PEACE LAND MEDICAL CENTER

SANTOKH SINGH
PID : 42143 Age 48Y Male B.No : 81186
Spec.ID : 100525 SERUM 17/09/25 09:20

Appendix 32: EX1 Form (Initial Examination Report)

INITIAL EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)

Petroleum Development Oman
MEDICAL FTW

PLEASE COMPLETE YOUR PERSONAL DETAILS IN BLOCK CAPITALS

Surname :
Forenames : SANTOKH SINGH
Address : 10215886 **Company Name :** TO
Home telephone number : 71301466

Place of examination: **MUSCAT** Date 17/9/2025

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

DOB: 1/5/1977 Nationality: INDIAN Country of birth: INDIA Religion: SIKH

☑ Male ☐ Female ☑ Married ☐ Single ☐ Separated /Divorced
Relationship to employee ☐ Wife ☐ Son ☐ Daughter
Number of children: 2

Reason for examination Pre-Employment ☑ **Job:** CRANE OPERATOR
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		√			
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? NO Average daily alcohol consumption NO

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: 17/9/2025 **Signature of Applicant:**

PEACE LAND MEDICAL CENTER

P.T.O

SANTOKH SINGH
PID : 42143 Age 48Y Male B.No : 81186
Spec.ID : 100525 SERUM 17/09/25 09:20

PEACE LAND MEDICAL CENTER

FOR COMPLETION BY EXAMINING DOCTOR OR NURSE
Further details of medical history and recreational activities

N	A	N = Normal A = Abnormal (please describe)	PHYSICAL EXAMINATION
√		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.	
		14. Breast	

HEIGHT	WEIGHT	BMI	B.P.	PULSE	HEARING	VISION	DISTANT R	DISTANT L	NEAR R	NEAR L	Colour Vision	Blood Group
165 cm	80 kg	29.3	140/90	62 /mins.	L N R N	Uncorrected Corrected	6/6	6/6			N	

N	A		LABORATORY AND OTHER SPECIAL INVESTIGATIONS	N	A	
✓		1. Urinalysis		✓		7. Audiogram
✓		2. Hb, Blood count, ESR				8. Lung Function
✓		3. LFT, RFT, RBS				9. Chest X-Ray
		4. Drug Screen		✓		10. ECG
✓		5. Lipids (40 years +)		9.4%		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.)

1, LSM & RFR (start Exercise & DASH diet)
2, Take med properly
3, check BP: 1 month later & review by a internist

ASSESSMENT:

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

Date: FIT 15/9/25 Name (Block Capitals): Dr. / Nurse Dr. Shima Seyedabdollah Jafar Cardiologist Specialist MOH Lic. No. 21962 Signature:

REVIEW/CONSULTATION

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

مركز بلاد السلام الطبي
Peace Land Medical Center
Peace Land
بلاد السلام

Epworth Screening Quest. for Sleep Apnoea

Employee Data	SANTOKH SINGH PID : 42143 Age 48Y Male B.No : 81186 SpecID : 100525 SERUM 17/09/25 09:20	Date: 17/9/2025
Name:		Department/Company: TO
I. D No.		Occupation : CRANE OPERATOR

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
0	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 0	

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

Signature: _____ **Date:** 17/9/2025

ص.ب : ١٤٠٣ الرمز البريدي : ١٣٣ دوار العذيبة مبنى ابراج الصحوة مبنى ٢ سلطنة عمان
P.O. Box 1403, Postal Code : 133, Al Azaiba, Roundabout al Sahwa Tower, Sultanate of Oman
Tel.: 24617117 / 24617148 / 24617149 هاتف : ٢٤٦١٧١١٧/ ٢٤٦١٧١٤٨/ ٢٤٦١٧١٤٩

Peace Land Medical Center
AL SAHWA TOWER 2, AZAIBA PO BOX 1403 , POSTAL CODE 133 SULTANATE OF OMAN
medicalcenter@peacelandenergy.com
CLINIC-24617116, VISA MEDICAL- 24617117
TRN :

DEPARTMENT OF LABORATORY

Patient ID	: 42143	**Doc No**	: 64117
Name	: SANTOKH SINGH	**Doc Date**	: 18/09/2025 09:38
Age, Gender	: 48Y, Male	**Bill No**	: 81186
Nationality	: INDIAN	**Bill Date**	: 17/09/2025 08:59
GSM No	: 71301466	**Approved Date**	:
Doctor's Name	: DR.SHIMA	**Collected Time**	: 17/09/2025 09:20
Customer	: TRUCKOMAN LLC-SAFA PROJECT	**Recieved Time**	: 17/09/2025 09:20

TRUCK OMAN-PDO MEDICAL CHECKUP ABOVE 40 YRS

Test	Result	Unit	Normal Range
COMPLITE BLOOD COUNT			
RBC	5.2	x10^12/L	Male 4.38 -6.0 x 10^12/L Female 4.0- 5.2x10^12/L
HAEMOGLOBIN	14.5	gm %	Male 13 - 17 gm % Female 11 - 14 gm %
HCT	44.7	%	Male 39.30 -50.00 % Female 37 -47 %
MCV	85	fl	84-94 fl
MCH	27.6	pg	27 - 33 pg
MCHC	32.4	g/dl	29.6 - 35.6 %
WBC COUNT	6.8	x 10^9/L	4.0 - 11.0 x 10^9/L
DIFFERENTIAL COUNT			
NEUTROPHIL	54	%	40-70 %
LYMPHOCYTE	41	%	20-45 %
EOSINOPHIL	02	%	1-6 %
MONOCYTE	03	%	2-8%
BASOPHIL	00	%	0-1%
PLATELET	154	x 10^9/L	150 - 450 x 10^9/L
SICKLE CELL TEST	NEGATIVE		
LIVER FUCTION TEST			
ALKALINE PHOSPHATASE	86	U/L	53 - 128 U/L
S. BILIRUBIN TOTAL	0.78	mg/dl	0 - 2.0 mg/dl
S.G.O.T.	33.8	U/L	0 - 35.0 U/L
S.G.P.T.	44.2	U/L	10 - 45 U/L
ALBUMIN.	4.13	g/dl	3.50 - 5.20 g/dl
TOTAL PROTEIN.	6.48	g/dl	6 - 8 g/dl
S. BILIRUBIN DIRECT	0.19	mg/dl	0.0 - 0.20 mg/dl
RENAL FUNCTION TEST			
UREA	27.9	mg/dl	18.0 - 55.0 mg/dl
S.CREATININE	0.85		0.70 -1.30 mg/dl
S.URIC ACID	6.9	mg/dl	3.5 - 7.2 mg/dl
LIPID PROFILE.			

Remarks:

Reported By:
Lab Tech

Sr. Lab Technologist

Printed at: 18/09/202509:38:01

Verified By:
Lab Tech

Sr. Lab Technologist

PEACE LAND MEDICAL CENTER * 2775 رقم التوفيس

Approved By:
Lab Tech

Peace Land Medical Center
AL SAHWA TOWER 2, AZAIBA PO BOX 1403 , POSTAL CODE 133 SULTANATE OF OMAN
medicalcenter@peacelandenergy.com
CLINIC-24617116, VISA MEDICAL- 24617117
TRN :

DEPARTMENT OF LABORATORY

Patient ID	: 42143	**Doc No**	: 64117
Name	: SANTOKH SINGH	**Doc Date**	: 18/09/2025 09:38
Age, Gender	: 48Y, Male	**Bill No**	: 81186
Nationality	: INDIAN	**Bill Date**	: 17/09/2025 08:59
GSM No	: 71301466	**Approved Date**	:
Doctor's Name	: DR.SHIMA	**Collected Time**	: 17/09/2025 09:20
Customer	: TRUCKOMAN LLC-SAFA PROJECT	**Recieved Time**	: 17/09/2025 09:20

Test	Result	Unit	Normal Range
Total Cholesterol	149	mg/dl	0.0 - 200 mg/dl
Triglyceride	138.4	mg/dl	0.0 - 150 mg/dl
HDL - CHOL	34.9	mg/dl	35.0 - 79.0 mg/dl
LDL - CHOL	86	mg/dl	< 100 mg/dl
VLDL	28	mg/dl	2.0 - 30 mg/dl
FASTING BLOOD SUGAR	99.4	mg/dl	74 - 100 mg/dl
URINE ROUTINE ANALYSIS			
PHYSICAL			
Quantity	5	ml	
Colour	Pale yellow		
Sp. Gravity	1.010		
pH	Acidic		
Appearance	Clear		
CHEMICAL			
Nitrite	Negative		
Protein	Negative		
Glucose	Negative		
Ketones	Negative		
Urobilinogen	Normal		
Bilirubin	Negative		
Blood	Negative		
MICROSCOPIC			
PUS CELLS	1-2		
EPITHELIAL CELLS	1-3		
RBC	0-1		
CASTS	NIL		
CRYSTALS	NIL		
BACTERIA	NIL		
OTHERS	NIL		

Remarks:

Reported By:
Lab Tech

Sr. Lab Technologist

Printed at: 18/09/202509:38:01

Verified By:
Lab Tech

Sr. Lab Technologist

PEACE LAND MEDICAL CENTER

Approved By:
Lab Tech

SANTOKH SINGH
PID : 42143 Age 48Y Male B.No : 81186
FRS
SpecID : 100525 SERUM 17/09/25 09:20

Results

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)

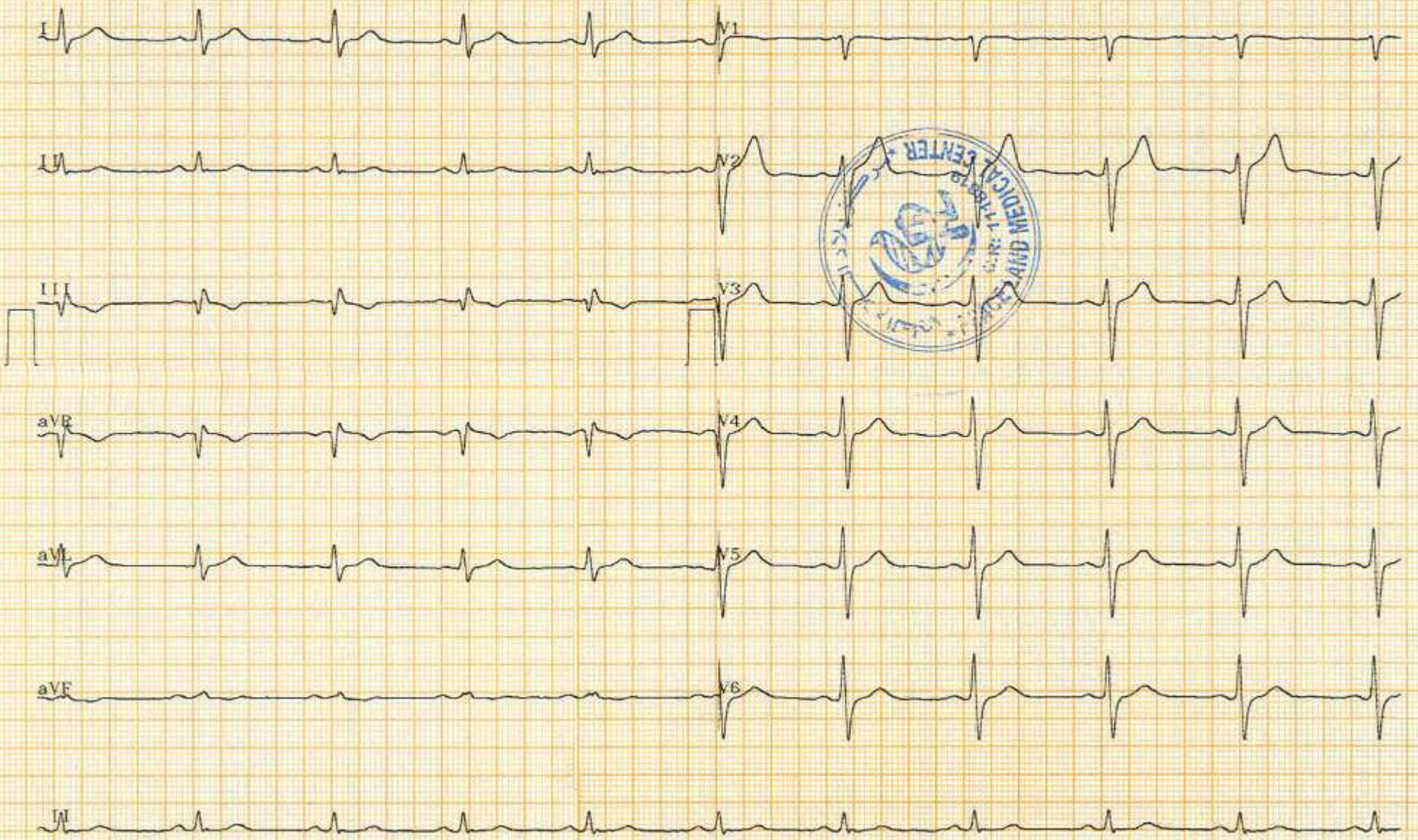
مركز بلاد السلام الطبي
BLESSED LAND MEDICAL CENTER

Created by

ID
Name

Prescribed by:

art Rate: 62bpm
Int.: 156 ms
Dur.: 114 ms
QTc: 406/406 ms
P-R-T axes:
44 33 -9



0.1Hz- 100Hz, AC50Hz, EMG. All Channels: 10.0mm/mV, 25.0mm/sec. CARDIO-M Ver5.10M.30 Medical Econet GmbH.

PEACELAND MEDICAL CENTER
AZAIBA

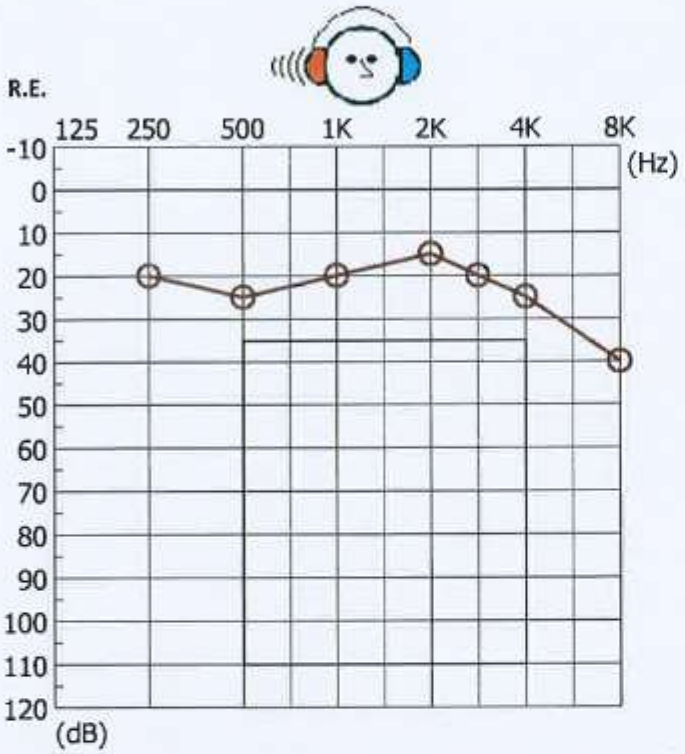
AUDIOMETRY REPORT

SIBELMED W50

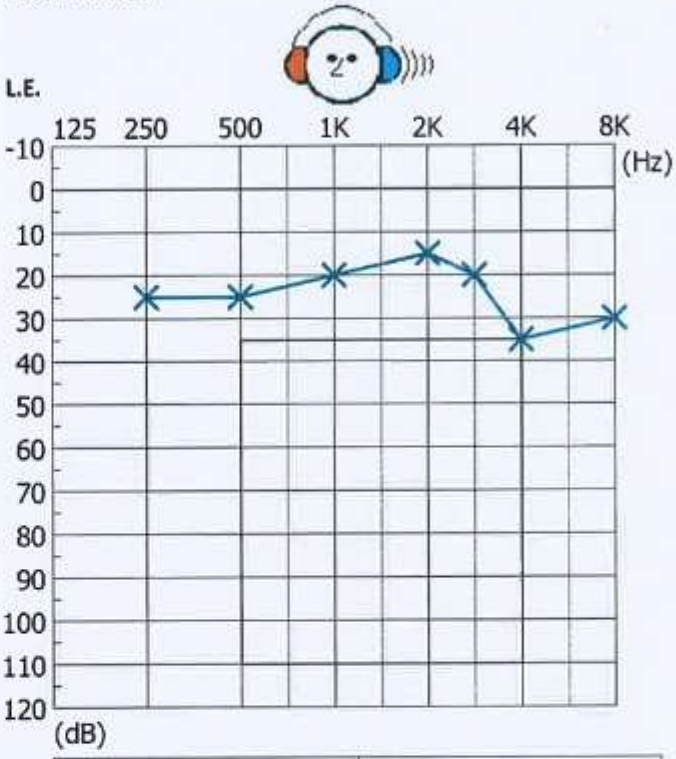
Name: SANTOKH SINGH
PID : 42143 Age 48Y Male B.No : 81186
Age(y):
Sex:
Height (cm):
Weight(Kg):
BMI:
Audio
SpecID : 100525 SERUM 17/09/25 09:20

Test date: 17/09/2025
Reference: 100525
Technician:
Reason:
Origin:
Equipment:
Device serial numb.:
Flash Version:

R.E.



L.E.



No Masking	R.E.	L.E.	With Masking	R.E.	L.E.
Air	O	X	Air	△	□
Bone	<	>	Bone	⊏	⊐
F.Field	⌀	⁒			
No response					

MINISTRY OF LABOUR AND SOCIAL AFFAIRS

	R.E.	L.E.
Hearing Loss (%)	0.0	0.0
Average dBs	20.0	20.0
Bilateral Loss (%)	0.0	

Right ear Normal
Left ear Normal

COMMENTS:

مركز بلاد السلام الطبي
PEACE LAND MEDICAL CENTER

مركز بلاد السلام الطبي
Peace Land Medical Center
Peace Land
بلاد السلام

Appendix 15: Fitness to Work Certificate

Employee Data	SANTOKH SINGH PID : 42143 Age 48Y Male B.No : 81186 SpecID : 100525 SERUM 17/09/25 09:20	Date	17/9/2025
Name		Department/Company	TO
I.D No.		Occupation	CRANE OPERATOR

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 √
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**	18/9/25

Dr. Shima Seyedabdollah Jafar
Cardiologist Specialist
MOH Lic. No. 21962

ص.ب : ١٤٠٣، الرمز البريدي : ١٣٣، دوار العذيبة مبنى ابراج الصحوة مبنى ٢، سلطنة عمان
P.O. Box 1403, Postal Code : 133, Al Azaiba, Roundabout al Sahwa Tower, Sultanate of Oman
Tel.: 24617117 / 24617148 / 24617149 هاتف : ٢٤٦١٧١١٧/٢٤٦١٧١٤٨/٢٤٦١٧١٤٩

مركز بلاد السلام الطبي
Peace Land Medical Center
Peace Land
بلاد السلام

Date: 18.9.25

Mr SANTOKH SINGH

Rx

- Tripliaam tab 5|1.25|5 mg
  #30

  #1 PO 2D [1-0-0]

Dr. Shima Seyedabdollah Jafar
Cardiologist Specialist
MOH Lic. No. 21962

PEACE LAND MEDICAL CENTER

ص.ب : ١٤٠٣، الرمز البريدي : ١٣٣، دوار العذيبة ميثى ابراج الصحوة ميثى ٢، سلطنة عمان
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