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مستشفى

/0149

Initial Medical Examination Report

INITIAL EXAMINATION REPORT (MEDICAL – CONFIDENTIAL)

Surname	Yousuf Said Ali Masoud Al Mezi
Forenames	
Address:	
Home telephone number	97011853

Place of examination: Aster Hospital, Ibri | Date: 29/8/22

If a dependant enter employee's name here:

Birth date: 21/3/1977 | Nationality: Omani | Project: Theck Oman | Country of birth: Iraq | 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)

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	HAVE YOU EVER BEEN:-	Y	N
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. Hayfever /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?

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: 29/8/22 Signature of Applicant:

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فاكس: ٢٥٦٨٨٠٢٥+٩٦٨
نقال: ٧٧٩٩٩٧٧٥+٩٦٨

مستشفى عمان الخير ش.م.م
ص.ب: ٤٠٠ الرمز البريدي: ٥١١
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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)

N	A	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.

HEIGHT cm	WEIGHT kg	BMI	B.P.	PULSE	HEARING	VISION				Colour Vision	Blood Group
							DISTANT		NEAR		
							R	L	R	L	
181cm	82.1kg	25	120/80	78/mins.	L	Uncorrected	6/6		6/6		
					R	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	✓		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.)

Advise : HBA1C, FBS after 10 days.
Tab Bisoglite 1.25mg after 3 months
Tab Metformin XR 1000mg 1-0-1 x 10 days
Tab Fenofibrate 200mg 0-0-1 x 30 days

ASSESSMENT:

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

Date: 29/8/2021 Name (Block Capitals): Dr. R.RAJ Signature:

REVIEW/CONSULTATION

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

DR. BABSON VELLA
LICENCE NO: 12206
GENERAL PRACTITIONER

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Framingham Risk Assessment form

Framingham Risk Assessment (For all professional drivers, crane operators, forklift operator or other employees who are above 40 years of age):

Employee Name: Yousuf Saif Ali Masoud Al Mazi
Emp #: 346023
Date of Assessment: 29/8/2022

1	Age	47 Years	
2	Gender	Female/Male	
3	Total Cholesterol	mmol/L 5.71	
4	HDL Cholesterol	mmol/L 0.910	
5	Smoker	Yes/No	
6	Diabetes	Yes/No	
7	Systolic Blood pressure	mm Hg 120	
8	Is the patient being treated for High blood pressure?	Yes/No	

Framingham Risk score: 13.2 %

Framingham Risk Rating (Circle the appropriate score):

Low **Medium** **High**

Any further action or recommendations?

Assessment or Examination conducted by:

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Epworth Screening Quest. for Sleep Apnoea

Employee Data			
Name:	Yousuf Sat Ali Al-Nagi	Date:	29/8/2022
I. D No.	354693	Tel #	97011853
		Department/Company:	Aster Oman
		Occupation :	

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
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

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:** 29/08/2022

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Fitness to Work Certificate

Employee Data			
Name	Yousuf Saif Ali Al Mayi	Date	29/8/2022
I.D No.	3546023	Age	47 Y.
Department/Company	Thick Oman		
Occupation			

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 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)			
Temporary Unfit until			
Permanently Unfit			

Name of health advisor DR. RAVI Signature Date 29/8/2022 Date

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DEPARTMENT OF LABORATORY MEDICINE

File No:	0256336	Report No:	0627235		
Name:	YOUSUF SAIF ALI MASOUD AL MANJI	Sample Date:	29/08/2022	Time:	9:34
		Received By:	181773		
Address:		Received Date:	29/08/2022	Time:	9:42
Gender:	M Age: 47 Y Nationality: OMANI	Report Date:	29/08/2022	Time:	10:49
GSM No.:	97011853 ID Card No.: 3546023	Bill No:	0837890	Bill Date:	29/08/2022
Ref. By:	EXTERNAL DOCTOR	Report Status:	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
PDO MEDICAL CHECK UP ABOVE 40(truckoman)		
FBS (FASTING BLOOD SUGAR)	**15.22 mmol/L**	3.9 - 6.1
Method :- Hexokinase	**273.96 mg/dL**	70 - 110
LIPID PROFILE - SERUM		
CHOLESTEROL (TOTAL)	**5.71 mmol/L**	1 - 5.1
Method:-Enzymatic	**220.75 mg/dl**	40 - 200
HDL (HIGH DENSITY LIPOPROTEIN)	0.910 mmol/L	0.777 - 1.813
" "	35.18 mg/dl	30 - 70
LDL (LOW DENSITY LIPOPROTEIN)	3.04 mmol/L	1.295 - 4.54
" "	117.42	50 - 172
VLDL (VERY LOW DENSITY LIPOPROTEIN)	**1.76 mmol/L**	0.259 - 1.036
" "	**68.15 mg/dl**	10 - 40
RATIO (TOTAL CHOL / HDL CHOL)	**6.27**	3.8 - 5.9
TRIGLYCERIDES	**3.85 mmol/L**	0.564 - 2.146
Method : Enzymatic	**340.725 mg/dl**	50 - 190
LIVER FUNCTION TEST - SERUM		
TOTAL BILIRUBIN - SERUM	0.402 mg/dL	0.1 - 1
Method : Diazo	6.87 µmol/L	1 - 17.1
DIRECT BILIRUBIN - SERUM	0.132 mg/dL	0.1 - 0.5
Method : Diazo	2.26 µmol/L	1 - 8.55
SGOT (AST)-SERUM (IFCC)	20.89 U/L	Male: up to 40.0 Female up to32.0
SGPT (ALT)-SERUM (IFCC)	32.04 U/L	Male: 10-50 Female:10-35
ALKALINE PHOSPHATASE (ALP)-SERUM (IFCC)	69.46 U/L	Adult : Men -40-129 Female 35-104 Children:(Aged) 7months - 1Year :- <462 1Year - 3 Years :- 881 4 Years - 6 Years :- 398

Processed By: 181773 Lab Technologist

Approved By: ASHWINI Lab Technologist

THANBILATHAHA LAB TECHNICIAN REG NO.

Released By: ASHWINI Lab Technologist

Specialist Pathologist

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DEPARTMENT OF LABORATORY MEDICINE

File No:	0256336	**Report No:**	0627235		
Name:	YOUSUF SAIF ALI MASOUD AL MANJI	**Sample Date:**	29/08/2022	**Time:**	9:34
		Received By:	181773		
Address:		**Received Date:**	29/08/2022	**Time:**	9:42
Gender:	M **Age:** 47 Y **Nationality:** OMANI	**Report Date:**	29/08/2022	**Time:**	10:49
GSM No.:	97011853 **ID Card No.:** 3546023	**Bill No:**	0837890	**Bill Date:**	29/08/2022
Ref. By:	EXTERNAL DOCTOR	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
		7 Years - 12 Years :- <300 13 Years - 17 Years(M) :-<390 13 Years - 17 Years(F) :- <187
TOTAL PROTEIN-SERUM(Colorimetric Assay)	7.33 gm/dL	6.6 - 8.7
ALBUMIN - SERUM (Colorimetric Assay)	4.63 gm/dL	3.9 - 4.9
GLOBULIN - SERUM (Calculation)	2.7 gm/dL	2.3 - 3.5
ALBUMIN / GLOBULIN RATIO - Calculation	1.71	1.2 - 1.5
GGT(GAMMA GLUTAMYL TRANSPEPTIDASE) - SERUM	42.24 U/L	Men : 8-61 Female : 5-36
RENAL FUNCTION TEST (UREA - CREATININE)		
UREA - SERUM	5.47 mmol/L	1.7 - 8.3
Method : Kinetic Assay	32.85 mg/dL	10.2 - 49.8
CREATININE - SERUM	93.74 µmol/L	44.2 - 123.7
Method :-Jaffé Method	1.06 mg/dl	0.5 - 1.4
CBC (COMPLETE BLOOD COUNT)		
TOTAL WBC COUNT	4410 cells/cumm	4000 - 11000 cells/cumm
DC (DIFFERENTIAL COUNT)		
NEUTROPHILS	37.6 %	40-75%
LYMPHOCYTES	44.9 %	20-45%
EOSINOPHILS	8.2 %	2-6 %
MONOCYTES	8.4 %	2-8 %
BASOPHILS	0.9 %	0-1%
HB (HEMOGLOBIN)	14.7 gm/dl	Male-13 - 18 gm/dl Female-11- 15 gm/dl
TOTAL RBC COUNT	5.12 million/cu	MALE: 4.5-6.5million/cu FEMALE: 3.9-5.5million/cu
PLATELET COUNT	2.35 lakhs/cumm	1.0 - 4.0 lakhs / cumm
PCV (PACKED CELL VOLUME)	46.10 %	Males : 42% - 52% Females : 37% - 47%

Processed By: 181773 *Lab Technologist*

Approved By: ASHWINI *Lab Technologist*

THANSEELA THAHA LAB TECHNICIAN

Released By: ASHWINI *Lab Technologist*

Specialist Pathologist

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DEPARTMENT OF LABORATORY MEDICINE

File No:	0256336	Report No:	0627235		
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GSM No.:	97011853 ID Card No.: 3546023	Bill No:	0837890	Bill Date:	29/08/2022
Ref. By:	EXTERNAL DOCTOR	Report Status:	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
MCV (MEAN CORPUSCULAR VOLUME)	90.00 FL	76 - 96 FL
MCH (MEAN CORPUSCULAR HEMOGLOBIN)	28.70 PG	27 - 33 PG
MCHC(MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION)	31.90 g/dl	32 - 36 g/dl
ESR (ERYTHROCYTE SEDIMENTATION RATE)	06 mm/ 1st hr	MALE:0-9 mm/ 1st hr FEMALE:0-20 mm/ 1st hr
Capillary Photometry Technology Measures the kinetics of red cells aggregation.Clinical Laboratory and Standard Institute (CLSI) procedure for the ESR Test.		
SICKLE CELL	NEGATIVE	
URINE ROUTINE		
URINE BIOCHEMISTRY		
GLUCOSE	"+++"	
PROTEIN	NIL	
KETONE	NIL	
BILIRUBIN	NIL	
pH	ACIDIC	
UROBILINOGEN	NORMAL	
URINE MICROSCOPY (Centrifugation Method)		
RED BLOOD CELLS (RBC)	NIL /hpf	
PUS CELLS	1 - 2 /hpf	
EPITHELIAL CELLS	NIL /hpf	
CRYSTALS	NIL /hpf	
CAST	NIL /hpf	
BACTERIA	PRESENT /hpf	
YEAST CELLS	NIL /hpf	

THAMBILA THAHA
LAB TECHNICIAN
DHA No. 181029

Processed By:	Approved By:	Released By:	Specialist / Technologist
181773	ASHWINI	ASHWINI	
Lab Technologist	Lab Technologist	Lab Technologist	

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DEPARTMENT OF LABORATORY MEDICINE

File No:	0256336	**Report No:**	0635716		
Name:	YOUSUF SAIF ALI MASOUD AL MANJI	**Sample Date:**	02/11/2022	**Time:**	9:19
		Received By:	JIBI		
Address:		**Received Date:**	02/11/2022	**Time:**	9:32
Gender:	M **Age:** 47 Y **Nationality:** OMANI	**Report Date:**	02/11/2022	**Time:**	09:58
GSM No.:	97011853 **ID Card No.:** 3546023	**Bill No:**	0848528	**Bill Date:**	02/11/2022
Ref. By:	EXTERNAL DOCTOR	**Report Status:**	Final		

INVESTIGATION	RESULT	REFERENCE RANGE
FBS (FASTING BLOOD SUGAR)	**10.09 mmol/L**	3.9 - 6.1
Method :- Hexokinase	**181.62 mg/dL**	70 - 110

Processed By: JIBI
Lab Technologist

Approved By: SREERAJ
Lab Technologist

Released By: SREERAJ
Lab Technologist

DR. SHAYFA P
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MOH LIC NO: 19475

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Printed at: 02/11/2022 9:58:20 AM

Electronically Signed at: 02/11/2022 9:58:00 AM

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MEDICAL REPORT

NAME: YOUSUF SAIF ALI MASOUD AL MANJI
AGE: 47 Y **DOB:** 29/03/1975 **GENDER:** Male **NATIONALITY:** OMAN
FILE NO: 256336 **ID Card No:** 3546023

Dear Colleage,

To Whom it may Concern

INCIDENTAL DETECTION OF HIGH SUGAR AND TRIGLYCERIDE LEVELS DURING MEDICAL CHECKUP.PATIENT ASYMPTOMATIC .

ON EXAMINATION

PT
STABLE ,AFEBRILE,BP:140/75MMHG ,PR:78/MIN,CVS:S1+,S2+,LUNGS:CLEAR,P/A:SOFT,BS+,CNS:NFND

INVESTIGATION

No.	Code	Name	Remarks
1.	LB.102	FBS (FASTING BLOOD SUGAR)	181.62MG/DL

DIAGNOSIS

TYPE 2 DM ,HYPERLIPIDEMIA .

TREATMENT GIVEN

METFORMIN XR 500MG OD FOR 30 DAYS .

FURTHER PLAN

DIET AND EXERCISE CONTROL ADVISED.R/A 1 MONTH TO CHECK FBS AND PPBS .LIPID PROFILE TO CHECK AFTER 2 MONTHS .FIT TO WORK WITH MEDICATIONS .KINDLY DO THE NEEDFUL.

RAKESH YELLA
GP
(Name with Seal)

DR. RAKESH YELLA
LICENSED NO: 12218
GENERAL PRACTITIONER

PLACE :IBRI

DATE :02-11-2022

(Hospital Seal)

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عبري سلطنة عمان

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We'll Treat You Well

مستشفى أستر
نحن نعتني بك دائما

X-RAY REPORT

Doc No:	0053896
Name:	YOUSUF SAIF ALI MASOUD AL MANJI
Age/DOB:	47 Y — Omani ID/ L.Card No:: 3546023
Sex:	Male
Referred By:	EXTERNAL DOCTOR
Clinical Diagnosis:	
X-Ray/UltraSound	CHEST X-RAY
Date:	29/08/2022
X-Ray Filim No:	TRUCK
Bill No:	0837890
Charge Sheet No:	

Both lung fields are normal

Both cp angles are clear

Mediastinal shadow and bony thorax are normal

Cardiac configuration is within normal limits

Conclusion: A normal X-ray appearance

Signature: DR. NITHINMON CU
SPECIALIST RADIOLOGY
MOH Licence: 21058
HOSPITAL IBRI

Seal

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مستشفى عمان الخير ش.م.م
ص.ب. ٤٠٠ الرمز البريدي: ٥١١
عبري سلطنة عمان

256336 YOUSUF

8/29/2022 09:27:22 AM

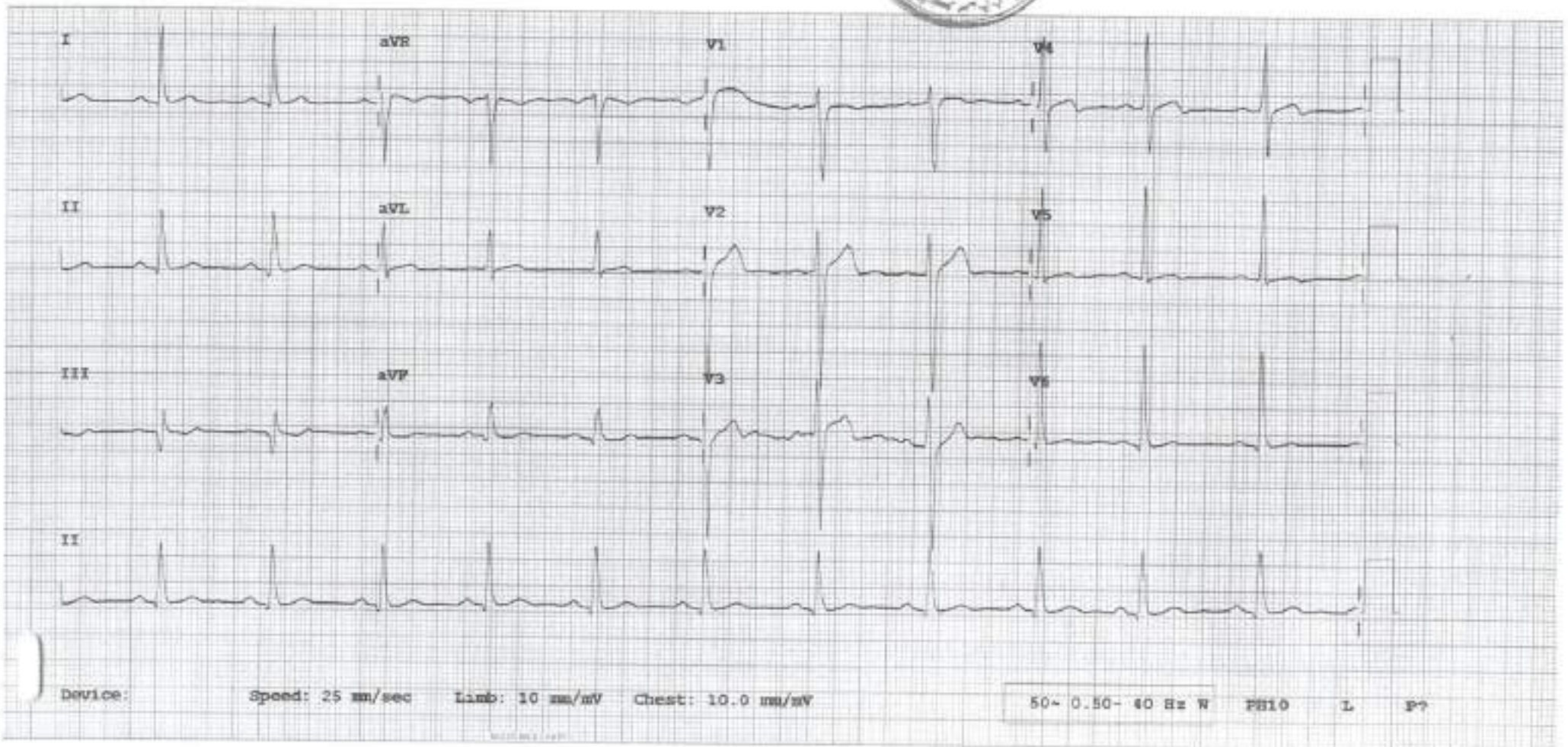
Oman AlKhair Hospital

ECG

Rate 71

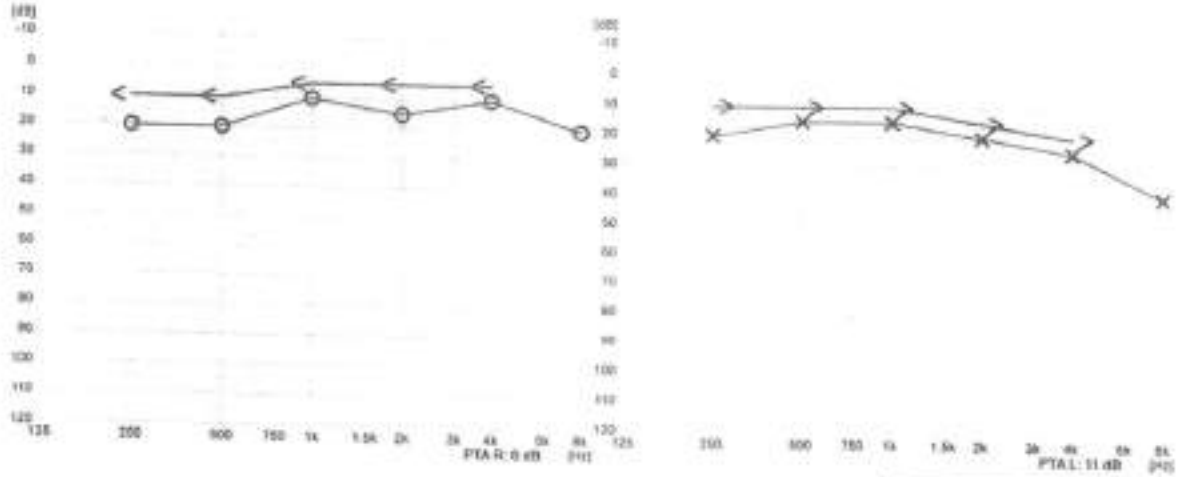
PR
QRSD 112
QT 375
QTc 408

--AXIS--
P
QRS 29
T 13
12 Lead; Standard Placement



SUPER QUALITY HEARING AID AND SPEECH THERAPY CENTER

Code: 0037890	Last name , First name: YOUSUF SAIF ALI , MASO[illegible]NJI	Born:
Test type: Tonal audiometry	Test date: 29.08.2022	



Legend	R	L
Air	O	X
Air/Masked	Δ	□
Bone	<	>
Bone/Masked	[	]
MCL	M	M
UCL	m	m
Free Field	⊘	%
Free Field/Aided	A	A
Binaural		B
No response		I

PTA
Right: 15dBHL
left: 16dBHL

Comments
RIGHT:NORMAL HEARING SENSITIVITY
LEFT:MINIMAL HEARING LOSS (WITH MILD SLOPE AT HIGH FREQUENCIES)

Signature:

Date: 29/08/2022

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