

HASIL 15/10/20 (1A-00W1B)

19



Komp. Taman Negeri Sukajadi Blok J No. 34-6

Telp: (0776) 7372022, 035301931000 Fax: (0776) 7372024

Sudah terima dari : TAUFIK FAISAL

Banyaknya Uang : Tiga juta seratus lima puluh lima ribu rupiah

Untuk Pembayaran : 1. STANDARD CONOCO PHILIPIS

KWITANSI

No. : 07626

Tgl : 14 Oct 2020

Date: 15/10/2020

Jumlah Rp. 3.155.000

Dibayar Oleh,

Dibayar Oleh,

Kasir/01. 10/2020 14 October 2020



KLINIK MEDILAB

PUSAT PEMERIKSAAN KESEHATAN TENAGA KERJA

Komplek Taman Niaga Suka Jadi Blok J No. 3A,5,6 Jl. Ahmad Yani-Batam

Telp. (0778) 7372022, (0778) 7372023, 08117701188, 08117701199

Fax. (0778) 7372024



TANDA TERIMA

19

Telah terima dari : KLINIK MEDILAB

Jenis Barang / Surat / Uang / kwitansi :

HASIL MCU + CD RO

TGL 14 OCTOBER 2020

AN TAUFIK FAISAL

UM

Yang Menerima,

[Signature]

Diketahui oleh,

[Signature]
Rafiq

15/10/2020

Nama : Hermanusman
PT. : BMC
Telp. : 0812. 7096. 7628
Tgl. :

ULTRASONOGRAPHY REPORT

Name	: TAUFIK FAISAL	Date	: 14-10-2020
Age	: 41 Years	Company	:
Sex	: Male	Code	: 19/UM

Ultrasound examination, result :

- Liver : Normal in shape and size, echogenity homogen normal, no mass or cyst lesion in the right and left parenchyma. Intrahepatal bile duct is not dilated. Portal vein normal. CBD is not dilated.
- Gall bladder : Normal in shape and size, with multiple stone; the biggest size is 0,6 cm
- Right Kidney : Normal in shape and size, differentiation between parenchyma and central echo complex normal, no stone or mass.
- Left Kidney : Normal in shape and size, differentiation between parenchyma and central echo complex normal, no stone or mass.
- Spleen : Normal in shape and size, no mass or cyst lesion.
- Pancreas : Shape and size are normal, no hypo hyper echoic lesion.
- Bladder : Normal in shape, no stone or tumor, no thickening wall.
- Prostate : Shape and size normally, homogen echo structure, no hypo/hyper echoic Lesion.

IMPRESSION :

- Multiple Cholelithiasis
- Other intra abdominal organs are within normal limit.



Dr.PAMUNGKAS KELIK K,Sp.Rad
Radiologist.

SIP. No : 1077.III/446-279/SIP.TM/DKK/XII/2016



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PUSAT PEMERIKSAAN KESEHATAN TENAGA KERJA

Komplek Taman Hilaga Sukajadi Blok J No. 3A-6 Jl. Ahmad Yani - Batam 29433
Telp: (0778) 7372022, 7372023, 0811 770 1188, 0811 770 1199. Fax: (0778) 7372024
E-mail: customercare@medilab-clinic.com, Website: www.medilab-clinic.com



EYE EXAMINATION REPORT

IDENTIFICATION OF APPLICANT

Applicant's Name : TAUFIK FAISAL

DOB/Gender/Emp. ID: 25 December 1978 / Male /

Address : BATAM

Company's Name : UMUM



Distant Vision Acuity (Snellen Chart)	Near Vision Acuity
Right Eye: 6/12 Without Glasses Left Eye : 6/12 Without Glasses	Right Eye : J1 Without Glasses Left Eye : J1 Without Glasses
Colour Vision (Ishihara's Test)	Normal
Visual Field Test (Confrontation Test)	-
Grey Test	-
Depth Test	-
DR. REZGA AGNELA VALBETRI	
Examiner's Name	Examiner's Signature
BATAM, 14 October 2020	
Place, Date of eye examination	Official Stamp of Medical Practitioner

PLEKS RUKO TAMAN NIAGA SUKA JADI
ATAM

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: TAUFIK FAISAL, TN
Patient ID: 19 / UM
Height: 161 cm
Weight: 54 kg

DOB: 25.12.1978
Age: 41yrs
Gender: Male
Race: Asian

Study Date: 14.10.2020
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:

--

Medical History:

--

Reason for Exercise Test:

--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	01:04	0.00	0.00	100	127/92	
	STANDING	00:02	0.00	0.00	99		
	HYPERV.	00:01	0.00	0.00	99		
	WARM-UP	00:16	1.60	0.00	111		
EXERCISE	STAGE 1	03:00	2.70	10.00	123	120/80	
	STAGE 2	03:00	4.00	12.00	153	168/97	
	STAGE 3	03:00	5.30	14.00	181	168/97	
	STAGE 4	00:06	6.70	16.00	184		
RECOVERY		01:02	2.40	0.00	157	155/87	

The patient exercised according to the BRUCE for 9:06 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 105 bpm rose to a maximal heart rate of 184 bpm. This value represents 102 % of the maximal, age-predicted heart rate. The resting blood pressure of 127/92 mmHg, rose to a maximum blood pressure of 168/97 mmHg. The exercise test was stopped due to --.

Interpretation

--

Resting ECG : Normal Resting ECG

Conclusions

--

Treadmill Exercise Test :

NEGATIVE ISCHEMIC RESPONSE
NORMAL RESPONSE HEMODYNAMIC
NO ARRHYTHMIA

Physician

Dr. Afdhalun Hekim, SpJP
Sp. Jantung & Pembuluh Darah
(Cardiologist)

Technician

nt ID 19 / UM
 0 2020 Male 161 cm 54 kg
 6-03 41yrs Asian
 Meds:

Test Reason:
 Medical History:

Ref. MD: Ordering MD.
 Technician: Test Type:
 Comment:

BRUCE: Total Exercise Time 09:06
 Max HR: 184 bpm 102% of max predicted 179 bpm HR at rest: 105
 Max BP: 168/97 mmHg BP at rest: 127/92 Max RPP: 30408 mmHg*bpm
 Maximum Workload: 10.00 METS
 Max. ST: -0.05 mV, 0.00 mV/s in III, EXERCISE STAGE 2 05:29

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (l/min)	ST Level (mV)	Comment
RETEST	SUPINE	01:04	0.00	0.00	1.0	100	127/92	12700	0	0.01	
	STANDING	00:02	0.00	0.00	1.0	99			0	0.01	
	HYPERV.	00:01	0.00	0.00	1.0	99			0	0.01	
	WARM-UP	00:16	1.60	0.00	1.1	111			0	0.01	
	STAGE 1	03:00	2.70	10.00	4.6	123	120/80	14760	0	0.00	
EXERCISE	STAGE 2	03:00	4.00	12.00	7.0	153	168/97	25704	0	-0.01	
	STAGE 3	03:00	5.30	14.00	9.8	181	168/97	30408	0	-0.01	
	STAGE 4	00:06	6.70	16.00	10.0	184			0	0.01	
	RECOVERY	01:02	2.40	0.00	2.1	157	155/87	24335	0	0.04	



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HEALTH SCREENING REPORT

Preemployment Physical Examination

86967

CONFIDENTIAL

No. Medical Record :

07853/524/X/UM/20

PERSONAL DATA

Name : TAUFIK FAISAL

Birthday/Gender/Emp. ID : 25 December 1978 / Male /

Father's Name : A R FAISAL

Address : BATAM

Occupation : MASTER

Name of Employer / Recruitment Agency : UNUM

Address of Employer / Recruitment Agency : , BATAM



TAUFIK FAISAL

MEDICAL HISTORY

	Yes	No		Yes	No		Yes	No
1. Hypertension	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Allergic Rhinitis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. Surgery	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Bronchial Asthma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5. Peptic Ulcer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Echolalia	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Bloody Cough	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. Epilepsy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	9. Others	<input type="checkbox"/>	<input checked="" type="checkbox"/>

CLINICAL EXAMINATION

Weight : 54 Kg	Height : 61 Cm	3. Cardiovascular System	Yes/Abnormal	No/Normal
BMI : 145.12		a. Blood Pressure	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Systolic / Diastolic : 118 / 80 mm Hg		
		Pulse : 81 / min		
1. Vision	Yes/Abnormal	No/Normal		
a. Distant Vision	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Heart Disease	<input checked="" type="checkbox"/>
(Should be at least 6/12 in both eyes with or without glasses)			c. Varicose Veins	<input checked="" type="checkbox"/>
b. Near Vision	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Respiratory System	<input checked="" type="checkbox"/>
(Should be at least J2 in both eyes with or without glasses)			5. Skin-Chronic Disease	<input checked="" type="checkbox"/>
c. Colour Vision	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. Abdomen	<input checked="" type="checkbox"/>
d. Any Organic Eye Disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. Locomotor/Neurological	<input checked="" type="checkbox"/>
2. Hearing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Endocrine disorders	<input checked="" type="checkbox"/>
(Unable to hear ordinary conversation at 2 m)			9. Mental State	<input checked="" type="checkbox"/>

LABORATORY TEST

(Report Enclosed)

	Yes/Abnormal	No/Normal
1. Blood Count	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Urine Feme	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Other Laboratory Test	<input checked="" type="checkbox"/>	<input type="checkbox"/>

OTHER TEST

(Report Enclosed)

	Yes/Abnormal	No/Normal
1. Audiometri	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Spirometri	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. ECG (if indicated)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Chest X-Ray	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Remarks: Obese E66, Myopia H52.1 R: 6/12, L: 6/12 MIM, External Hemorrhoid K64.4 <= 0.5cm, Chest X-Ray: Infiltrate on Both Apex Lungs
R91.8, Tonometry (Intraocular Pressure): R: 16 mmHg, L: 17 mmHg, Dental Examination: Dental Caries K02.4, Lab: GGT R74.9
60 U/L MIE, LDL E78.6 33 mg/dl, USG Abdomen: Multiple Cholelithiasis K80

CERTIFICATION

I certify that I have examined the abovenamed person. In my opinion, this person is **FIT WITH NOTE** for duties mentioned above.

ADVICE :

Regular Exercise and Reduce Weight, High Fiber Diet, Consultation to Pulmonologist & Digestive Surgeon, Teeth Hygiene, Take Enough Rest & Consume Curcuma

*NOTE: NO SPIROMETRY EXAMINATION & BREATH ALCOHOL TEST DUE TO COVID-19 PANDEMIC

Authentic Signature

Date of Exam : 14 October 2020

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HEALTH SCREENING REPORT

Preemployment Physical Examination



CONFIDENTIAL

No. Medical Record : 07853/524/X/UM/20

PERSONAL DATA

Name : TAUFIK FAISAL
Birthday/Gender/Emp. ID : 25 December 1978 / Male /
Father's Name : A R FAISAL
Address : BATAM
Occupation : MASTER
Name of Employer / Recruitment Agency : UMUM
Address of Employer / Recruitment Agency : , BATAM

LABORATORY REPORT

BLOOD COUNT

Test Name	Result	Unit	Reference Range		
HGB	15.3	gr/dl	M: 13.2 - 17.3	F: 11.7 - 15.5	
WBC	9.0	10 ³ /mm ³	M: 3.8 - 10.6	F: 3.6 - 11.0	
RBC	5.09	10 ⁶ /mm ³	M: 4.4 - 5.9	F: 3.8 - 5.2	
ESR	5	mm/hr	M: 0 - 10	F: 0 - 20	
HCT	45.4	%	M: 40 - 52	F: 35 - 47	
PLT	362	10 ³ /mm ³	150 - 440		
Differential Count					
- LYM	28.7	%	25 - 40		
- MON	6.8	%	2 - 8		
- GRA	64.5	%	43 - 76		
Indicator of Infection					
- Neutrophil Lymphocyte Ratio (NLR)	2.24	%	> 3.13 Cautious	6 - 9 Suspicious	> 9 Perilous
- Absolute Lymphocyte Count (ALC)	2583	%	< 1500 Cautious	< 1100 Suspicious	< 500 Perilous

URINE FEME

Macroscopy	Result	Microscopy	Result
- pH	6	- WBC/HPF	Occ/HPF
- Specific Gravity	1.010	- RBC/HPF	Nil/HPF
- Glucosia	Negative	- Epithel Cell	Nil
- Protein	Negative	- Crystals	Nil
- Ketones	Negative	- Cast	Nil/HPF
- Bilirubin	Negative		
- Urobilinogen	Normal		
- Nitrit	Negative		
- Blood	Negative		
- Leucocytes	Negative		

X-RAY REPORT

Chest PA:


Chest X-Ray: Infiltrate on Both Apex Lungs R91.8



HEALTH SCREENING REPORT

Preemployment Physical Examination

CONFIDENTIAL

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Occupation : MASTER
Name of Employer / Recruitment Agency : UMUM
Address of Employer / Recruitment Agency : BATAM

86967



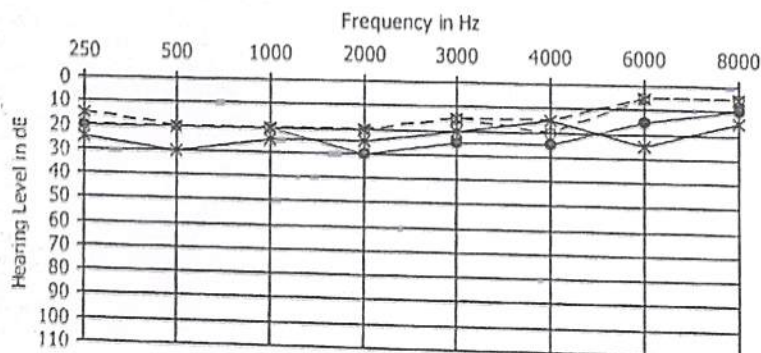
AUDIOMETRY REPORT

Occupational History

Yes No
- Noisy Working Environment ☐ ☒
- Present/use of Hearing Protector ☐ ☒
- Period of Working 0.0 years

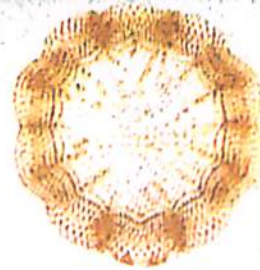
Medical History/Examination

Yes	No	If Yes, which ear	Left	Right
<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>



Conclusion :

- Audiogram : Normal
- Hearing Impairment : Monaural : R : -2.63 %
L : -0.75 %
Hearing Handicap : -2.313 %
- Not a Noise Induced Hearing Loss



HEALTH SCREENING REPORT

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Address of Employer / Recruitment Agency : BATAM

88907



TAUFIK FAISAL

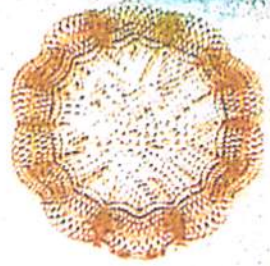
LABORATORY REPORT

Test Name	Result	Unit	Reference Range
LIVER FUNCTION TEST			
Total Bilirubin	:	0.6 mg/dl	0.3 - 1.1
Direct Bilirubin	:	0.1 mg/dl	0.1 - 0.4
Indirect Bilirubin	:	0.5 mg/dl	0.2 - 0.7
Alkaline Phosphatase	:	68 U/L	30 - 120
SGOT	:	20 U/L	M: <= 35 F: <= 31
SGPT	:	23 U/L	M: <= 45 F: <= 34
Gamma GT	:*	60 U/L	M: <= 49 F: <= 32
Total Protein	:	8.3 g/dl	6.6 - 8.3
Albumin	:	5.3 g/dl	3.5 - 5.3
Globulin	:	3.0 g/dl	3.0 - 3.5
LIPID PROFILE TEST			
Total Cholesterol	:	123 mg/dl	<= 200
HDL - Cholesterol	:	83 mg/dl	M: > 35 F: > 45
LDL - Cholesterol	:*	33 mg/dl	50 - 140
Triglycerida	:	35 mg/dl	<= 204
Ratio Cholesterol (Total Chol : HDL)	:	1.5	M: < 3.4 F: < 3.3
BLOOD SUGAR TEST			
Nuchter	:	86 mg/dl	< 100
2 hours PP	:	114 mg/dl	< 140
RENAL FUNCTION TEST			
Ureum	:	22 mg/dl	17 - 43
Creatinine	:	1.0 mg/dl	M: 0.8 - 1.3 F: 0.5 - 0.9
Uric Acid	:	6.9 mg/dl	M: 3.6 - 8.2 F: 2.3 - 6.1
SEROLOGI			
VDRL / RPR	:	Non Reactive	Non Reactive
HBsAg	:	Negative	Negative
Anti HBs	:	Negative	Negative
URINE			
Amphetamine	:	Negative	Negative
Benzodiazepine	:	Negative	Negative
Barbiturate	:	Negative	Negative

Date of Exam : 14 October 2020



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HEALTH SCREENING REPORT

Preemployment Physical Examination

CONFIDENTIAL

No. Medical Record :



07853/524/X/UM/20

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Occupation : MASTER
Name of Employer / Recruitment Agency : UMUM
Address of Employer / Recruitment Agency : , BATAM

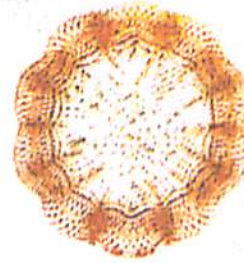
86967



TAUFIK FAISAL

LABORATORY REPORT

Test Name	Result Unit	Reference Range
<u>OTHERS</u>		
Ratio Albumin/Globulin	: 1.8 gd/dl	0.8 - 2.0
USG Abdomen	: * Multiple Cholelithiasis K80	



DENTAL EXAMINATION REPORT

Personal data:

Name : **TAUFIK FAISAL**

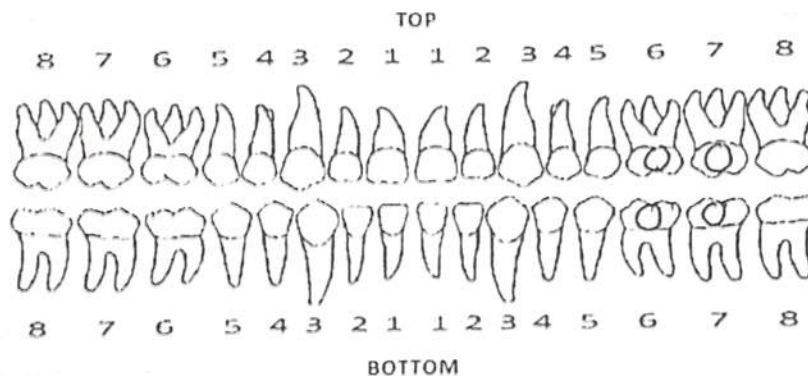
Age/Sex :

Father's Name :

Address :

Occupation :

Name of employer/recruitment agency :



- : Filling
- X : Missing
- O : Caries
- V : Prothesa
- ^ : Root Rest
- / : Impacted

Clinical Note:

Caries = 26, 27
36, 37

Sign by Doctor:

[Signature]

Drg. Ezzume Hita Manika
Dokter Gigi



**KLINIK
MEDILAB**

PUSAT PEMERIKSAAN KESEHATAN TENAGA KERJA

LAPORAN PEMERIKSAAN MATA / EYE EXAMINATION REPORT

Identitas/Identity

Nama/Name : **TAUFIK FAISAL**
Usia/Age :
Jenis Kelamin /Gender :
Pekerjaan/Occupation :
Perusahaan /Company :

Telah dilakukan pemeriksaan status Oftalmologis sebagai berikut:

Ophthalmologist examination status has been done as follows:

1. Visus Jauh/Distant Vision

OD :

OS :

2. Visus Dekat /Near Vision

:dengan/tanpa addisi. With/Without Addition

3. Segmen Anterior/Anterior Segment

OD :

OS :

4. Segmen Posterior/Posterior Segment

OD :

OS :

5. Tes Ishihara/Ishihara Test

:

6. Tonometri/Tonometry

OD :¹⁶..... mmHg

OS :¹⁷..... mmHg

7. Gerak Bola Mata/Ocular Motility

OD :

OS :

Kesimpulan Status Oftalmologis/Conclusion :

Saran/Advice :

Batam **14 OCT 2020**...

dr. Mandiri Nindiasari, SpM, MSc
No. SIP 910/NI/446-874/SIP-TM/DKK/XII/2016

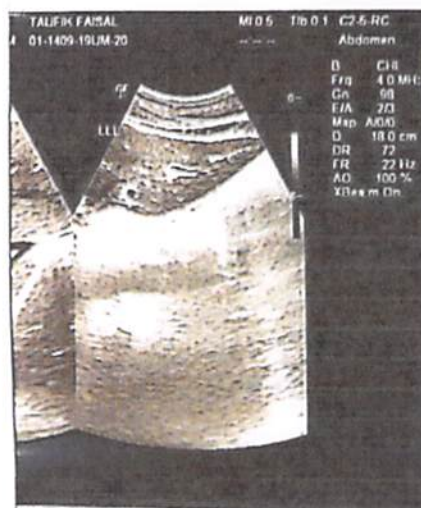
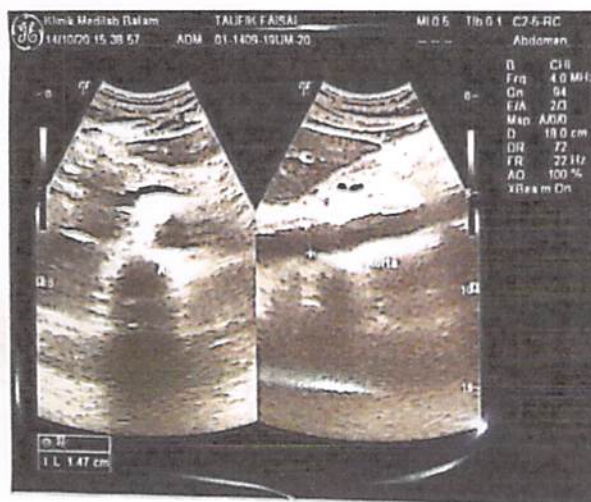
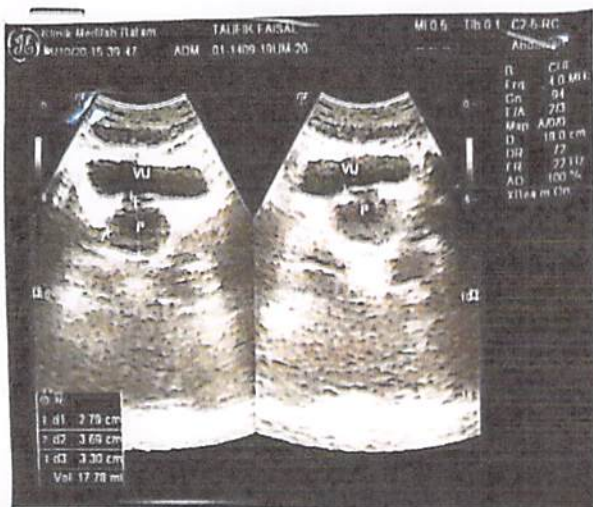
• Tenaga Kerja Perusahaan • Tenaga Kerja Ke Luar Negeri • Pemeriksaan Kesehatan di Tempat Kerja • Pemeriksaan Kesehatan Seafarer • Pemeriksaan Kesehatan Offshore •

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Website : www.medilab-clinic.com

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TREADMILL (EXERCISE STRESS TEST REPORT)

CONFIDENTIAL

No. Medical Record :



07853/524/X/UM/20

86967

PERSONAL DATA

Name : TAUFIK FAISAL
Age/Sex/Employee ID : 41 years / Male /
Father's Name : A R FAISAL
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