



Appendix 32: EX1 Form (Initial Examination Report)

INITIAL EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)

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

Surname <u>SHAJI MOOTHANTUZHATHIL</u>	
Forenames <u>THANKAPPAN</u>	
Address	
Place of examination <u>NMC ALHAIL</u>	Home telephone number <u>92019419</u>
Date <u>4/6/25</u>	
If a dependant enter employee's name here:	
Surname: <u>SHAJI MOOTHANTUZHATHIL</u> Forenames: <u>THANKAPPAN</u>	
Birth date: <u>17/4/1968</u>	Nationality: <u>OMANI</u> Country of birth: <u>OMAN</u> Religion: <u>MUSLIM</u>
☐ 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
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/ampit	
How much tobacco each day? <u>Nil</u> Average daily alcohol consumption <u>Nil</u>	
Have you ever taken illicit drugs? ☒ PDO test all new/potential employees for illicit/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: <u>04/06/25</u>	Signature of Applicant: <u>[Signature]</u>





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.
173	73	24.3	125/69
PULSE		HEARING	VISION
70/min.		L N R N	DISTANT Uncorrected 6/6 6/6 Corrected P P
			NEAR R 8 L 10 N 6 N 6
			Colour Vision Redgreen deficiency
			Blood Group
N	A	LABORATORY AND OTHER SPECIAL INVESTIGATIONS	
✓		1. Urinalysis	
✓		2. Hb, Bloodcount, ESR	
✓		3. LFT, RFT, RBS	
✓		4. Drug Screen	
✓		5. Lipids (40 years +)	
✓		6. Sickle Cell test	
✓		7. Audiogram	
✓		8. Lung Function	
✓		9. Chest X-Ray	
✓		10. ECG	
✓		11. CVS risk for 40 yrs. & above	
✓		12. HIV, Hepatitis screening	
OTHER FINDINGS (Physique, scars, disabilities, mental stability including behaviour, etc.)			
DOUBTFUL color vision; Having past history also KCO1 DM & HTN → on medication - Ophthalmology Consultation FIT			
ASSESSMENT:			
☒ FIT ALL AREAS ☐ FIT WITH RESTRICTION ☐ TEMPORARY UNFIT ☐ UNFIT			
Date: 04/6/25		Name (Block Capitals): Dr. / Nurse	
REVIEW/CONSULTATION		Signature:	
Date:		Name (Block Capitals): Dr. / Nurse	
		Signature:	

DEPARTMENT OF LABORATORY MEDICINE

File No: 50036822	Report No: 0155299
Name: SHAJI MOOTHANTUZHATHIL THANKAPPAN	Sample Date: 04/06/2025 Time: 9:52
Address:	Received By:
Gender: M Age: 57 Y Nationality: INDIAN	Received Date: Time:
GSM No.: 92019419 ID Card No.: 91689701	Report Date: 04/06/2025 Time: 13:49
Ref. By: DR ERFAN GHODJANI	Bill No: 0375569 Bill Date: 04/06/2025

INVESTIGATION	RESULT	REFERENCE RANGE
PDO PACKAGE ABOVE 40 YEARS		
RANDOM BLOOD SUGAR	7.05 mmol/L	4.11 -7.9mmol/L
CREATININE	59.00 μ mol/L	Adults: MALE: 62 – 106 μ mol/L FEMALE: 44 - 80 μ mol/L
SGPT (ALT)	8.80 U/L	MALE : up to 41 U/L, FEMALE : up to 33 U/L.
TOTAL WBC COUNT	6.75 x 10^3 / μL	4.00-11.00 x 10^3 / μL
DIFFERENTIAL COUNT		
NEUTROPHIL (%)	59.27 %	40-75%
LYMPHOCYTE (%)	31.01 %	20-45%
MONOCYTE (%)	7.58 %	2-8%
EOSINOPHIL (%)	1.53 %	1-6%
BASOPHIL (%)	0.61 %	0-1%
ERYTHROCYTE SEDIMENTATION RATE	19 mm/1st hr	MALE:0-15 mm/ 1st hr FEMALE:0-20 mm/ 1st hr
HAEMOGLOBIN	12.88 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
SICKLE CELL	NEGATIVE.	
Method : Solubility test (If Positive , I ib Electrophoresis / I IPLC to be done to confirm Sickle cell anaemia / Trait).		
URINE ROUTINE		
URINE BIOCHEMISTRY		
URINE GLUCOSE	NEGATIVE	NEGATIVE
URINE PROTEIN	NEGATIVE	NEGATIVE
URINE KETONE	NEGATIVE	NEGATIVE

Verified By:

Approved By:



10589

Lab Technologist

Specialist Pathologist

MOH License No: 17976
Electronically signed at: 6/4/2025 1:49:00

Printed at: 04/06/2025 2:06:17 PM

Page: 1 of 3



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DEPARTMENT OF LABORATORY MEDICINE

File No: 50036822
Name: SHAJI MOOTHANTUZHATHIL THANKAPPAN
Address:
Gender: M **Age:** 57 Y **Nationality:** INDIAN
GSM No.: 92019419 **ID Card No.:** 91689701
Ref. By: DR ERFAN GHODJANI

Report No: 0155299
Sample Date: 04/06/2025 **Time:** 9:52
Received By:
Received Date: **Time:**
Report Date: 04/06/2025 **Time:** 13:49
Bill No: 0375569 **Bill Date:** 04/06/2025

INVESTIGATION	RESULT	REFERENCE RANGE
URINE BILIRUBIN	NEGATIVE	NEGATIVE
NITRITE	NEGATIVE	NEGATIVE
URINE PH	7.5	4.6-8.0
SPECIFIC GRAVITY	1.005	1.010-1.030
BLOOD	NEGATIVE	NEGATIVE
UROBILINOGEN	NORMAL	NORMAL
URINE MACROSCOPY		
COLOUR	PALE YELLOW	
APPEARANCE	CLEAR	
URINE MICROSCOPY		
RBC	NIL /hpf	0-3
PUSCELLS	1-2 /hpf	0-5
EPITHELIAL CELLS	0-2 /hpf	NIL
CRYSTAL	NIL /hpf	NIL
CAST	NIL /hpf	NIL
BACTERIA	NIL	
MUCOUS THREAD	NIL	
CHEST X RAY PA		
ECG		
LIPID PROFILE		
TOTAL CHOLESTEROL	4.59 mmol/L	< 5.18 mmol/L
HDL	1.09 mmol/L	>1.5 mmol/L
TRIGLYCERIDES	0.84 mmol/L	Desirable : <2.083 mmol/L Boderline high : 2.83 - 5.67 mmol/L Hypertriglyceridemia >5.65 mmol/L
LDL	3.30 mmol/L	< 2.6 mmol/L
VLDL	0.38 mmol/L	0.128-0.645mmol/L

Verified By:

Approved By:



10589

Lab Technologist

Specialist Pathologist

MOH License No: 17976
 Electronically signed at: 6/4/2025 1:49:00

Printed at: 04/06/2025 2:06:17 PM

Page : 2 of 3



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DEPARTMENT OF LABORATORY MEDICINE

File No: 50036822	Report No: 0155299
Name: SHAJI MOOTHANTUZHATHIL THANKAPPAN	Sample Date: 04/06/2025 Time: 9:52
Address:	Received By:
Gender: M Age: 57 Y Nationality: INDIAN	Received Date: Time:
GSM No.: 92019419 ID Card No.: 91689701	Report Date: 04/06/2025 Time: 13:49
Ref. By: DR ERFAN GHODJANI	Bill No: 0375569 Bill Date: 04/06/2025

INVESTIGATION	RESULT	REFERENCE RANGE
AUDIOMETRY		
SPIROMETRY		

Verified By:



10589

Lab Technologist

MOH License No: 17076
Electronically signed at: 04/06/2025 1:49:00

Approved By:



Specialist Pathologist

Printed at: 04/06/2025 2:06:17 PM

Page: 3 of 3

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nmc specialty hospital, al-hail

P.O BOX : 613, Postal Code : 133 al-hail Sultanate of Oman

Sl No: 46929	Bill Date: 04/06/2025	Report Date :04/06/2025 10:31:08
Patient Name: SHAJI MOOTHANTUZHATHIL THANKAPPAN	Reg No: 50036822	
Age: 57Y	Gender: Male	Nationality: INDIA
Address: EMP 6520	Phone:	
Company: TRUCKOMAN EQUIPMENT RENTAL LLC	Policy No:	
Certificate No:		
Region: CHEST X RAY PA		
Referred Doctor:	Consultant Name: DR ERFAN GHODJANI	

CHEST X RAY PA

Both lung fields are clear.

Bilateral CP angles are clear

Cardiac silhouette appears normal .

Both domes of diaphragm are normal.

Bony thorax appears normal

Impression:

- No significant abnormality.

Suggested clinical correlation

04/06/2025 10:30:56



DR ANAMIKA CHATURVEDI

Elegance Medical Center LLC

Radiology

Plot No: 294, Block: 316, Building No: 812, Al Hail North, Sultanate of Oman

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MOH License No: 7709

Disclaimer : This is an electronically generated report and does not require a doctor's signature

AUDIOMETRY REPORT

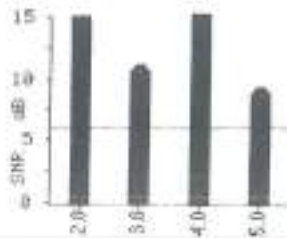
Shaji Moothan-Mezhathil Thankappan

U107.05
02-JUN-25 12:01
DP 4s 4 sec avg
SN: G11005649 G12014595

Sex M MRN 50036822 Date of Test 4/6/25

NAME: _____

Left: Pass

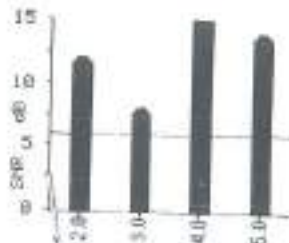


F2	L1	L2	DP	NF	SNR	P
2.0	64	54	10	-6	16	P
3.0	63	53	0	-11	11	P
4.0	64	53	5	-14	19	P
5.0	62	54	7	-2	9	P

U107.05
02-JUN-25 12:01
DP 4s 4 sec avg
SN: G11005649 G12014595

NAME: _____

Right: Pass



F2	L1	L2	DP	NF	SNR	P
2.0	65	55	12	0	12	P
3.0	63	53	-2	-10	8	P
4.0	68	58	3	-14	17	P
5.0	67	56	3	-11	14	P



Signature

Signature of the Technician

NMCOMAN/DOC/NSG/75



Pulmonary Function Report

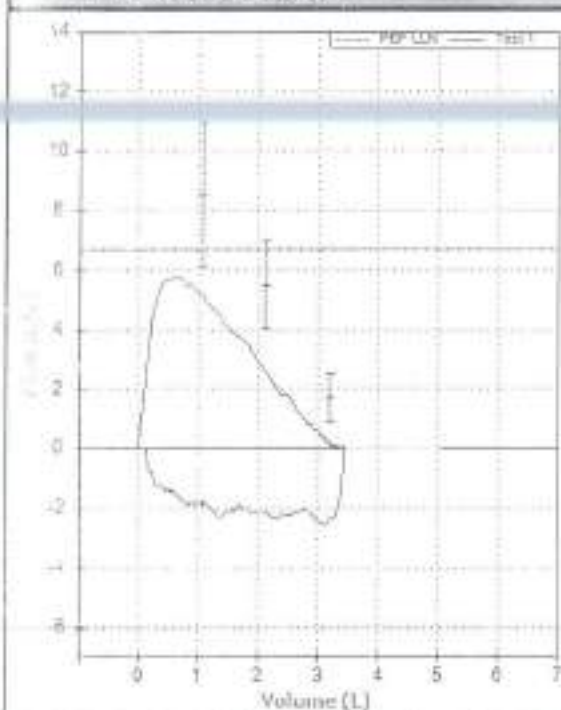
Subject Information

ID:	2025155_103931178	Alternate ID:	50036822		
Last Name:	Thankappen	First Name:	Shaji	Middle Name:	Moothanthathil
Population:	MIDDLE EAST	Gender:	Male	Date of Birth:	17/04/1968
Age:	57	Height:	173 cm	Weight:	73.0 kg
BMI:	24.4	Smoking:	Non Smoker		

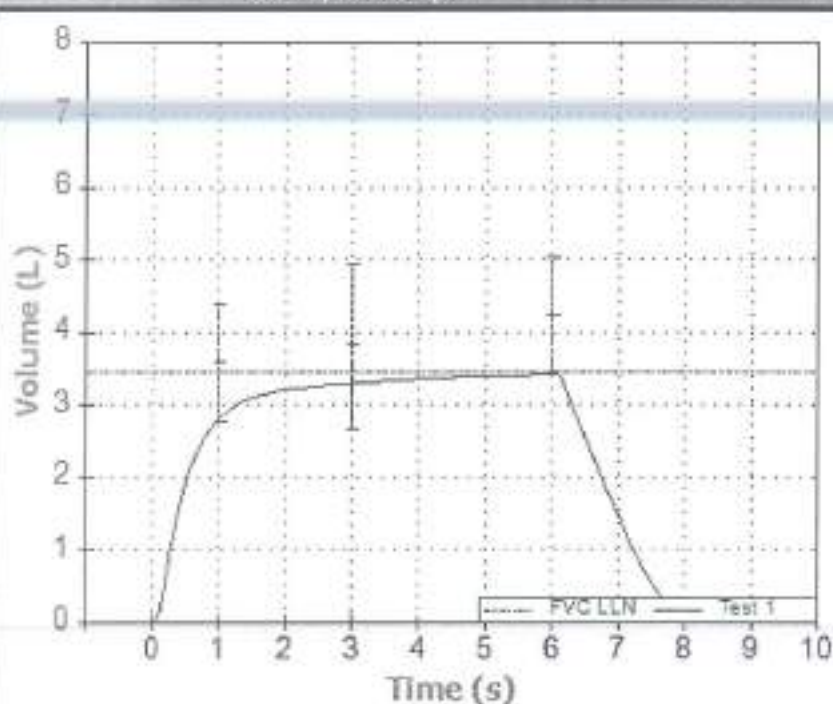
Test Session Information

Test Date:	04/06/2025 10:42	Device:	ALPHA Touch	Serial Number:	32166
No. of Tests:	3	Accuracy Chk:	30/05/2019 15:42	User:	Administrator
Prod. Values:	Golshan	Pred. Factor:	100%	Posture:	Sitting

Flow/Volume Graph



Volume/Time Graph



Results

Parameter	Pred	LLN	Best	% Pred.	Z-Score
FVC (L)	4.25	3.47	3.43*	81	-1.72
FEV1 (L)	3.59	2.78	2.89	81	-1.42
FEV1 Ratio	0.77	0.65	0.84	109	0.96
FEV6 (L)	4.25	3.47	3.43*	81	-1.72
PiF (L/min)	574	402	346*	60	-2.18
PEF25-75 (L/s)	4.27	3.19	3.12*	73	-1.75

Values at 1575. *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
D	-	-	0 blow(s)	0 blow(s)	0 blow(s)

Computer-Supported Interpretation

Computer interpretations cannot be relied upon for diagnosis. Normal ventilatory function.

References

FVC									
FEV1									
FEV1 Ratio									

LLN Reference ULN

ان ام مني الشك في



SITAJI M THANCAAPPAN
50036822
Ethnic:

Exam Start:
Printed Time: 6/4/2025 12:15:35 PM
Date of Birth:
Gender: Male

--- MPH
--- %

RATE: 78
BP ---/---



THANKAPPAN, SHAJI
50036822

Patient Information

6/4/2025 12:20:00 PM
Bruce

ID: 50036822

Second ID:

Admission ID:

Date of Birth:

Age: 57 Years

Height: 173 cm

Gender: Male

Weight: 73 kg

Race: Unknown

Indications
test

Medications:
ANTI DIABETICS, Antihypertensive

Referring Physician: DR.ERFAN

Location: NMC HOSPITAL A. HALL

Procedure Type: TMT

Attending Phy: DR.ERFAN

Target HR: 139 bpm (85%)

Reasons for end: ACHIEVED METS, Target HR

Technician: ARUN

Max HR(96MPHR): 154 bpm (94%) Symptoms: NO CHEST PAIN

Diagnosis

Notes

Conclusions

The patient was tested using the Bruce protocol for a duration of 09:11 min:ss and achieved 10.6 METs. A maximum heart rate of 154 bpm with a target predicted heart rate of 110% was obtained at 09:20. A maximum systolic blood pressure of 195/60 was obtained at 10:17 and a maximum diastolic blood pressure of 145/68 was obtained at 06:58. A maximum ST depression of -0.9 mm in V6 occurred at 07:40. A maximum ST elevation of +2.1 mm in V3 occurred at 10:10. 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.

Reviewed by:

Signed by:

UNCONFIRMED REPORT

Date:



THANKAPPAN, SHAJI
50036822

Exam Summary

6/4/2025 12:20:00 PM

Bruce

Summary

Exercise Time: 09:11
Leads with 100uV ST II, V3, V4
PVCs: 0
Duke Treadmill Score: 2

Max Values

Speed 4.2 MPH
Grade 16 %
METs: 10.6
HR: 154 BPM
SBP: 195/60 mmHg
DBP: 145/68 mmHg
HR+BP: 235/95 BPM * mmHg
ST/HR Index: 1.43 uV/bpm in aVR at 00:20

Max ST

ST elevation: 2.1 mm in V3 at 10:10
ST depression: -0.9 mm in V6 at 07:40

Max ST Changes

ST elevation change: 1 mm in V3 at 10:10
ST depression change: -1.3 mm in II at 06:50

STAGE SUMMARY

ST measurement based on J-waves

	Speed (MPH)	Grade (%)	HR (BPM)	BP (mmHg)	METs	HR+BP	I	II	III	aVR	aVL	aVF	V1	V2	V3	V4	V5	V6
BP	0.0	0.0	80	149/71	-	119/20	-	-	-	-	-	-	-	-	-	-	-	-
START EXE	0.0	0.0	82	-	1.3	-	0.1	0.6	0.5	-0.4	-0.2	0.5	-0.2	0.5	1.1	0.8	0.5	0.3
STAGE 1	1.7	10.0	117	-	4.7	-	0.2	0.5	0.2	-0.5	0	0.4	0	0.5	1.3	0.8	0.3	0
STAGE 2	2.5	12.0	134	-	7.1	-	0	-0.2	-0.2	0	0	-0.2	0.1	0.6	1.1	0.4	-0.1	-0.3
BP	0.4	14.0	147	145/68	8.6	213/15	-0.1	-0.7	-0.6	0.3	0.2	-0.6	0.3	0.7	1.1	-0.1	-0.6	-0.8
STAGE 3	3.4	14.0	151	-	10.3	-	-0.2	-0.3	-0.2	0.1	0	-0.2	0.3	1	1.9	0.5	-0.3	-0.5
Peak	4.2	16.0	152	-	10.6	-	0.1	-0.4	-0.5	0	0.3	-0.5	0.3	0.5	1.4	0.3	-0.4	-0.4
Treadmill Stopped	0.0	0.0	152	-	10.6	-	0.1	-0.4	-0.5	0	0.3	-0.5	0.3	0.5	1.4	0.3	-0.4	-0.4
BP	0.0	0.0	121	185/60	8.8	215/95	-0.1	-0.8	-0.6	-0.6	-0.3	-0.7	0	0.8	2.1	1.1	0.4	0
BP	0.0	0.0	105	188/62	6.7	197/40	0.1	0.6	0.5	-0.5	-0.2	0.5	0	0.5	1.4	0.7	0.2	0
BP	0.0	0.0	93	163/64	4.0	151/39	0	0.2	0.2	-0.2	-0.1	0.2	0	0.3	0.7	0.2	-0.1	-0.2
BP	0.0	0.0	93	160/67	2.2	148/30	0	0.2	0.2	-0.2	-0.1	0.2	0	0.3	0.6	0.1	0.4	-0.2
END REC	0.0	0.0	92	-	1.3	-	0	0.1	0	-0.1	0	0	0	0.4	0.6	0.1	0.4	-0.2

ST LEVEL (mm)



Name : SHAJI MOOTHANTUZHATHIL THANKAPPAN (50036822)

Policy No :

Customer : TRUCKOMAN EQUIPMENT RENTAL LLC (CORPORATE)

Certificate No : _____

Class : NORMAL (NORMAL)

Phone No : 92019419

ID Card

Insurance Card

