
GLUCOSE	NIL	
PROTEIN	NIL	
KETONE	NIL	
BILIRUBIN	NIL	
pH	ACIDIC	
UROBILINOGEN	NORMAL	
URINE MICROSCOPY (Centrifugation Method)		
RED BLOOD CELLS (RBC)	NIL /hpf	
PUS CELLS	1 - 2 /hpf	
EPITHELIAL CELLS	NIL /hpf	
CRYSTALS	NIL /hpf	
CAST	NIL /hpf	
BACTERIA	PRESENT /hpf	
YEAST CELLS	NIL /hpf	

Processed By: 181773 *Lab Technologist*

Approved By: JIBI *Lab Technologist*

Released By: JIBI *Lab Technologist* (Histopathologist) MOH LIC No: 4384 M +968 9830 3232

Specialist Pathologist

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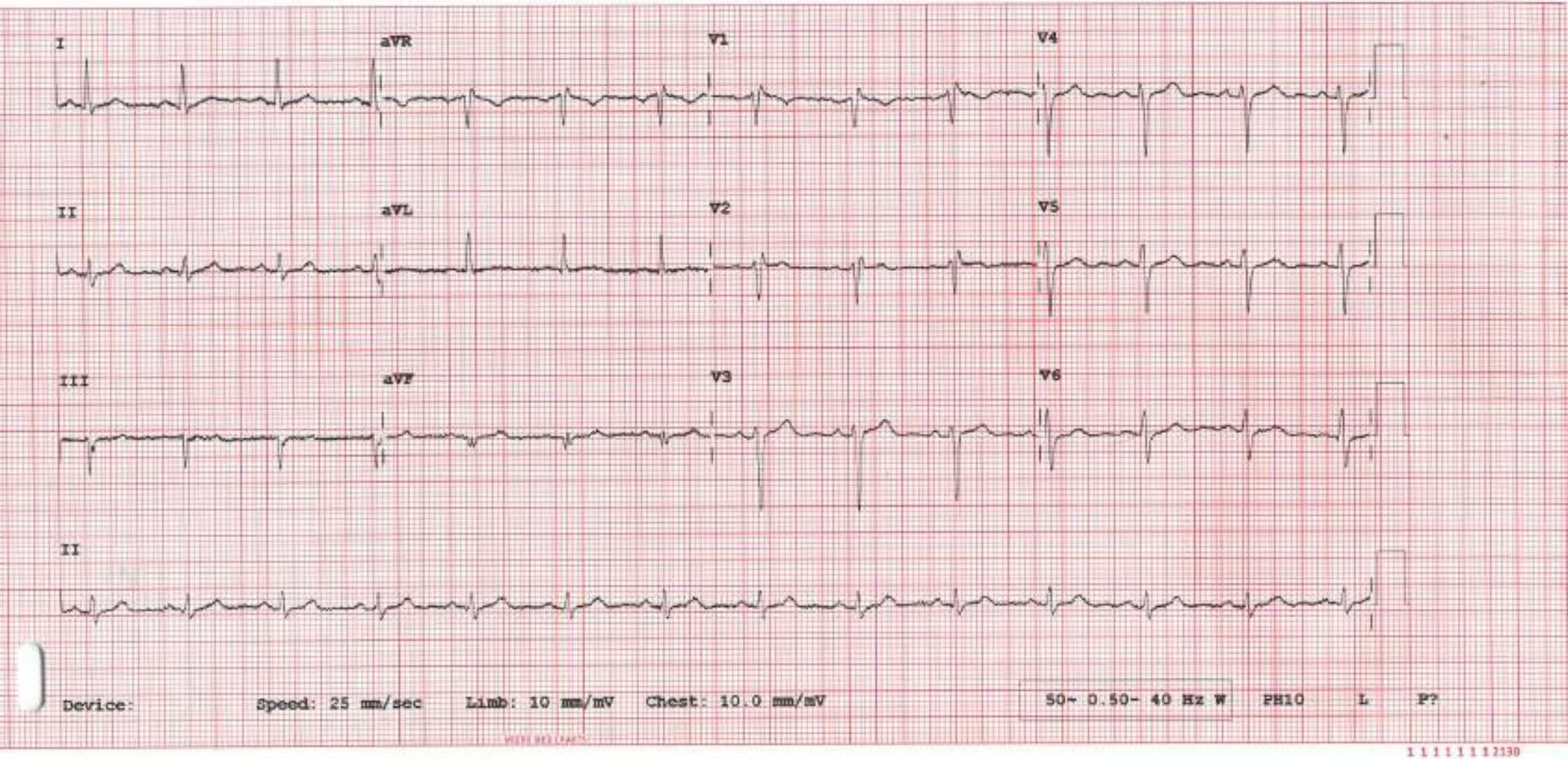
254538 ASHLEY JOSEPH D SOUZA 7/26/2022 11:03:22 AM

Oman AlKhair Hospital

ECG

Rate	82
PR	149
QRSD	111
QT	364
QTc	425
--AXIS--	
P	30
QRS	-26
T	39

12 Lead; Standard Placement



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV 50~ 0.50- 40 Hz W PH10 L P?

1 1 1 1 1 1 1 2130

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X-RAY REPORT

Doc No:	0063182
Name:	ASHLEY JOSEPH D SOUZA
Age/DOB:	59 Y — Omani ID/ L.Card No:: 64886261
Sex:	Male
Referred By:	EXTERNAL DOCTOR
Clinical Diagnosis:	
X-Ray/UltraSound	CHEST X-RAY
Date:	26/07/2022
X-Ray Filim No:	TRUCK
Bill No:	0833340
Charge Sheet No:	

Both lung fields are normal

Both cp angles are clear

Mediastinal shadow and bony thorax are normal

Cardiac configuration is within normal limits

Conclusion: A normal X-ray appearance

Signature: .....

DR. NITHINMON CU
SPECIALIST RADIOLOGY
MOH Licence: 2 1 0 5 8
ASTER HOSPITAL IBRI

Seal

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