



MEDICAL FITNESS CERTIFICATE FOR P.D.O

NAME	SUNIL GEORGE		
AGE/D.O.B	42 Y 14.05.1980	DATE	18.10.2022
PASS/ID NO:	71771699	GENDER	MALE
VISION-RT-EYE	6/6 WITHOUT GLASSES	HEIGHT	172 CM
LT-EYE	6/6 WITHOUT GLASSES	WEIGHT	65 KG
HEART	NORMAL	BP	126/78 mmHg
LUNGS	NORMAL	PULSE	74/Min
ABDOMEN	NORMAL	CNS	NORMAL
SKIN	NORMAL	ENT	NORMAL

INVESTIGATIONS

RBS	NORMAL
BLOOD GROUP	B POSITIVE
HAEMOGRAM	NORMAL
LIPIDPROFILE	DLP
RFT	HYPERURICEMIA
LFT	NORMAL
SICKLING TEST	NEGATIVE
URE	NORMAL
ECG	SINUS BRADYCARDIA
AUDIOGRAM	NORMAL HEARING THRESHOLD
FRAMINGHAM SCORE	Probability of developing cardiovascular disease in next 10 yrs is 2.1%

COMMENTS	- DLP - Advised for lifestyle modification - HYPERURICEMIA - Advised for evaluation if symptomatic
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CONCLUSION

MEDICALLY FIT

Signature: _____

Dr. B. VENKATESH KUMAR
 CARDIOLOGIST
 MOH NO#14581





File No: 3418825
Name: SUNIL GEORGE
Age: 42 Y Sex: M
Nationality: INDIAN
GSM No.: 99358140
Ref. By: DR. VENKATESH KUMAR

Doc No: 3621167
Date: 18/10/2022 Time: 12:31
Bill No: 4408683
Chs No:
ID No:

Test	Result	Normal Range
BLOOD GROUP	B	
Rh	POSITIVE	
HAEMOGRAM		
TOTAL COUNT(W B C)	7.1 K/uL	4.0 - 11.0 K/uL
DIFFERENTIAL COUNT		
NEUTROPHILS	37 %	40 - 75 %
LYMPHOCYTES	45 %	20 - 45 %
EOSINOPHILS	11 %	01 - 06 %
MONOCYTS	07 %	02 - 10 %
BASOPHILS	00 %	
HAEMOGLOBIN	15.0 gm/dl	Male : 14 - 18 gm/dl Female - 12-16 gm/dl
R B C COUNT	4.8 mil/ul	3.8 - 5.8 mil/ul
PCV	42.6 %	37 - 47 %
M C V	88.6 fL	78 - 93 fL
M C H	31.2 pg	27 - 32 pg
M C H C	35.2 gm/dL	31 - 35 gm/dL
PLATELET COUNT	188 k/UL	150 - 400 k/UL
SICKLING TEST	NEGATIVE	
RENAL FUNCTION TEST		
UREA	3.49 mmol/L (21 mg/dl)	1.66 - 7.47 mmol/L 10 - 45 mg/dl
CREATININE	108.73 umol/L (1.23 mg/dl)	61.88-123.76 umol/L 0.7 - 1.4 mg/dl
URIC ACID	469.89 umol/L (7.9 mg/dl)	Male:202-416 umol/L , Male:3.4-7.0 mg/dl, Female:149-357 umol/L Female:2.5-6.0mg/dl

Medical Technologist
Out of Normal Range

Out of Critical Range

Requisitioning Doctor:



Collected Date And Time: 18/10/2022 9:22:00 AM
Reported Date And Time: 18/10/2022 12:31:00

File No: 3418825
 Name: SUNIL GEORGE
 Age: 42 Y Sex: M
 Nationality: INDIAN
 GSM No.: 99358140
 Ref. By: DR. VENKATESH KUMAR

Doc No: 3621168
 Date: 18/10/2022 Time: 12:32
 Bill No: 4408683
 Chs No:
 ID No:

Test	Result	Normal Range	
BLOOD SUGAR[FASTING]	5.33 mmol/L (96 mg/dl)	Normal: upto 5.55 mmol/l, Impaired fasting glucose:5.55-6.99 mmol/l Diabetic : > 6.99 mmol/l	Normal : up to 100 mg/dl Impaired fasting glucose:100-126 mg/dl Diabetic: > 126 mg/dl
LIPID PROFILE			
CHOLESTEROL [TOTAL]	5.66 mmol/l (219 mg/dl)	Upto 5.17 mmol/l	Up to 200 mg/dl
CHOLESTEROL [HDL]	1.4 mmol/l (54 mg/dl)	>1.03 mmol/l	> 40 mg/dl
CHOLESTEROL [LDL]	3.83 mmol/l (148.2 mg/dl)	Upto 3.36 mmol/l	Up to 130 mg/dl
CHOLESTEROL [VLDL]	0.43 mmol/l (16.8 mg/dl)	Upto 1.29 mmol/l	Up to 50 mg/dl
TRIGLYCERIDES	0.95 mmol/l (84 mg/dl)	Up to 2.26 mmol/l	Up to 200 mg/dl
LIVER FUNCTION TEST			
ALKALINE PHOSPHATASE	75 U/L	Male :40 - 129 U/L Female:-35 -104 U/L Children:1y-9 y:145-420 U/L 10y-11y:30 -560 U/L	
LIPID			
SGOT (AST)	20 IU/L	Up to 40 IU / L	
SGPT (ALT)	23 IU/L	Up to 41 IU / L	
TOTAL BILIRUBIN	10.09 umol/L (0.59 mg/dl)	Up to 17 umol/l	Up to 1.0 mg/dl
DIRECT BILIRUBIN	2.91 umol/L (0.17 mg/dl)	Up to 5 umol/l	Up to 0.3 mg/dl
INDIRECT BILIRUBIN	7.18 umol/L (0.42 mg/dl)	Upto 12 umol/L	Up to 0.7 mg/dl
PROTEIN TOTAL	78 gm/L (7.8 gm/dl)	60 - 83 gm/L	6.0 - 8.3 gm/dl
ALBUMIN	47 gm/L (4.7 gm/dl)	32 - 50 gm/L	3.2 - 5.0 gm/dl
GLOBULIN	31 gm/L (3.1 gm/dl)	23 - 35 gm /L	2.3 - 3.5 gm/dl

Medical Technologist
 Out of Normal Range

Out of Critical Range

Requisitioning Doctor:



Collected Date And Time: 18/10/2022 9:22:00 AM
 Reported Date And Time: 18/10/2022 12:32:00



مستشفى بدر السماء

BADR AL SAMAA HOSPITAL

RUW. SULTANATE OF OMAN

More Than Healthcare... Humane Care



File No: 3418825
Name: SUNIL GEORGE
Age: 42 Y Sex: M
Nationality: INDIAN
GSM No.: 99358140
Ref. By: DR. VENKATESH KUMAR

Doc No: 3621169
Date: 18/10/2022 Time: 12:32
Bill No: 4408683
Chs No:
ID No:

Test	Result
URINE ROUTINE EXAMINATION	
PHYSICAL & CHEMICAL EXAMINATION	
COLOUR	Pale Yellow
SP. GRAVITY	1.010
REACTION	Neutral(7.0)
PROTEIN	Nil
SUGAR	Nil
KETONE	Nil
UROBILINOGEN	Negative
BILIRUBIN	Nil
NITRATE	NEGATIVE
MICROSCOPIC EXAMINATION	
R.B.Cs	Nil / HPF
PUS CELLS	2-3 / HPF
EPITHELIAL CELLS	1-3 / HPF
CASTS	Nil / HPF
CRYSTALS	Nil/HPF
PARASITES	Nil/HPF
OTHER FINDINGS	Nil/ HPF

Medical Technologist
Out of Normal Range

Out of Critical Range

Requisitioning Doctor:

Collected Date And Time: 18/10/2022 9:22:00 AM
Reported Date And Time: 18/10/2022 12:32:00





First Name SUNIL GEORGE
 Last Name
 Patient ID 3418825
 Gender Male
 Birthdate 14/05/1980
 Age 42 years

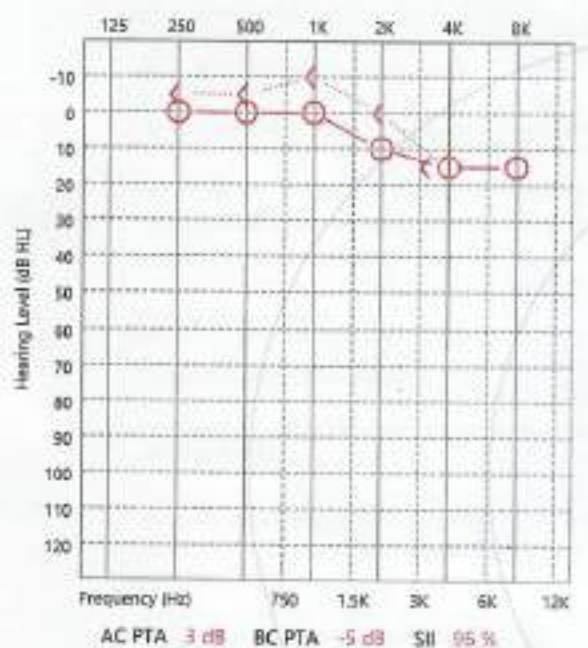
Report Date/Time
 18/10/2022 9:45 AM

Audiogram Graph

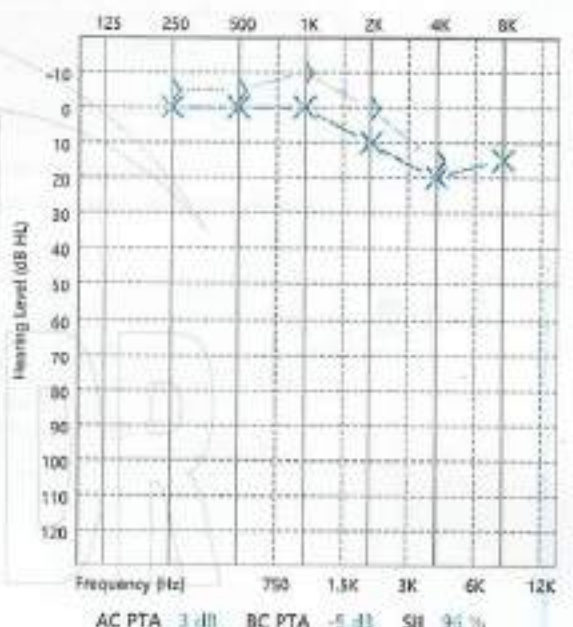
DD45

Audiogram Graph

DD45



Control Bar	Right	Control	Left
AC unaided	☐	☐	☐
AC HR	☐	☐	☐
AC masked	☐	☐	☐
AC masked HR	☐	☐	☐
BC unaided	☐	☐	☐
BC HR	☐	☐	☐
BC masked	☐	☐	☐
BC masked HR	☐	☐	☐
BC masked	☐	☐	☐
BC masked HR	☐	☐	☐
BC masked	☐	☐	☐
BC masked HR	☐	☐	☐



Provisional Diagnosis

BILATERAL HEARING SENSITIVITY ESSENTIALLY WITHIN NORMAL LIMITS.

Examiner SRUTHI JINYOY

License Number 16261

Signed By:

SRUTHI JINYOY
 AUDIOLGIST
 NOH LIC. # 16261

Signed On Date:

18/10/2022



Fitness to Work Certificate

Employee Data		Date : 18/10/24	
Name : SUNIL GEORGE		Department/Company	
LD No : 71771699	Age : 42yrs	Occupation : Workshop Manager	
Type of Medical Evaluation		Mark those applying ✓	
A1 Aircraft refueling	A6 Fire /Emergency response team work		
A2 Breathing apparatus	A7 Professional driving		
A3 Business traveler	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		Yes	
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) – Working Conditions (Extreme / Interir Clinic / Confined Work Place / Noisy)			
Temporary Unfit until			
Permanently Unfit		Date	
Name of health advisor		Signature	Date : 18/10/24

FIT

[Signature]

Dr. B. VENKATESH KUMAR
CARDIOLOGIST
MOH NO#14581



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: GEORGE					
Forenames: SUNIL					
Address:					
Home telephone number:					
Place of examination BADR AL SAMAA	Date 18/10/22				
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 Pre-Employment ☐ Job ☐					
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
				HAVE YOU EVER BEEN:-	
1. Sinus trouble		21. Cancer		40. Rejected for employment or insurance for medical reasons	
2. Neck swelling/glands		22. Heart Disease		41. Awarded benefits for industrial injury/illness	
3. Difficulty in vision		23. Rheumatic fever		42. Treated for a mental condition, e.g. depression	
4. Any ear discharge		24. Abnormal heartbeat		43. Treated for problem drinking or drug abuse	
5. Asthma/bronchitis		25. High blood pressure		44. Exposed to toxic substance or noise	
6. Hay/fever/other significant allergy		26. Stroke		FOR WOMEN ONLY	
7. Any skin trouble		27. Serious chest pain		Have you ever had:-	
8. Tuberculosis		28. Any blood disease		45. An abnormal smear	
9. Shortness of breath		29. Kidney disease		46. Any gynaecological treatment	
10. Coughed/vomited blood		30. Blood in urine		47. Are you pregnant?	
11. Severe abdominal pain		31. Diabetes		48. HAVE YOU HAD AN ILLNESS NOT MENTIONED ABOVE	
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? Nil		Average daily alcohol consumption Nil			
Have you ever taken elicited drugs? (X) PDO test all new/potential employees for elicited/recreational drugs					
FAMILY HISTORY: Diabetes (X) Tuberculosis (X) Epilepsy (X) Asthma (X) Eczema (X)					
Heart disease (X) High blood pressure (X) Stroke (X) Blood Disease (X) Cancer (X)					
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: 18/10/22		Signature of Applicant:			
FOR COMPLETION BY EXAMINING DOCTOR OR NURSE					
Further details of medical history and recreational activities					

B. VENKATESH KUMAR
CARDIOLOGIST
MOH NO#14581



N = Normal A = Abnormal (please describe)				PHYSICAL EXAMINATION									
N	A												
		1. Eyes & Pupils		Normal & Reactive for 7 years, more in throat Normal Sit @, no mmv App, m(4) Normal Normal Normal Normal Normal Normal Normal Normal									
		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		
172	65	22	126 78	74/min.	L R	DISTANT	NEAR	R	L	R	L	②	B+ve
						Uncorrected	Corrected	b/b	b/b	Nb	Nb		
N	A	LABORATORY AND OTHER SPECIAL INVESTIGATIONS				N	A						
✓		1. Urinalysis						7. Audiogram B/c hearing sensibility					
✓		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.)													
ASSESSMENT:													
FIT ALL AREAS ☒ FIT WITH RESTRICTION ☐ TEMPORARY UNFIT ☐ UNFIT ☐													
FIT													
Date: _____ Name (Block Capitals): Dr. / Nurse _____ Signature: _____													
REVIEW/CONSULTATION													
Date: 18/10/2022 Name (Block Capitals): Dr. / Nurse _____ Signature: _____													



DR. VENKATESH KUMAR
 CARDIOLOGIST
 MOH NO#14581

DR. SAJILA P.F.
 MBBS., DNB (ENT), DLO
 Specialist Ent Surgeon
 MOH Lic. No.: 13087

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

Employee Data		Date: 18/10/22
Name: SUNIL GEORGE		Department/Company:
I. D No. 71771699	Tel #	Occupation: 18/10/2022

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

FIT

☐	sitting and reading
☐	watching TV
☐	sitting inactive in a public place (e.g. theatre or meeting)
☐	as a passenger in the car for an hour without a break
☐	Lying down to rest in the afternoon when circumstances permit
☐	Sitting and talking with someone
☐	Sitting quietly after lunch without alcohol
☐	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, _____ (Print Name) certify that to the best of my knowledge the above information supplied by me is true and correct.

Signature: _____ Date: 18/10/22

DR. VENKATESH K. K. CARDIOLOGIST



First Name:
 Last Name:
 Age: 0
 Height: 0 cm
 Weight: 0 kg
 Gender: Male
 Race: No
 Pacemaker: No
 Physician: No
 Technician: No
 Room No.: 0
 Medication1: No
 Medication2: No
 Comments:

Vent. Rate : 51 bpm
 PR Interval : 168 ms
 QRS Duration : 84 ms
 QT/QTc : 436 / 403 ms
 PP/RR Interval : 1172 / 1169 ms
 P/R/T axis : 44 / 62 / 53



Dr. B. VENKATESH KUMAR
 CARDIOLOGIST
 MOH NO#14581

Dr. B. Venkatesh Kumar
Dr. B. Venkatesh Kumar
Dr. B. Venkatesh Kumar

<Diagnosis Result>
 Sinus Bradycardia
 [Summary] Abnormal

Per. Dr. B. Venkatesh Kumar
 3418825

