Appendix 32: EX1 Form (Initial Examination Report)

INITIAL EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)

Petroleum Development Oman
MEDICAL DEPARTMENT

PLEASE COMPLETE YOUR PERSONAL DETAILS IN BLOCK CAPITALS

Surname: AL MASALI
Forenames: MOHAMMED SALIM NASER
Address:
Home telephone number: 99561075

Place of examination: NMC AL HAIL Date: 17/08/23

If a dependent enter employee's name here:
Surname: Forenames:

Birth date: 04/04/77 Nationality: OMANI Country of birth: OMAN Religion: MUSLIM
☑ Male ☐ Female ☑ Married ☐ Single ☐ Separated /Divorced
Relationship to employee: ☐ Wife ☐ Son ☐ Daughter Number of children: 5

Reason for examination: Pre-Employment ☐ Job: DRIVER
Pre-Overseas ☐ Area:

Name and address of family doctor
List your last 3 jobs
(1)
(2)

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		✓	41. Awarded benefits for industrial injury/illness		✓
4. Any ear discharge		✓	24. Abnormal heartbeat		✓	42. Treated for a mental condition, e.g. depression		✓
5. Asthma/bronchitis		✓	25. High blood pressure		✓	43. Treated for problem drinking or drug abuse		✓
6. Hayfever /other significant allergy		✓	26. Stroke		✓	44. Exposed to toxic substance or noise		✓
7. Any skin trouble		✓	27. Serious chest pain		✓	FOR WOMEN ONLY		
8. Tuberculosis		✓	28. Any blood disease		✓	Have you ever had:-		
9. Shortness of breath		✓	29. Kidney disease		✓	45. An abnormal smear		
10. Coughed/vomited blood		✓	30. Blood in urine		✓	46. Any gynaecological treatment		
11. Severe abdominal pain		✓	31. Diabetes		✓	47. Are you pregnant?		
12. Stomach ulcer		✓	32. Headaches/migraine		✓	48. HAVE YOU HAD AN ILLNESS NOT MENTIONED ABOVE		
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 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: 17/08/23 **Signature of Applicant:**

C.R. No: 1000117
Ministry of Health
RECEPTION
Specialty hospital, Al Hail

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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					Colour Vision	Blood Group
							DISTANT		NEAR			
							R	L	R	L		
167	109	39.08	150/90	56 /mins.	L (N) R (N)	Uncorrected	6/6	6/6	(N)	(N)	(N)	
						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	→ Hyperuricemia.			9. Chest X-Ray
		4. Drug Screen		✓		10. ECG
	✓	5. Lipids (40 years +)	→ Dyslipidemia.	✓		11. CVS risk for 40 yrs. & above
	✓	6. Sickle Cell test	→ positive.			12. HIV, Hepatitis screening

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

Needs Haemoglobin Electrophoresis to R/o trait from Sickle cell Disease.

ASSESSMENT:

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

FIT

Date: 17/08/2025 Name (Block Capitals): Dr. / Nurse DR. SHIVA KUMAR Signature:

REVIEW/CONSULTATION

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

C.R. No: 1664157 Sultanate of Oman RECEPTION nmc specialty hospital, Al Hail

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Fitness to Work Certificate for drivers

Employee Data				
Name MOHAMMED SALIM NASSOR SALEEM AL MASSALI			Date 17/08/23	
I.D No. 3295489	Age 45		Department/Company TRUCKOMAN EQUIPMENT RENTAL	
			Occupation DRIVER	
Type of Medical Evaluation			Mark those applying √	
A5- HVD- Crane or forklift driving & all heavy vehicles			A7- Professional driving-light vehicles	

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 machinary or sharp edges			
Operate Heavy motor vehicles, forklifts or heavy machinery			
Other (Specify)			
Temporary Unfit until			
Permanently Unfit			
Name of health advisor Signature Date			nmc specialty hospital, Al Hail C.R. No: 1660137 Sultanate of Oman RECEPTION

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

Employee Data		Date: 17/08/23
Name: MOHD SALIM NASSER SALEEM AL MAASAL		Department/Company: TRUCKMAN EQUIPMENT RENTAL
I. D No. 3295489	Tel # 44561075	Occupation : 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)
1	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
1	Sitting quietly after lunch without alcohol
0	In a car, while stopped for a few minutes in traffic
Total	3

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, MOHD SALIM NASSER SALEEM AL MAASAL (Print Name) certify that to the best of my knowledge the above information supplied by me is true and **correct.**

Signature: **Date:** 17/08/2023

C.R. No: 1668137
Sultanate of Oman
RECEPTION
one specialty hospital, Al Hail

Framingham Risk Score (2008)

Questions

1.	Gender?	Male
2.	Age?	45-49
3.	Total Cholesterol?	4.14-5.15 mm...
4.	HDL?	0.9-1.16 mmo...
5.	Systolic Blood Pressure?	150-159 mmHg
6.	On Medication for Hyperte...	No
7.	Smoker?	No
8.	Diabetic?	No
9.	Known Vascular Disease (C...	No

About

The FRS estimates the 10 year risk of manifesting clinical CVD (CAD, Stroke, PVD, CHF, cardiac death). Although not examined in the 2008 model, it is common practice to double the FRS if there is a FHx of premature CAD in a 1st degree relative (men <55y, women <65y).

*The risk stratification tool for the ESC is the SCORE system which estimates 10y risk of CVD death. Patients with a 10y risk of CVD death ≥5% are considered high risk. The lipid guidelines recognize risk equivalents as a distinct category that warrant immediate treatment. For patients with an ESC SCORE ≥ 5% a 3 month trial of lifestyle measures is a reasonable starting point. If after 3 months the lipids remain above moderate risk targets and the SCORE remains ≥ 5% then intensive therapy to reach high risk targets is recommended.

References

Ralph B. D’Agostino, Sr, Ramachandran S. Vasan, Michael J. Pencina, Philip A. Wolf, Mark Cobain, Joseph M. Massaro and William B. Kannel.
General cardiovascular risk profile for use in primary care: the Framingham Heart Study.
Circulation 2008 February 12, 117 (6): 743-53

McPherson R et al.
Canadian Cardiovascular Society position statement—recommendations for the diagnosis and treatment of dyslipidemia and prevention of cardiovascular disease.
Canadian Journal of Cardiology 2006, 22 (11): 913-27

Estimated 10-year Global CVD Risk

9.4%

Risk Category

Low Risk

Estimated Vascular Age

54 Years

Treatment Guidelines

ATP-III (2004)
Treatment Targets
LDL <160 mg/dL (<4.14 mmol/L)
Non-HDL <190 mg/dL (<4.93 mmol/L)

CCS (2009)
Initiate Pharmacotherapy if
LDL >5 mmol/L (>193 mg/dL)
TChol/HDL-C >6 mmol/L (>231 mg/dL)

Treatment Targets
≥50 % decrease in LDL-C

ESC (2007, see Info for more)
Treatment Targets
LDL <3 mmol/L (<120 mg/dL)
TChol <5 mmol/L (<194 mg/dL)

Created by QxMD

DR. [illegible] SOUDAH
General Practitioner
[illegible]

[illegible]
C.R. No. 1660137
Certificate of Clinic
[RECEPTION]
[illegible] Specialty hospital, Al Hail

DEPARTMENT OF LABORATORY MEDICINE

File No:	50105428	**Report No:**	0095106		
Name:	MOHAMMED SALIM NASSER SALEEM AL MABSALI	**Sample Date:**	17/08/2023	**Time:**	9:50
		Received By:			
Address:		**Received Date:**		**Time:**	
Gender:	M **Age:** 45 Y **Nationality:** OMANI	**Report Date:**	17/08/2023	**Time:**	12:12
GSM No.:	99561075 **ID Card No.:** 3295489	**Bill No:**	0250627	**Bill Date:**	17/08/2023
Ref. By:	DR ERFAN GHOODJANI	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
PDO Package – 1 (Up to 49 yrs)		consultation with physician Eye check up
COMPLETE BLOOD COUNT		
TOTAL WBC COUNT	4.30 x 10^3 / µL	4.00-11.00 x 10^3 / µL
DIFFERENTIAL COUNT		
NEUTROPHIL (%)	38.00 %	40-75%
LYMPHOCYTE (%)	49.30 %	20-45%
MONOCYTE (%)	8.50 %	2-8%
EOSINOPHIL (%)	3.80 %	1-6%
BASOPHIL (%)	0.40 %	0-1%
HAEMOGLOBIN	13.70 gm/dl	Male : 13 -18 gm/dl Female:11-15 gm /dl childrens upto 1year-11.0 - 13.0 gm /dl upto12years-11.5 - 14.5 gm /dl cord blood:13 -19.5 gm /dl
RBC COUNT	5.18 million/cu	Male :4.5-6.5 million/cu Female:3.9-5.5 million/cu
PLATELET COUNT	214.00 x 10^3 / µL	150 - 400 x 10^3 / µL
HEMATOCRIT	39.20 %	Male :42 - 52% Female:37- 47%
MCV	75.60 fl	76 - 96 fl
MCH	26.40 pg	27 - 33 pg
MCHC	34.90 gm/dl	32 - 36 gm/dl
SICKLE CELL	POSITIVE.	
Method : Solubility test (If Positivo , Hb Electrophoresis / HPLC to be done to confirm Sickle cell anaemia / Trait).		
LIVER FUNCTION TEST		
TOTAL BILIRUBIN	8.10 µ mol/L	Adults:- up to 21 µ mol/L, Children >1 month - up to 17 µ mol/L.

Verified By:

10589
Lab Technologist
MOH License No: 17976
Electronically signed at: 8/17/2023 12:15:00

Approved By:

DR ROSE MARY
Specialist Pathologist
MOH License No: 18178
Electronically signed at: 17/08/2023 12:21:00

C.R. No: 1668137
Sultanate of Oman
RECEPTION
nmc specialty hospital, Al Hail

مستشفى إن إم سي التخصصي
nmc specialty hospital

NMC Healthcare LLC
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		Received By:			
Address:		**Received Date:**		**Time:**	
Gender:	M **Age:** 45 Y **Nationality:** OMANI	**Report Date:**	17/08/2023	**Time:**	12:12
GSM No.:	99561075 **ID Card No.:** 3295489	**Bill No:**	0250627	**Bill Date:**	17/08/2023
Ref. By:	DR ERFAN GHOODJANI	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
		Neonates :- 1.7 - 180 µmol/L
DIRECT BILIRUBIN	3.30 µ mol/L	Adults ;- 0 - 5.0 µ mol/L, Neonates:- 0-10 µ mol/L ,
TOTAL PROTIEN	79.40 g/L	Adults : 66 - 87 g/L
ALBUMIN	47.90 g/L	39.7 - 49.4 g/L
Globulin	31.5 g/L	23-35g/L
SGOT (AST)	18.30 U/L	MALE : up to 40 U/L, FEMALE : up to 32 U/L.
SGPT (ALT)	22.30 U/L	MALE : up to 41 U/L, FEMALE : up to 33 U/L.
ALKPO4 (ALP)	58.00 U/L	Adults: MALES: 40 - 129 U/L, FEMALES: 35 - 104 U/L.
Gamma GT (GGT)	34.00 U/L	MALE- 8 - 61 U/L, FEMALE- 5 - 36 U/L
RENAL FUNCTION TEST		
URIC ACID	478.00 µ mol/L	MALE: 202.3 - 416.5 µ mol/L, FEMALE: 142.8 - 339.2 µ mol/L
CREATININE	98.00 µ mol/L	Adults: MALE: 62 – 106 µ mol/L FEMALE: 44 - 80 µ mol/L
UREA	3.30 mmol/L	2.76 - 8.07 mmol/L
LIPID PROFILE		
TOTAL CHOLESTEROL	4.97 mmol/L	< 5.18 mmol/L
HDL	1.11 mmol/L	>1.5 mmol/L
TRIGLYCERIDES	1.61 mmol/L	Desirable : <2.083 mmol/L Boderline high : 2.83 - 5.67 mmol/L Hypertriglyceridemia >5.65 mmol/L
LDL	3.19 mmol/L	< 2.6 mmol/L
VLDL	0.73 mmol/L	0.128-0.645mmol/L

Verified By:

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Lab Technologist
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Electronically signed at: 8/17/2023 12:15:00

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DR ROSE MARY
Specialist Pathologist
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DEPARTMENT OF LABORATORY MEDICINE

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		Received By:			
Address:		**Received Date:**		**Time:**	
Gender:	M **Age:** 45 Y **Nationality:** OMANI	**Report Date:**	17/08/2023	**Time:**	12:12
GSM No.:	99561075 **ID Card No.:** 3295489	**Bill No:**	0250627	**Bill Date:**	17/08/2023
Ref. By:	DR ERFAN GHOODJANI	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
FASTING BLOOD SUGAR	5.59 mmol/L	4.11 6.06 mmol/L
URINE ROUTINE		
URINE BIOCHEMISTRY		
URINE GLUCOSE	NEGATIVE	NEGATIVE
URINE PROTEIN	NEGATIVE	NEGATIVE
URINE KETONE	NEGATIVE	NEGATIVE
URINE BILIRUBIN	NEGATIVE	NEGATIVE
NITRITE	NEGATIVE	NEGATIVE
URINE PH	6.0	4.6-8.0
SPECIFIC GRAVITY	1.010	1.010-1.030
BLOOD	NEGATIVE	NEGATIVE
UROBILINOGEN	NORMAL	NORMAL
LEUCOCYTE	NEGATIVE	
URINE MACROSCOPY		
COLOUR	PALE YELLOW	
APPEARANCE	CLEAR	
URINE MICROSCOPY		
RBC	NIL /hpf	0-3
PUSCELLS	2-4 /hpf	0-5
EPITHELIAL CELLS	0-2 /hpf	NIL
CRYSTAL	NIL /hpf	NIL
CAST	NIL /hpf	NIL
BACTERIA	NIL	NIL
MUCOUS THREAD	NIL	NIL

Verified By:

10589
Lab Technologist
MOH License No: 17976
Electronically signed at: 8/17/2023 12:15:00

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Tone threshold audiometric test

17/08/2023 10:39:06 AM

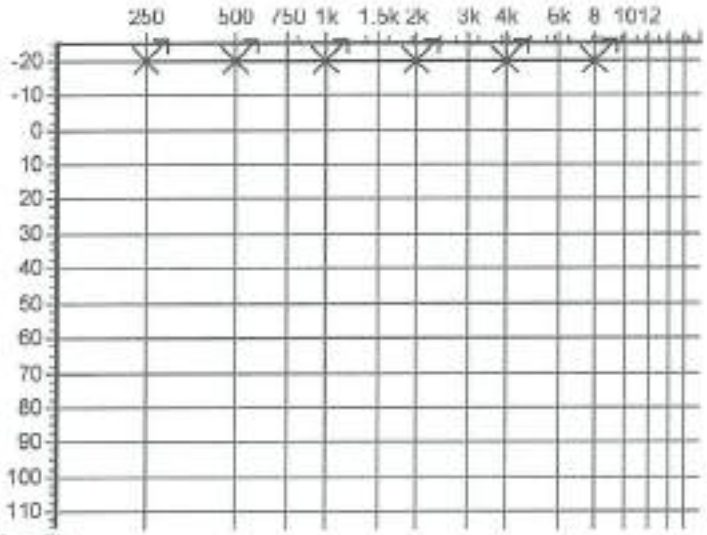
Name: **MOHAMMED**
Surname: **AL MABSALI**

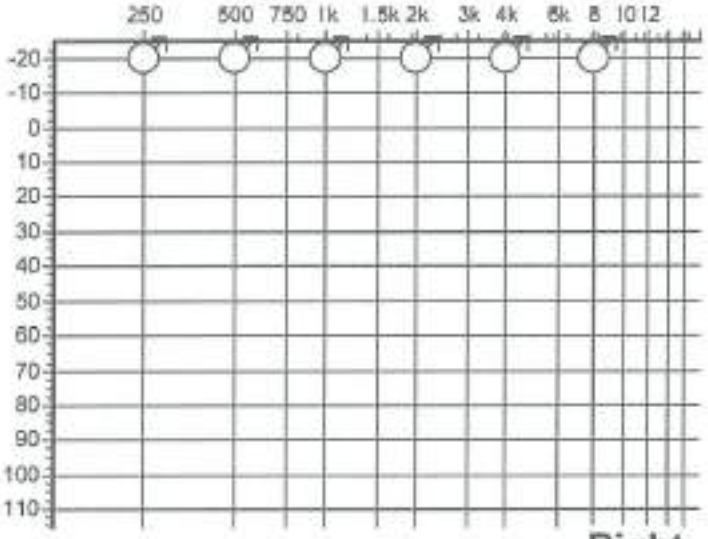
Date of birth: 1977/09/04
Age in years: 45

Company: DR. MUHAMMED KAMRAN
Department:
Job title:
Number:

ID/SS number: 50105428
Passport no.:

Significance: **None**





Left **Right**

125 250 500 1k 2k 3k 4k 6k 8k	9k 10k 11.2 12.5 14k 16k	Frequencies	125 250 500 1k 2k 3k 4k 6k 8k	9k 10k 11.2 12.5 14k 16k
-20 -20 -20 -20 -20 -20		**Air thresholds**	-20 -20 -20 -20 -20 -20	
-30 -32 -29 -33 -37 -38		Noise in ear canal	-13 -23 -17 -27 -35 -30	
1 0 50		Noise for threshold-5dB		
		Bone thresholds		
		Noise in ear canal		
		Noise for threshold-5dB		
		Maximum masking		
		Bone unmasked		
		Noise in ear canal		
		Noise for threshold-5dB		

ZA PLH Binaural impairment		
Pure tone avg. (500 1k 2k) -20	Patient response statistics n 91 Mean 677 Standard deviation 461 Test re-test reliability (1st freq.) 0 False positive response % 23	Pure tone avg. (500 1k 2k) -20

Audiogram notes:

C.R. No: 1066137
Sultanate of Oman
RECEPTION
nmc specialty hospital, Al Hail

MOHAMMED AL MABSALI

fatma alzdajali NMC AL HAIL 1073

KUDUwave

Capturer of data version number: 2.12.12.0
Report software version: 2.4.3.0
Report generated on: 17/08/2023 10:46:59 AM
Unique Global Patient Number: C0F7F0A821504 2FBBCCA31F733ADCA1C

Last calibration date: 20/10/2017
KUDUwave serial number: 0901-00672
Bone vibrator serial number: A3482J
Sound booth: SANS 10182 Diagnostic
Type of audiometer: Near Type 1
Test protocol:

Vitalograph

Pulmonary Function Report

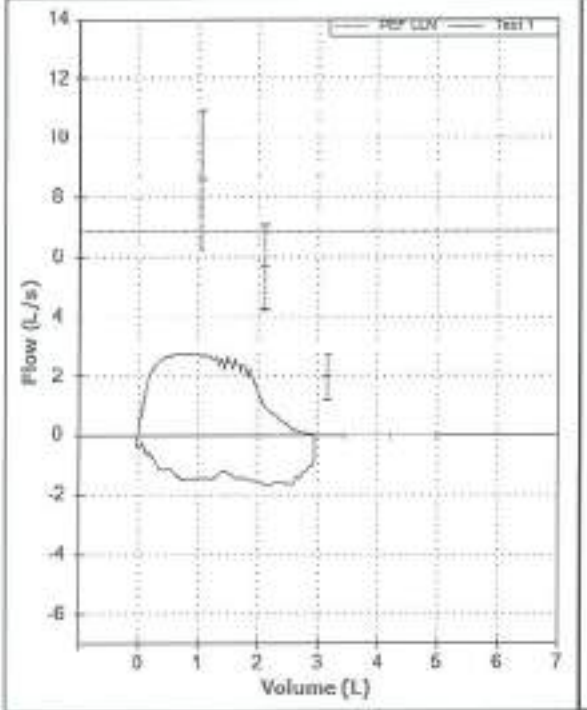
Subject Information

ID:	2023229_104826126	Alternate ID:	50105428		
Last Name:	Al Mabsali	First Name:	Mohammed	Middle Name:	Salim
Population:	MIDDLE EAST	Gender:	Male	Date of Birth:	04/09/1977
Age:	45	Height:	167 cm	Weight:	109.0 kg
BMI:	39.1	Smoking:	Non Smoker		

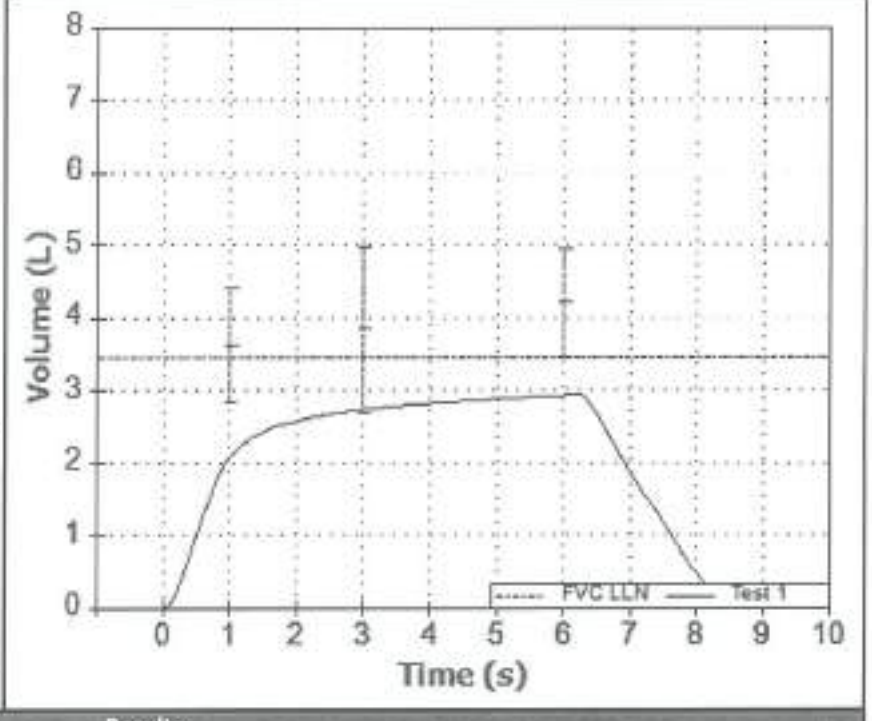
Test Session Information

Test Date:	17/08/2023 10:51	Device:	ALPHA Touch	Serial Number:	32166
No. of Tests:	3	Accuracy Chk:	30/05/2019 15:42	User:	Administrator
Pred. Values:	Golshan	Pred. Factor:	100%	Posture:	Sitting

Flow/Volume Graph



Volume/Time Graph



Results

Parameter	Pred	LLN	Best	% Pred.	Z-Score
FVC (L)	**4.21**	3.46	**2.95***	**70**	-2.76
FEV1 (L)	**3.63**	2.85	**2.21***	**61**	-2.99
FEV1 Ratio	**0.79**	0.67	**0.74**	**94**	-0.68
FEV6 (L)	**4.21**	3.46	**2.94***	**70**	-2.78
PEF (L/min)	**578**	412	**166***	**29**	-4.07
FEF25-75 (L/s)	**4.55**	3.50	**2.00***	**44**	-3.98

Values at BTPS ,*Below lower limit of normality (LLN)

Session Quality and Repeatability Information

FVC Session Grade	FVC Rep:	FEV1 Rep:	Slow Start of test	End of test criteria not achieved	Cough detected in 1st second
C	0.12 L (4.1%)	0.46 L (20.8%)	0 blow(s)	0 blow(s)	0 blow(s)

Computer Suggested Interpretation

Computer interpretations cannot be relied upon for diagnosis. Mild restriction.

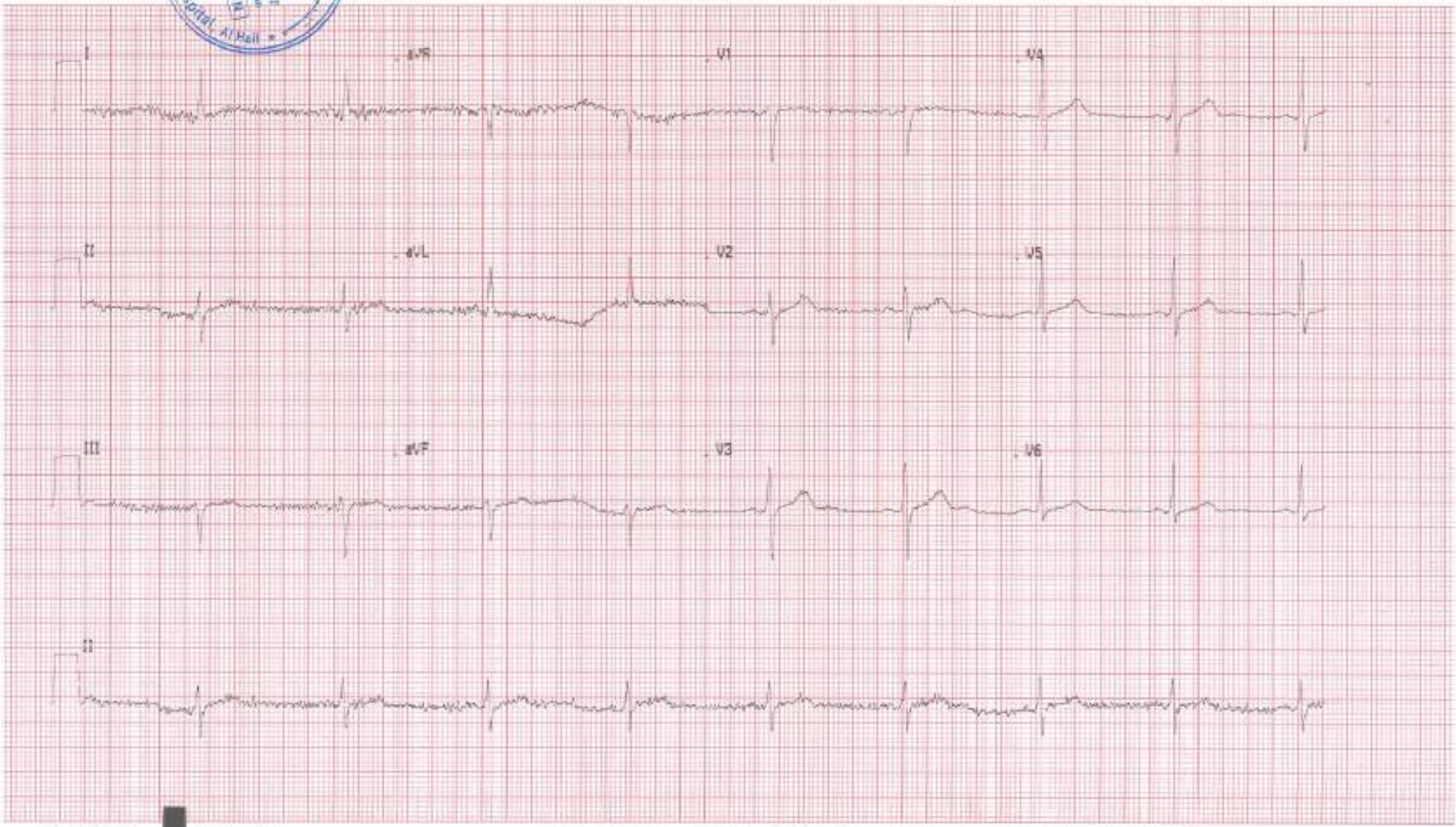
Reference Pictogram

C.R. No. 1668137
Sultanate of Oman
RECEPTION
nmc specialty hospital, Al Hail

ID: 50/03428
DOB:
45yr, Male

Heart rate:	50 BPM	SINUS BRADYCARDIA
PR int:	129 ms	BORDERLINE LEFT AXIS DEVIATION (QRS axis = -20)
QRS dur:	108 ms	NONSPECIFIC T-WAVE ABNORMALITY
QT/QTc:	406/369 ms	BORDERLINE ECG
P-R-T axes	9 -27 49	UNCONFIRMED REPORT

Prime Specialty Hospital Al Hail
C.R. No: 1868137
Subscribe of Omran
RECEPTION



nmc

nmc specialty hospital,al-hail

P.O BOX : 613, Postal Code : 133
al-hail
24269222

Fitness Certificate

Empno:
Date of issue : *17/08/2023*

Ref No : *0000039/FIT/NMC/2023*

This is to certify that Mr. / Mrs. *MOHAMMED SALIM NASSER SALEEM AL MABSALI* with file no *50105428* and
Resident card no. *3295489* was *Examined* at *nmc specialty hospital,al-hail* on *17/08/2023* and will be *FIT TO WORK* from the medical point of view starting from *17/08/2023*

DIAGNOSIS

Remarks
TMT: NEGATIVE FOR ISCHEMIA

DR ERFAN GHOODJANI

Place: *nmc specialty hospital,al-hail*

Signature

DR. ERFAN GHOODJANI
Specialist - Cardiology
MOH Lic. No. 21818
nmc specialty hospital, Al Ghubra

(Hospital Seal)

C.R. No: 1668137
Sultanate of Oman
RECEPTION
nmc specialty hospital, Al Hail

SALIM AL MABSALI, MOHAMMED SALIM
50105428

Patient Information

8/17/2023 12:42:28 PM
Bruce

ID: 50105428	Second ID:	Admission ID:

Date of Birth:	Height: 167 cm	Gender: Male
Age: 45 Years	Weight: 109 kg	Race: Unknown

Indications
test

Medications
NIL

Referring Physician: DR ERFAN	Location: NMC AL HAIL	Procedure Type: TMT

Attending Phy: DR ERFAN	Target HR: 149 bpm (85%)	Reasons for end: ACHIEVED METS,Fatigue
Technician: ANEESH	Max HR(%MPHR): 138 bpm (78%)	Symptoms: NO CHEST PAIN

Diagnosis

Notes

C.R. No: 1668137
Sultanate of Oman
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nmc specialty hospital, Al Hail

Conclusions

The patient was tested using the Bruce protocol for a duration of 06:05 mm:ss and achieved 7.7 METs. A maximum heart rate of 138 bpm with a target predicted heart rate of 92% was obtained at 05:40. A maximum systolic blood pressure of 192/97 was obtained at 05:11 and a maximum diastolic blood pressure of 192/97 was obtained at 05:11. A maximum ST depression of -0.9 mm in aVL occurred at 09:50. A maximum ST elevation of +1.3 mm in II occurred at 06:00. The patient reached target heart rate with appropriate heart rate and blood pressure response to exercise. No significant ST changes during exercise or recovery. No evidence of ischemia. Normal exercise stress test.

DR. ERFAN GHOOLJAN
SPECIALIST CARDIOLOGY
MOH LIC. No. 21439
NMC SPECIALTY HOSPITAL, Al Ghubra

Reviewed by:

Signed by:

Date:

UNCONFIRMED REPORT

SALIM AL MABSALI, MOHAMMED SALIM
50105428

Exam Summary

8/17/2023 12:42:28 PM
Bruce

Summary

Exercise Time: 06:05
Leads with 100uV ST: II, III, aVF
PVCs: 8
Duke Treadmill Score: 1

Max Values

Speed: 3.4 MPH | HR: 138 BPM | 78% of MPHR (175 bpm)
Grade: 14 % | SBP: 192/97 mmHg
METs: 7.7 | DBP: 192/97 mmHg
HR*BP: 25920 BPM * mmHg
ST/HR Index: 1.36 uV/bpm in at 03:20

Max ST

ST elevation: 1.3 mm in II at 06:00
ST depression: -0.9 mm in aVL at 09:50

Max ST Changes

ST elevation change: 0.4 mm in II at 06:00
ST depression change: -0.9 mm in V2 at 04:10

C.R. No. 1669137
Sultanate of Oman
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STAGE SUMMARY

ST measurement based on J+60ms

		Speed (MPH)	Grade (%)	HR (BPM)	BP (mmHg)	METs	HR*BP	ST LEVEL (mm) I	II	III	aVR	aVL	aVF	V1	V2	V3	V4	V5	V6
BP	PRE-X	0.0	0.0	68	161/97	-	10948	0	1	1	-0.6	-0.5	1	0.4	0.8	0.9	0.8	0.7	0.6
START EXE	EXE 00:00	0.0	0.0	80	-	1.3	-	0	1.1	1.1	-0.6	-0.6	1.1	0.4	0.8	1	1	0.8	0.6
STAGE 1	EXE 02:32	2.5	12.0	112	-	5.0	-	-0.2	0.8	0.9	-0.4	-0.6	0.8	0.1	0.2	0.5	0.5	0.6	0.5
BP	EXE 02:48	2.5	12.0	118	177/89	5.0	20886	-0.5	0.5	1	-0.1	-0.8	0.8	0.1	0.1	0.4	0.5	0.6	0.5
BP	EXE 05:11	2.5	12.0	135	192/97	7.1	25920	0.1	0.7	0.6	-0.4	-0.3	0.6	0	0.2	0.2	0.2	0.5	0.4
STAGE 2	EXE 05:32	2.5	12.0	137	-	7.1	-	-0.2	0.6	0.7	-0.3	-0.5	0.7	0	0.1	0.3	0.3	0.5	0.4
Peak	EXE 06:05	3.4	14.0	-	-	7.7	-	0.1	1.3	1.2	-0.8	-0.6	1.2	-0.2	-0.1	0.1	0.1	0.2	0.2
Treadmill Stopped	REC 00:00	0.0	0.0	-	-	7.7	-	0.1	1.3	1.2	-0.8	-0.6	1.2	-0.2	-0.1	0.1	0.1	0.2	0.2
BP	REC 01:35	0.0	0.0	109	192/87	4.7	20928	-0.3	0.6	0.9	-0.2	-0.6	0.8	0	0.1	0.4	0.5	0.5	0.4
BP	REC 02:36	0.0	0.0	98	183/81	2.9	17934	-0.3	0.5	0.8	-0.2	-0.6	0.7	0.1	0.1	0.3	0.4	0.4	0.3
BP	REC 03:35	0.0	0.0	95	175/88	1.1	16625	-0.3	0.6	0.9	-0.2	-0.6	0.8	0.1	0.1	0.4	0.4	0.4	0.4
BP	REC 04:41	0.0	0.0	96	161/88	1.0	15456	-0.3	0.6	0.9	-0.3	-0.6	0.7	0.1	0.1	0.4	0.4	0.5	0.4
END REC	REC 04:42	0.0	0.0	97	-	1.0	-	-0.3	0.6	0.9	-0.3	-0.6	0.7	0.1	0.1	0.4	0.4	0.5	0.4

OPAL FTW - Mohammed Al - Mabsali #6717

Ibrahim Al Mahrouqi <ibrahim.mahrouqi@truckomangroup.com>

Thu 8/17/2023 7:53 AM

To:Customercare Hail [NMC Oman] <customercare.hail@nmcoman.com>;Anish Menon [NMC Oman] <anish.menon@nmcoman.com>;Fardeen Ismail Syed [NMC Oman] <fardeen.syed@nmcoman.com>

Cc:Davis George <davis@truckomangroup.com>;Sahaya Jayaraj <Sahaya@truckomangroup.com>;Jeyasingh <jeyasingh@truckomangroup.com>

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NMC Team,

Please arrange OPAL FTW for Mohammed Al Mabsali #6717 and share report later.

Regards,
Ibrahim

C.R. No: 1068132
Sultanate of Oman
RECEPTION
nmc specialty hospital, Al Hail

VEHICLE DRIVING LICENCE

CLASS

NOTE

NAME MOHAMMED SALIM NASSER SALEEM AL MAQBALI

IDOMN3295489<<4<<<<<<<<<<<<<<<
7709047M2312237OMN<<<<<<<<<<<4
MOHAMMED<SALIM<NASSER<<AL<MABS

SULTANATE OF OMAN

IDENTITY CARD

البطاقة الشخصية

CIVIL NUMBER 3295489
EXPIRY DATE 23/12/2023
DATE OF BIRTH 04/09/1977

المقبلي

محمد بن سالم بن ناصر بن سليم المسلي

99561075

C.R. No: 1660137
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