



Appendix 32: EX1 Form (Initial Examination Report)

INITIAL EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)

Petroleum Development Oman
MEDICAL DEPARTMENTPLEASE COMPLETE YOUR PERSONAL
DETAILS IN BLOCK CAPITALS

Surname		Forenames <u>Sukhwant Singh</u>	
Address		Home telephone number	
Place of examination	Date <u>1/10/23</u>		
If a dependant enter employee's name here:			
Surname:		Forenames:	
Birth date:	Nationality:	Country of birth:	Religion:
☒ Male ☐ Female	☐ Married ☐ Single ☐ Separated /Divorced	Relationship to employee ☐ Wife ☐ Son ☐ Daughter	Number of children:
Reason for examination		Job:	
Pre-Employment ☐		Pre-Overseas ☐	
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	
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 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: <u>1.10.23</u>		Signature of Applicant:	

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 L R	VISION DISTANT R L Uncorrected Corrected	NEAR R L N/6 N/6	Colour Vision	Blood Group
168	68	24.1	140 90	76/min.				N	
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. Sickie Cell test							12. HIV, Hepatitis screening

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

Framingham score - 7.8%

ASSESSMENT:

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

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

Signature:

REVIEW/CONSULTATION

1) HTN on Rx / Newly Diagnosed HLR /
Nephropathy / Controlled (20) Kidney i (20) VUS
Calcium (14-3 mm)
AS / LSN / medicine / Urology Consultation

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

Signature:

HTN monitor by once every 3 months

Dt: 03/10/23

DEPARTMENT OF LABORATORY SERVICES

File No: 0286354	Report No: 0577111
Name: SUKHWANT SINGH	Sample Date: 01/10/2023 Time: 7:02
Address:	Received Date: 01/10/2023 Time: 7:02
Gender: M Age: 52 Y Nationality: INDIAN	Report Date: 01/10/2023 Time: 08:23
GSM No.: 94246483 ID Card No.: 72204375	Bill No: 1181741 Bill Date: 01/10/2023
Doctor: DR. RAJESH RAJENDRAN	Company: TRUCK OMAN LLC

INVESTIGATION	RESULT	REFERENCE RANGE
SLB Pre-Employment Med Check		
PURETONE AUDIOMETRY		
S.Creatinine	1.40 mg/dL	Male : 0.7 - 1.2 mg/dl Female : 0.5 - 0.9 mg/dl
eGFR (MDRD)	61 mL/min/m2	Normal >90 Mild (60-89) Moderate (30-59) Severe (15-29) Renal Failure <15
S.Uric Acid	4.10 mg/dl -	Male:3.6 - 7.7 mg/dL Female:2.5 - 6.8 mg/dL
ESR	02 mm/hr -	Male : 0-10 mm/hour Female: 0-20 mm/hour
Fasting Blood Glucose	97.60 mg/dL -	Normal: <100 mg/dl Prediabetes: 100-125 mg/dl Diabetes: 126 mg/dl or higher
S.Creatinine	1.40 mg/dL ↑	Male : 0.7 - 1.2 mg/dl Female : 0.5 - 0.9 mg/dl
eGFR (MDRD)	61 mL/min/m2	Normal >90 Mild (60-89) Moderate (30-59) Severe (15-29) Renal Failure <15
CBC		
WBC COUNT	7.60 10 ³ /uL -	4.0-11.0x10 ³ /mm ³
RBC	4.93 10 ⁶ /uL	4.20 - 6.30 10 ⁶ /uL
HGB	14.60 g/dl -	male 13.5 -18.0 g/dl female 11.5 -16.0 g/dl

Reported By:

Elizabeth

ELIZABETH

Lab Technologist

MOH License No:

Printed at: 01/10/2023 6:28:58 PM

Verified By:

Dr. Mohammed Atif Syed

Dr. Mohammed Atif Syed
Specialist Pathologist

MOH License No: 20491

Page: 1 of 5

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Address:
Gender: M **Age:** 52 Y **Nationality:** INDIAN

GSM No.: 94246483 **ID Card No.:** 72204375

Doctor: DR. RAJESH RAJENDRAN

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Company: TRUCK OMAN LLC

INVESTIGATION	RESULT	REFERENCE RANGE
HCT	45.10 %	37.0 - 51.0 %
MCV	91.50 fL	80.0 - 97.0 fL
MCH	29.60 pg	26.0 - 32.0 pg
MCHC	32.40 g/dL	31.0 - 36.0 g/dL
RDW	13.10 %	11.0 - 14.5 %
NEUT#	3.84 10 ³ /uL	1.50 - 7.00 10 ³ /uL
LYMPH#	2.91 10 ³ /uL	0.60 - 4.10 10 ³ /uL
MONO#	0.62 10 ³ /uL	0.00 - 0.70 10 ³ /uL
EOS#	0.17 10 ³ /uL	0.00 - 0.40 10 ³ /uL
BASO#	0.06 10 ³ /uL	0.00 - 0.10 10 ³ /uL
NEUT%	50.50 %	37.0 - 72.0 %
LYMPH%	38.30 %	10.0 - 58.5 %
MONO%	8.20 %	0.0 - 14.0 %
EOS%	2.20 %	0.0 - 6.0 %
BASO%	0.80 %	0.0 - 1.0 %
PLATELET	319.00 10 ³ /uL	140 - 440 10 ³ /uL
LFT		
Total Bilirubin	0.60 mg/dL	Up to 1.1 mg/dL
Direct Bilirubin	0.07 mg/dL	Up to 0.3 mg/dL
Indirect Bilirubin	0.53 mg/dL	0.2 - 0.8 mg/dL
AST (SGOT)	24.60 U/L	Men : 10 - 50 U/L Female : 10 - 35 U/L
ALT (SGPT)	15.50 U/L	Men : Up to 41 U/L Female : 10 - 35 U/L

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Company: TRUCK OMAN LLC

INVESTIGATION	RESULT	REFERENCE RANGE
ALP	151.20 U/L ↑	Men : 40 - 129 U/L Female : 35 - 104 U/L
Total Protein	7.90 g/dL	6.6 - 8.7 g/dL
Albumin	4.40 g/dL	3.4 - 4.8 g/dL
Globulin	3.5 g/dL	1.8 - 3.6 g/dL
GGT	19.10 U/L	0 - 50 U/L
A:G Ratio	1.257142	1.1-1.8
LIPID PROFILE		
Total Cholesterol	259.70 mg/dL ↑	< 200 mg/dL
Triglyceride	142.10 mg/dL	<150 mg/dL
HDL Cholesterol	59.40 mg/dL	>45 mg/dL
LDL Cholesterol	171.88 mg/dL ↑	<100 mg/dL
Total Chol/HDL Chol ratio	4.37	Desirable < 4
URINE DRUG SCREEN		
Amphetamine (AMP)	Negative	Negative
Barbiturates (BAR)	Negative	Negative
Cocaine (COC)	Negative	Negative
Morphine (MOR)	Negative	Negative
Marijuana (THC)	Negative	Negative
URINE ROUTINE ANALYSIS		
Physical		
Quantity	30 ml	
Colour	Pale Yellow	Pale yellow
Sp. Gravity	1.015	1.003-1.035

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File No: 0288354	Report No: 0577111
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Address:	Received Date: 01/10/2023 Time: 7:02
Gender: M Age: 52 Y Nationality: INDIAN	Report Date: 01/10/2023 Time: 08:23
GSM No.: 94246483 ID Card No.: 72204375	Bill No: 1181741 Bill Date: 01/10/2023
Doctor: DR. RAJESH RAJENDRAN	Company: TRUCK OMAN LLC

INVESTIGATION	RESULT	REFERENCE RANGE
pH	6	5-9
Appearance	Clear	Clear
Chemical		
Glucose	Negative	Negative
Protein	Negative	Negative
Ketones	Negative	Negative
Blood / haemoglobin	Negative	Negative
Bilirubin	Negative	Negative
Urobilinogen	Normal	Normal
Nitrite	Negative	Negative
Leucocytes	Negative	Negative
Microscopic Examination		
Pus Cells	2 - 4 Cells/hpf	0-5 cells/hpf
RBC	NIL cells/hpf	0-2 cells/hpf
Epithelial Cells	1 - 3 Cells/hpf	0-8 cells/hpf
Casts	Absent	Absent
Crystals	Absent	Absent
Others	Absent	Absent

STOOL ROUTINE ANALYSIS

PHYSICAL

Colour	Yellowish Brown	Yellowish Brown
Consistency	Semi solid	Well Formed
Reaction	Alkaline	Acidic
Adult Worms	Absent	Absent

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INVESTIGATION	RESULT	REFERENCE RANGE
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MICROSCOPIC

Ova:	Absent	Absent
Cyst:	Absent	Absent
Pus Cells:	0 - 1 Cells/hpf	Few
RBCs	Absent Cells/hpf	Absent
Epithelial cells	Absent Cells/hpf	Few
Trophozoites	Absent	Absent
Larvae	Absent	Absent
Eggs	Absent	Absent
Worms	Absent	Absent
Fat globules	Absent	Absent
Vegetable cells	Present	Present

Urine drug screen

Method:

Rapid Chromatographic Immunoassay

Interpretation:

Negative: The drug concentration is below the designated cut off levels for the particular drug tested.

Positive: The drug concentration is greater the designated cut off levels for the particular drug tested

Remarks and comments - Urine drug screen

1. Multi-Drug Rapid Test Panel (Urine) provides only qualitative, preliminary analytical results.
2. A secondary analytical method must be used to obtain a confirmed result.
3. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method.
4. This test does not distinguish between drug abuse and certain medications
5. A positive result may be obtained from certain foods or food supplements.

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AUDIOGRAM EXAMINATION SHEET

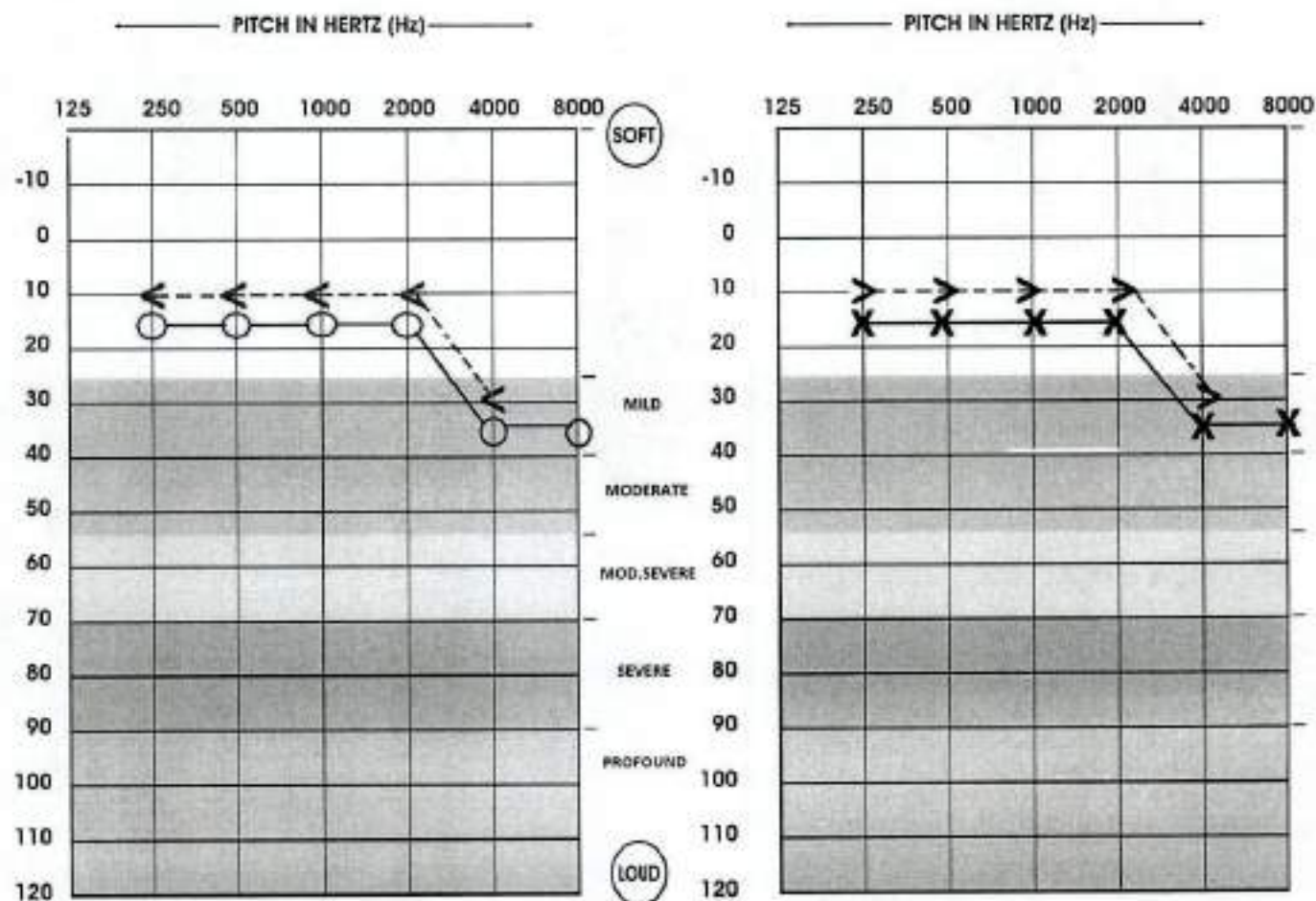
FILE NO: 288354 BILL NO: DATE: 01-10-23

NAME: SUKHWANT SINGH AGE / SEX: 52 / M

COMPANY: TRUCK OMAN LLC

DOB:

CONSULTANT (REF):



WEBER					

						SPECIAL TESTS			
dBHL	PTA	SRT	SIS(%)	MCL	UCL	SISI	TDT	MLB/BLB	OAE
RIGHT	15								
LEFT	15								

INTERPRETATION :

HEARING SENSITIVITY WITHIN NORMAL LIMITS WITH HIGH FREQUENCY SLOPING

RECOMMENDATION :

AHM/QF/AUD/004

USE EAR PROTECTIVE DEVICES (EAR PLUGS)

NAFLA K.V.
AUDIOLOGIST
MOH Licence No: 22832
Apollo Hospital Muscat

SIGNATURE

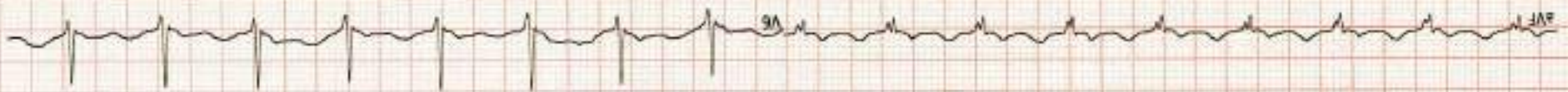
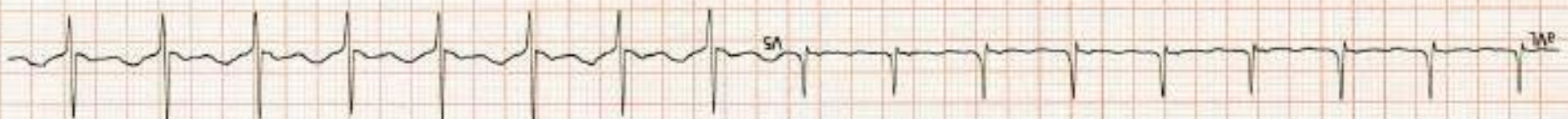
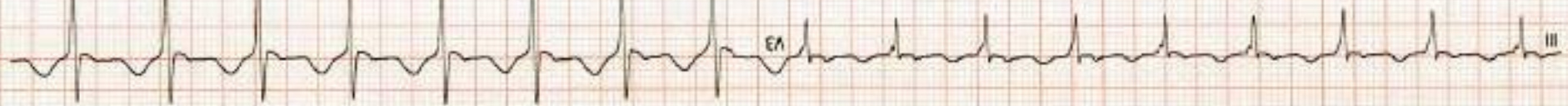
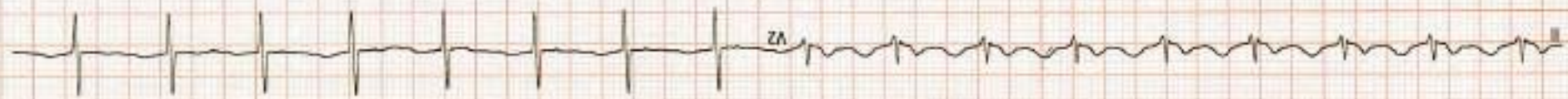
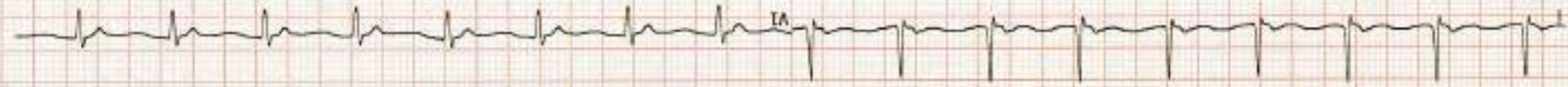
286388
 01/10/2023 08:17:49

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

Mod:
 Tech:
 Note:

HR: 102 bpm
 PR: 144 ms
 QRS: 84 ms
 QT/QTc: 350/424 ms
 QTcB: 456 ms
 QTcF: 418 ms

Rx: 1.22/0.49 mV
 Sok-Lyon: 1.71 mV
 Axis: 55/-18/60°



RADIOLOGY

SI No: 18722	Date: 01/10/2023
Patient Name: SUKHWANT SINGH	Reg No: 286354
Age: 52 Y	Gender: Male
Nationality: INDIAN	Phone:
Address: al-ghala	
Company: TRUCK OMAN LLC	Policy No:
Certificate No:	Consultant Name: DR. RAJESH RAJENDRAN
Region: CHEST PA	

RADIOGRAPH CHEST PA VIEW

OBSERVATION : Allowing for the rotation and mid inspiratory film
Trachea appears to be in mid line.

Bilateral lung fields appear clear. No mass lesion or opacification.

Bilateral costophrenic and cardiophrenic angles appear normal.

Bilateral hilum appears symmetrical and normal in size.

Cardiac silhouette appears within normal limits.

Bony thoracic appears normal.

No Soft tissue mass or calcification can be seen

IMPRESSION:

Unremarkable chest radiograph

Please correlate clinically & other investigation.

Please note: This is a imaging study and has its own limitations. This is a opinion based on image interpretation and it is not a diagnose on itself. Impression should be considered as professional opinion & correlated with clinical evidence ,reconfirmed by further investigations and relevant data as indicated. If possible the findings should be reconfirmed on higher resolution imaging, special sections and sequences and with other modalities.

DR. SATHISH NUTAKKI
RADIOLOGIST