	<b>FORM Group</b>  <b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 1 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

## PROTOCOL "C" (BIENNIAL)

### INSTRUMENTAL EXAMINATION

General Medical Examination  
Chest X-ray (\*\*\*\*)  
Resting ECG  
Exercise ECG Stress Test (\*\*\*\*\*)  
Audiogram  
Ophthalmological Exam  
Spirometry  
Alcohol Test (\*\*\*)

### LABORATORY ANALYSIS

Full Blood Count (FBC) with formula  
Blood glucose (glycemia)  
HbA1c  
Blood Urea Nitrogen (BUN)  
Creatinine  
Transaminase (AST/SGOT & ALT/SGPT)  
Gamma Glutamyl Transpeptidase (GGT)  
Bilirubin (Total and Direct)  
Cholesterol (Total, HDL, LDL)  
Triglycerides  
Urine Examination (Physical, Chemical & Microscopic)  
T.P.H.A. (\*)  
Markers Hepatitis A-B(\*\*)  
Marker Hepatitis C  
Tine Test (\*)  
HIV (\*)  
Drug Test (\*\*\*)

#### **Note:**

Unless foreseen by local laws and regulations or specified by the examining physician due to health surveillance limitations /restrictions, the validity of the Health Certificate shall be **two years** from the date of examination.

(\*) To be performed only if specifically required.

(\*\*) To be performed only to the personnel who have never been vaccinated before or if expressly required.

(\*\*\*) Compulsory on Pre-employment Medical Examinations and for Periodical Examination for offshore. Compulsory for employees involved in Safety Sensitive Positions (SSP). For all other employees depends on circumstances, national and international legal requirements.


(\*\*\*\*) **Chest X-ray** is required on the first examination. Afterwards, the examining physician has the discretion whether to perform it or not, based on physical examination, laboratory results, epidemiological situation and local laws and regulation in the country of origin or assignment.

(\*\*\*\*\*) **Exercise ECG Stress Test** following Bruce Protocol Stage III is required for all employees with age of 45 years and above on the date of examination, with international and/or offshore assignment. Local employee may be subject to local laws and regulations.

#### **Attachments:**

Attachment 1 - Instructions for the Examining Physician

Attachment 2 - Medical Fitness Evaluation Guidelines for International and/or Offshore Assignment

	<b>FORM Group</b>  <b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 2 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

## Attachment 1 - INSTRUCTIONS FOR THE EXAMINING PHYSICIAN

The Examining Physician is required to follow the instructions herein defined and to complete each section of the “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E).

### Page 1 of 3 – “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E)

The Examining Physician shall assure that the personal data of the applicant in section 1 is filled in fully and correctly. The Blood Group and the “Rh” factor shall be examined only by the Applicant's first medical examination and the relevant results shall be reported in the successive medical examinations.

The Examining Physician shall make sure that the applicant answers to all queries reported on page N° 1 and that he/she signs at the bottom left corner. On the right side of page N° 1, the Examining Physician shall state his observation to Applicant's answers.

The Examining Physician shall inform the applicant regarding the importance and the implication of correct and accurate declaration of current and past medical history.

### Page 2 of 3 - “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E)

The Examining Physician shall fill in section 3 - Summary of Applicant's Medical History and state his observations/remarks. The Examining Physician shall fill in all the items mentioned under section 4 - Medical Examiners Report” with all the relevant details and state his remarks.

### Page 3 of 3 - “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E)

The applicant shall undergo the examination mentioned in section 5. “Examination Results and Report” and the Examining Physician shall attach all Diagnostic and Laboratory Results and state whether the same are within the normal range or not.

The Examining Physician shall further observe the specific procedures for the following items reported in section 5 of Page 3 of 3 of “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E).

#### Item 1. Chest X-Ray Report

A chest X-ray is required to be performed by everyone on the first Medical Fitness Examination when the local law and regulation allows it.

During a Periodical Medical Fitness Examination, the examining physician has the discretion whether to perform it or not, based on physical examination, laboratory results, epidemiological situation and local laws and regulations in the country of origin or assignment.


For applicants whose discipline is exposed to radiation, such as X-Ray and NDT operations, the Chest X-Ray examination shall be done every five (5) years (please consider also previous employment period(s) with other companies).

#### Item 3. Exercise ECG Stress Test

An Exercise ECG Stress Test following Bruce protocol Stage III is required for all employees with age of 45 years and above on the date of examination, on international and/or offshore assignment. Local employees are subject to local law and regulations. If local laws and regulations are less restrictive or do not exist, relevant Saipem Operating Company shall decide whether to carry out this test for local employees assigned offshore or observe local laws and regulations.

#### Item 5. Spirometry Report

Spirometry is required during the Pre-Employment and Periodical Medical Fitness Examination for every applicant. Applicants with FEV1 >65% of predicted value and FVC >70% of predicted value are likely to have sufficient lung capacity to meet the requirements for medical fitness. Readings below this predicted value may indicate a significant disability. If required, retesting is to be performed to confirm the result. Further investigation has to be carried out when there is significant disability.

	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 3 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

### Item 7. Urine Examination Report

Urine examination includes Physical, Chemical and Microscopy. If Dipstick Urine testing is performed, the details of the results must be submitted.

### Item 8. Drugs, Alcohol screening test Report

The regular Drugs and Alcohol screening shall contain (a minimum) the following tests:

- a) Amphetamine
- b) Benzodiazepine
- c) Cannabinoid
- d) Cocaine
- e) Methamphetamine
- f) Opiates
- g) Significant alcohol level in the blood, breath, or saliva

All employees during the Pre-Employment Medical Examination are subject to alcohol and drugs testing if allowed by local laws and legislation.

All offshore employees, employees on overseas assignment and those considered in "safety sensitive positions" are subject during the Periodical Medical Examination to alcohol and drugs testing if allowed by local laws and legislation. Safety Sensitive Positions (SSP) are those employees with high exposure to a catastrophic operational incident and have a direct role in operations where company personnel's failure could result in serious harm to public or employee well-being, company assets, or the environment. This includes Operation Managers, Construction Supervisors, Construction Scaffolding Leads, Security Advisors, Crane Operators, Marine Advisors, Offshore Transportation Specialists, Commissioning Engineers, Site Safety Advisors, Site Quality Leads and Riggers.

It is company policy that those who fail the drug test in pre-employment and periodical medical examinations are declared temporarily unfit to work. The test can be repeated not earlier than twenty-eight days after the initial test and on the basis of its result, the person can be declared either fit (if negative) or unfit (if again positive). When an applicant is on a prescriptive medication which resulted drug test being positive, this must be clearly mentioned on the test report and on Page 3 of 3 of "Medical Report" Form (FORM\_GR-GROUP-HR-HLT-039-E).

Alcohol testing - up to 0.01% is acceptable because certain mouthwash and vinegars contain a certain amount of alcohol that might be detected.

Applicants who fail the alcohol test in pre-employment and periodical medical examination are declared temporarily unfit to work. The test can be repeated after 48 hours, and the person can be declared either fit (if negative) or unfit (if again positive).


### Item 9. HIV Test

The HIV test shall be done only if required for visa purposes by the country of work.

### Item 10. Tine Test

The Tine Test shall be done when the Applicant is assigned to offshore activities in the North Sea Area and in Gulf Countries. Exceptions to the Tine Test are acceptable only under the following circumstances:

- a) Applicant can prove that he has been vaccinated against tuberculosis.
- b) If the Tine Test was positive (within normal range 5-10mm) during one or previous examination. In this case, the date of a positive test will be reported in the "Medical Report" Form (FORM\_GR-GROUP-HR-HLT-039-E).
- c) If the applicant can prove that he has taken the Tine Test examination within the last six (6) months (also before employment with the Company) and that no sign of tuberculosis was found in the chest x-ray test.

	<b>FORM Group</b>  <b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 4 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

**Item 11: Hepatitis Marker**

The Hepatitis Marker Test for Hepatitis C (HCV Ab) shall be done for all Applicants. The Hepatitis Markers Test for Hepatitis A (HAV Ab - IgG) and for Hepatitis B (HBsAg, HBsAb, HBcAb) shall be done for all Applicants, except in the following circumstances:

- a) Applicant resulted positive on previous Hepatitis Markers Test. In this case, the date of a positive test has to be reported on Page 3 of 3, section 6 - Overall Summary, Assessment and Recommendations in the “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E).
- b) Applicant who has been completely vaccinated against Hepatitis. The date of the last vaccination done has to be reported on Page 3 of 3, section 6 - Overall Summary, Assessment and Recommendations in the “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E).
- c) Applicant who has been exposed to Hepatitis. The year of exposure must be reported on Page 3 of 3, section 6 - Overall Summary, Assessment and Recommendations in the “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E).

**Item 12: TPHA or VDRL**

The syphilis clearance test should be done for every applicant during Pre-Employment & Periodical Medical Fitness examination, if specifically required. Positive ones must be verified if treatment must be initiated before the issuance of the Saipem Medical Fitness Certificate. Details must be briefly written on Page 3 of 3, section 6 -Overall Summary, Assessment and Recommendations” in the “Medical Report” Form (FORM\_GR-GROUP-HR-HLT-039-E) or a report provided.

**Item 13 -14: Additional examination for catering personnel**

The Applicant assigned to catering disciplines related to “Cleaning” and “Kitchen” activities shall undergo, every year, the following additional examinations:

- a) HAVAb (IgG & IgM) – previous vaccinations shall be considered in determining the appropriate result/action.
- b) Stool examination
- c) Pharyngeal plug test

**Overall summary, assessment and recommendations**

The Examining Physician shall write his comments and recommendations and tick the appropriate box concerning the overall assessment of the Applicant whether he is fit (including for Offshore/Onshore/ or both), fit with recommendations and restrictions (including for Offshore/Onshore/ or both) or unfit (including for Offshore/Onshore/ or both). If the Employee is declared to be “Fit to Work”, the Examining Physician shall verify the Applicant’s vaccinations and shall complete the “Medical Fitness Certificate Form”.

Write the date of validity (start and end date) using this format: dd/mm/yyyy.


Use ink rubber stamp. Do not use dry seal.

The maximum validity of the Medical Fitness Certificate shall be two years (24 months), starting from the date on which the medical examination is performed.

A validity period shorter than 24 months shall be accepted based on the following conditions:

- When it is specified by the examining physician due to health surveillance limitations or restrictions.
- When it requires contractually or by the local laws and regulations.
- When it requires by specificity of a professional role or task.

Medical Fitness Examination and/or Vaccination expenses will be reimbursed only if performed by a Hospital/Medical Clinic previously approved by Saipem or specifically indicated by Saipem.

	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 5 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

## Vaccination

The Examining Physician shall monitor and promote vaccinations and/or re-vaccinations as imposed by the country of origin or as recommended by the World Health Organization (see WHO publication) and/or requested by the Company. However, due to the particular work' operation fields, it is recommended to vaccinate the Applicant for the Hepatitis A & B, Tetanus, Typhoid Fever, Influenza and COVID-19; and to report the relevant vaccination's date to the "Medical Report" Form (FORM\_GR-GROUP-HR-HLT-039-E) or vaccination booklet.

If a vaccination is contraindicated for medical reasons, the Examining Physician shall provide the Applicant with a written opinion that the Health Authorities of the Host Country as well as the Company's Medical Department should take into account.

The Saipem vaccination scheme is enumerated on page 6 of this document. However, it has to be underlined that the list of required vaccinations may change in respect of the current epidemiological situation in the area of assignment, worldwide project requirement or other directives.

### **"Medical Fitness Certificate" Form (FORM\_GR-GROUP-HR-HLT-040-E)**

After having completed the "Medical Report" Form (FORM\_GR-GROUP-HR-HLT-039-E) and the Applicant is found "Fit to Work", the Examining Physician shall sign and issue the "Medical Fitness Certificate" Form (FORM\_GR-GROUP-HR-HLT-040-E).

In compliance with GDPR – "General Data Protection Regulation law", confidential health information should not be written on the Medical Fitness Certificate.

## GENERAL INFORMATION

If a result of the "Laboratory Analysis" is not within the normal range connected with the suspect of a medical pathology, the Examining Physician shall investigate only to confirm or exclude such pathology.

Provided that the applicant has been declared "Fit to Work", the original copies of the "Medical Fitness Certificate" Form (FORM\_GR-GROUP-HR-HLT-040-E) and "Medical Report" Form (FORM\_GR-GROUP-HR-HLT-039-E) filled in by the Examining Physician as well as all the "Diagnostic and Laboratory's results" shall be given to:

- the Medical Department at Worksite (through the applicant).
- a copy shall be given to the applicant.
- a copy shall be kept by the Examining Physician, and hard/electronic copies shall be kept for a minimum of 5 years.

Scanned copies of both "Medical Fitness Certificate" Form (FORM\_GR-GROUP-HR-HLT-040-E) and the "Medical Report" Form (FORM\_GR-GROUP-HR-HLT-039-E) together with the results of the Diagnostic and Laboratory results shall be send electronically in confidence to Saipem Overseas Health System department.

**Email Address: [MEDES.Health@saipem.com](mailto:MEDES.Health@saipem.com)**

**Only copy of "Medical Fitness Certificate" Form (FORM\_GR-GROUP-HR-HLT-040-E) shall be given to Agency/Employer.**

For any query related to this medical, please contact Saipem Health Department on the same email address.

## Additional Medical Fitness Examination Requirements for Seafarers

Apart from the Saipem medical fitness examination, Seafarers must simultaneously undertake the medical fitness examination as per the requirements of both, Standards of Training, Certification and Watchkeeping for Seafarers (STCW) Convention, 1978 and the Maritime Labour Convention, 2006. This examination must be done in a clinic or hospital that is duly approved and comply with STCW Guidelines on the Medical Examination of Seafarers. The Saipem "Medical Fitness Certificate" Form (FORM\_GR-GROUP-HR-HLT-040-E) together with Saipem "Medical Fitness Certificate for Seafarers" Form (FORM\_GR-GROUP-HR-HLT-038-E) must be issued and given to the employee, employer, and site health personnel.

This document is the property of Saipem SpA. All rights reserved.



**FORM  
Group**

**FITNESS MEDICAL EXAMINATIONS FOR LOCAL  
AND INTERNATIONAL PERSONNEL**

Doc. no. FORM\_GR-GROUP-HR-HLT-033-E

Rev. 04

Date 07/12/2023

Page 6 of 15

Ref. Doc. CR\_GR-GROUP-HR-HLT-011-E

VACCINATION SCHEME


SAIPEM MED RECOMMENDATION	HEPATITIS A & B, TYPHOID, TETANUS-DIPHTHERIA
▲ OBLIGATORY	YELLOW FEVER
■ RECOMMENDED	MENINGOCOCCUS
● POSSIBLE RISK	POLIO
	RABIES
	JAPANESE ENCEPHALITIS

AFGHANISTAN					
ALBANIA					
ALGERIA					
ANGOLA					
ANTIGUA AND BARBUDA					
ARGENTINA					
ARMENIA					
AUSTRALIA					
AUSTRIA					
AZERBAIJAN					
BAHAMAS					
BAHRAIN					
BANGLADESH					
BARBADOS					
BELARUS					
BELGIUM					
BELIZE					
BENIN					
BERMUDA					
BHUTAN					
BOLIVIA					
BOSNIA & HERZEGOVINA					
BOTSWANA					
BRAZIL					
BRUNEI					
BULGARIA					
BURKINA FASO					
BURUNDI					
CAMBODIA					
CAMEROON					
CANADA					
CAPE VERDE					
CAYMAN ISLANDS					
CENTRAL AFRICAN REPUBLIC					
CHAD					
CHILE					
CHINA					
CHRISTMAS ISLANDS					
COLOMBIA					
COMOROS					
CONGO					
COOK ISLANDS					
COSTA RICA					
COTE D'IVOIRE					
CROATIA					
CUBA					
CYPRUS					
CZECH REPUBLIC					
DENMARK					
DOMINICA					
DOMINICAN REPUBLIC					
ECUADOR					
EGYPT					
EL SALVADOR					
EQUATORIAL GUINEA					
ERITREA					
ESTONIA					
ETHIOPIA					
FALKLAND ISLANDS					
FAROE ISLANDS					
FUJI					
FINLAND					
FRANCE					

FRENCH GUIANA					
FRENCH POLYNESIA					
GABON					
GAMBIA					
GEORGIA					
GERMANY					
GHANA					
GIBRALTAR					
GIBUTI					
GREECE					
GREENLAND					
GRENADA					
GUADELOUPE					
GUAM					
GUATEMALA					
GUINEA					
GUINEA-BISSAU					
GUYANA					
HAITI					
HONDURAS					
HONG KONG					
HUNGARY					
ICELAND					
INDIA					
INDONESIA					
IRAN ISLAMIC REPUBLIC OF					
IRAQ					
IRELAND					
ISRAEL					
ITALY					
JAMAICA					
JAPAN					
JORDAN					
KAZAKHSTAN					
KENYA					
KIRIBATI					
KOREA					
KUWAIT					
KYRGHYZSTAN					
LAOS					
LATVIA					
LEBANON					
LESOTHO					
LIBERIA					
LIBYAN ARAB JAMAHIRIYA					
LIECHTENSTEIN					
LITHUANIA					
LUXEMBOURG					
MADAGASCAR					
MALAWI					
MALAYSIA					
MALDIVES					
MALI					
MALTA					
MARTINIQUE					
MAURITANIA					
MAURITIUS					
MAZEDONIA					
MEXICO					
MOLDAVIA					
MONACO					
MONGOLIA					
MONTSERRAT					
MOROCCO					
MOZAMBIQUE					
MYANMAR (former BURMA)					
NAMIBIA					
NAURU					
NEPAL					
NETHERLANDS					
NETHERLANDS ANTILLES					

NEW CALEDONIA					
NEW ZEALAND					
NICARAGUA					
NIGER					
NIGERIA					
NILE					
NORWAY					
OMAN					
PAKISTAN					
PANAMA					
PAPUA NEW GUINEA					
PARAGUAY					
PERU					
PHILIPPINES					
PITCAIRN					
POLAND					
PORTUGAL					
PUERTO RICO					
QATAR					
REUNION					
ROMANIA					
RUSSIAN FEDERATION					
RWANDA					
SAINT KITTS & NEVIS					
SAINT LUCIA					
SANTO ANDRÉA THE GRENADINES					
SALOMONE ISLANDS					
AMERICAN SAMOA					
SANT'ELENA					
SAO TOME AND PRINCIPE					
SAUDI ARABIA					
SERBIA & MONTENEGRO					
SENEGAL					
SEYCHELLES					
SIERRA LEONE					
SINGAPORE					
SLOVENIA					
SLOVAKIA					
SOMALIA					
SOUTH AFRICA					
SPAIN					
SRI LANKA					
SUDAN					
SURINAME					
SWAZILAND					
SWEDEN					
SWITZERLAND					
SYRIA					
TAJIKISTAN					
TANZANIA					
THAILAND					
TOGO					
TRINIDAD & TOBAGO					
TUNISIA					
TURKEY					
TURKMENISTAN					
TUVALU					
UGANDA					
UKRAINE					
UNITED ARAB EMIRATES					
UNITED KINGDOM					
UNITED STATES OF AMERICA					
URUGUAY					
UZBEKISTAN					
VANUATU					
VENEZUELA					
VERGIN ISLANDS					
VIETNAM					
YEMEN					
ZAMBIA					
ZIMBABWE					



	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 7 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

## **Attachment 2 - MEDICAL FITNESS EVALUATION GUIDELINES FOR INTERNATIONAL AND/OR OFFSHORE ASSIGNMENT**

### **Introduction**

All employees regardless their professional role and future activity shall undergo medical examinations before being employed at one of Saipem Group Companies. These medical examinations are required to assess the general health status and the eventual limitations of those concerned, who due to their current condition(s), are at risk for worsening their health status and welfare, if subjected to particular operating or climatic conditions.

Thereafter, the employees' health status shall be constantly monitored through scheduled medical examinations, according to the specific health risks of their worksite and their professional role and duties.

In some cases, the specific health risk taken into consideration is simply related to the employees' stay in countries having a high endemic risk of infectious and transmissible illnesses, to the extreme temperatures in the area of assignment or limited access to healthcare facilities.

This guideline is applicable for all internationally assigned Saipem employees. Local employees are subject to local law and regulations. However, if local laws and regulations are less restrictive or do not exist, relevant Saipem Operating Company shall decide whether to apply this guideline or observed local laws and regulations.

The medical examination will be performed by the entitled healthcare providers or by health centers in charge of Occupational Health activities, in compliance with health and safety laws enforced by respective country. The examinations to be performed in different circumstances shall follow different specific protocols.

Following the examinations, the person who has been responsible for their execution shall issue a medical fitness certificate (MFC), whose validity is directly connected to the applied protocol. The management of fitness medical examinations' reports and certificates must be in compliance with national and international laws concerning privacy and sensitive data and with doctors/nurses' deontological code. Reports' content can be known and managed only by Health and Medical Function.

No matter each and every case has to be evaluated individually by the examining doctor and eventually in consultation with the relevant Business Line Health Manager; the bases of judging medical fitness for an overseas assignment, particularly those working offshore shall be the document of Oil and Gas UK; "Medical Aspects of Fitness for Work Offshore: Guidance for Examining Physicians". This rule applies also to sub-contractor's employees.


These guidelines are not the overall set of strict rules and do not cover all the pathologies that may be encountered. This can be used for decision making in respect of the local risk assessment and the peculiarities of each individual case.

**In case of any doubt or when indicated, please contact Saipem Health Department  
email address: [MEDES.Health@saipem.com](mailto:MEDES.Health@saipem.com)**

### **Guidelines on Specific Conditions which may affect Medical Fitness of employees in Overseas and/or Offshore Assignment.**

#### **1. Age**

Within reason, age should not be a barrier to fitness for work but must be carefully taken into account with all other findings in the medical fitness examination, the job role and the site location. The minimum acceptable age for Saipem employment is 18 years. There is no maximum age to be considered fit to work if the clinical parameters are within the normal range. The age limitation and its applicability may vary from country to

	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 8 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

country, depending upon local or international law and regulations (destination with Malaria risks or Yellow Fever Vaccination requirements).

## 2. Weight and Obesity

All cases of gross obesity require individual assessment. Those whose exercise tolerance, mobility, general health, or personal hygiene are adversely affected or whose obesity is likely to impair safe performance are unacceptable.

The Body Mass Index is a simple calculation dividing the body weight (in kilograms) by the square of the height (in meters) i.e.  $BMI = Wt (kg) / Ht^2 (m)$ . This de-emphasizes the effect of stature on body weight and correlates closely with adiposity. Sub scapular and triceps skin fold thickness measurements, using skin fold calliper, also provide an accurate and simple guide.

Individual decisions regarding fitness for offshore work in the overweight should be made on a case-by-case assessment.

As a guide:

BMI 25-30: fit for offshore work, counselling on weight management is advised.

BMI 31-35: consider other risk factors, mobility, and general health. Usually fit for offshore work. Consider restricted period of certification if appropriate.

BMI 36-40: consider other risk factors, mobility, and general health. May be unfit for offshore work if there are doubts about ability to self-rescue or complete other aspects of offshore life. Restricted period of certification not exceeding one year if considered fit.

BMI >40 for safety reasons (e.g. space in the helicopter or rescue boat, narrow or steep, evacuation routs) individual, despite other medical results within the acceptable limits, particularly of offshore assignment, should be declared temporarily unfit. Waist circumference over 115 cm is to be regarded as safety challenge too.

## 3. Infectious Diseases

Active infectious diseases are unacceptable. Catering staff requires special examination to exclude acute or chronic diseases involving gastrointestinal tract, chest, ear, nose, throat, and skin.

## 4. Malignant Neoplasm

Malignant diseases are generally unacceptable for overseas assignment. However, each case should be individually evaluated, and the natural history and prognosis of the neoplasm should be considered. The progress and likelihood of complications of the disease or its treatment must be carefully evaluated.

## 5. Diseases of Digestive System


Dental caries, abscess or severe gum diseases are unacceptable. Dentures or other orthodontic appliances should be well fitting and functional.

Withhold certification and refer to a dentist if dental fitness is unsure or in doubt.

History of digestive disorders causing severe or recurrent symptoms requiring special diet or medication (e.g. esophagitis, gastritis, cholelithiasis, inflammatory or parasitic bowel disease) is unacceptable until satisfactorily treated and reassessed. Acute gastric erosion is unacceptable. The case can be reconsidered after healing, demonstrated by endoscopies and without symptoms.

Proven active peptic ulcer is unacceptable. In case of past history of peptic ulcer, a person may be acceptable provided that the examining physician is satisfied that the risk of complications is reduced to an absolute minimum by successful surgery or by the use of appropriate medication.



	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 9 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

Diaphragmatic hernia is unacceptable only if disabling symptoms are present. Hernia (external abdominal) is unacceptable until surgically assessed and, if necessary, repaired.

Haemorrhoids, fistulae, and fissures causing intractable pain, or recurrent bleeding, are unacceptable, unless treated. Abscesses and fistulae are unacceptable.

A person with uncomplicated stoma is usually acceptable, but the Examining Physician should be satisfied by the compatibility of overseas assignment, life and work with the underlying cause, and with the patient's personal management of the condition that must be acceptable within the confines of a closed country of assignment community. Inflammatory bowel diseases (ulcerative colitis and Crohn) are unacceptable.

## 6. Diseases of Liver and Pancreas

Chronic or recurring pancreatitis is unacceptable.

Diseases of the liver are unacceptable where the condition is serious or progressive and/or where complications, such as oesophageal varices or ascites are present. This includes chronic active Hepatitis B.

Asymptomatic Hepatitis B and C individuals may be acceptable except for the countries where hepatitis B and C negativity is one of the residence permit's requirements.

## 7. Cardiovascular System

The cardiovascular system should be free from acute or unsatisfactorily controlled chronic disease. It should be recognized that an impaired cardiovascular function might predispose to heat related disorders.

### 7.1 Asymptomatic individuals with age over 45 years

Any individual:

- with age 45 years and above on the day of examination,
- assigned internationally and/or offshore.
- free of any cardiac symptoms and with no history or suspicion of Ischemic Heart Disease,

is considered fit if he/she completes satisfactorily Stage III of Bruce Protocol of Exercise ECG Stress Test or its equivalent without cardiac symptoms or sign of ischaemia.

Any individual, asymptomatic or not, who fails the previous mentioned test, or its equivalent, is considered temporary unfit for offshore and/or international assignment. Thereafter, the medical fitness review of such cases will be managed individually by examining physician, following recommendations of Saipem medical adviser, if required.


Any individual with cardiac symptoms and/or medical history highly suggestive of Ischemic Heart Disease will be assessed according to criteria mentioned in relevant section.

Symptoms or medical history highly suggestive of Ischemic Heart Disease include but are not limited to: chest pain, dyspnoea, dizziness and faintness deemed as cardiac in origin, syncope, clear signs of heart failure, abnormal resting ECG with suggestive signs of cardiac ischemia, current or past, (e.g. inverted T in more than one lead or pathological Q waves, Left Bundle Branch Block, certain arrhythmias, or AV blocks higher than 1st degree), current or past treatment suggestive for angina (e.g. nitrates) or for secondary prevention of myocardial infarction.

Interpretation and assessment of above symptoms and/or signs will be performed only case by case by examining physician, who, in case of doubt, should contact for further advice Saipem medical adviser.

### 7.2 Congenital Heart Diseases

If there are no symptoms or no hemodynamic significant changes, they are acceptable.

	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 10 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

### 7.3 Valvular Heart Diseases

If there is a significant hemodynamic change or an anticoagulant therapy is required, maybe unacceptable (refer to paragraph 22 for details).

An individual who has undergone successful cardiac surgery for valvular or congenital heart disease, it may be acceptable if free from all symptoms and from all therapies otherwise cardiac review is needed. Individuals in this group may require more frequent assessment.

### 7.4 Ischemic Heart Disease

#### 7.4.1 Angina and Myocardial Infarction

Any individual with clear or highly suggestive history of angina or myocardial infarction, is considered fit if:

- Is free of cardiac symptoms for at least 3 months; this condition is applicable only for offshore or remote area assignment, and,
- Provide a satisfactory report from treating physician, and,
- Complete satisfactorily Stage 3 of Bruce Protocol of Exercise ECG Stress Test or equivalent without cardiac symptoms or sign of ischemia.

#### 7.4.2 Angioplasty and Coronary Artery Bypass Graft (CABG)

Any individual who underwent Angioplasty or CABG is considered fit if:

- Is free of cardiac symptoms for at least 3 months for Angioplasty and 6 months for CABG; this condition is applicable only for offshore or remote area assignment, and,
- Underwent a thorough cardiologic examination and provide as a result a satisfactory report from cardiologist, and,
- Complete satisfactory Stage 3 of Bruce Protocol of Exercise ECG Stress Test or equivalent without cardiac symptoms or sign of ischaemia.

For all individuals diagnosed with Ischaemic Heart Disorder, the initial certificate will be restricted to one year. A new assessment must be performed on each periodical medical examination, following all previously mentioned criteria. Based on its result, if satisfactory, the examining physician, may extend the certificate to two years.

All individuals diagnosed with Ischaemic Heart Disorder and clinically suspected of complications or cardiac dysfunction must demonstrate a left ventricular ejection fraction of at least 40%.

Individuals who cannot undergo Exercise ECG Stress Test due to a relative contraindication (e.g. Left Bundle Branch Block, or on treatment with digoxin) could be assessed through an equivalent test. Examining physician will decide further management of such cases only following recommendations of relevant Saipem medical adviser.

### 7.5 Cardiac transplant


An individual with cardiac transplants is unacceptable.

### 7.6 Cardiac Arrhythmia's

If these produce symptoms or associated with hemodynamic abnormality, an expert cardiac opinion is mandatory. Arrhythmia requiring anticoagulant therapy may be unacceptable (refer to paragraph 22 for details).

### 7.7 Cardiomyopathy

An individual with any cardiomyopathy is unacceptable.

	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 11 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

## 7.8 Cardiac Enlargement

Fitness will depend on the underlying cause.

## 7.9 Pacemakers

The subject of pacemakers is highly specialized and acceptability to work abroad must include assessment of the:

- Job role of the individual
- Underlying condition and indication for insertion
- Type of pacemaker
- Effect of the local environment on the unit
- Risk of physical damage to the unit.

Persons with an implantable cardioverter defibrillator (ICD) are medically unfit.

## 7.10 Other Abnormal ECG findings such as Pre-Excitation and Brugada Syndrome

Cardiologist evaluation is necessary. If without symptoms and no additional major cardiovascular risk present, it is acceptable.

## 8. Hypertension

As a general rule, hypertension is acceptable provided it is uncomplicated (i.e. no evidence of end-organ damage) and is well controlled by treatment. As with other cardiovascular disorders, the presence of hypertension may predispose to heart disorders.

Hypertension is a chronic medical condition in which the blood pressure in the arteries is elevated. Usually, this level is about 140/90 mm Hg.

In general, we can assume these rules:

- 220/120 – Unfit for offshore work, refer for immediate treatment.
- 200/110 – 219/119 – decline certificate and refer to GP for investigation and treatment. Full certificate may be issued once stabilized on any required medication.
- < 200/110 but > 130/85 – issue certificate but refer to GP for investigation and lifestyle counselling.
- < 130/85 – optimal BP. Fit.

## 9. Peripheral Circulation

The following conditions are unacceptable:

- Current or recent history of thrombophlebitis or deep vein thrombosis, with or without embolization.
- Varicose veins associated with varicose eczema, ulcers, or other complications.
- Atherosclerotic or other vascular diseases with evidence of circulatory embarrassment, for example intermittent claudication, or aneurysm.


Any circulatory disorder requiring anticoagulant therapy unacceptable (refer to paragraph 22 for details).

## 10. Pulmonary Circulation

A history of more than one pulmonary embolism is unacceptable. A single episode requires careful assessment.

## 11. Cerebrovascular Disorders

Any cerebrovascular accident including history of transient ischemic attack or evidence of general cerebral arteriosclerosis, including dementia, is unacceptable.

	<b>FORM Group</b>  <b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 12 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

## 12. Diseases of Blood or Blood Forming Organs

There should not be any significant disease of the haemopoietic system. The following are unacceptable for working overseas:

- Anaemias until investigated and successfully resolved.
- Leukaemia, polycythaemia and disorders of the reticule-endothelial system unless in long term remission.
- Haemorrhagic disorders.
- Any other disease of blood or blood forming organs which may adversely affect individual performance or safety.
- Immunosuppressant.
- Sickle cell disease and other haemoglobinopathies associated with symptoms.
- Splenectomy is generally unacceptable. Each case can be assessed individually.

## 13. Mental Disorders

Care is necessary when assessing an individual during remission from one or more episodes of mental illness. An established medical history or clinical indication of any of the following is usually unacceptable for working and living overseas:

- Personality disorder characterized by anti-social behaviour - Psychosis
- Phobia
- Chronic anxiety state and recurrent depression
- Alcohol abuse
- Drug abuse

If an individual should result positive on a drug test, it should be declared temporarily unfit to work and the test should be repeated after not less than 28 days. If negative it may be considered fit to work and put under frequent observations. If positive again it is considered unfit. Exception is related to declared prescription drugs, prescribed by a specialist.

Alcohol testing - Up to 0.01% is acceptable because certain mouthwash, vinegars contain a certain amount of alcohol that might be detected. If an individual should result positive, whereby the result is above 0.01% on an alcohol test, it should be declared temporarily unfit to work and the test should be repeated after not less than 48 hours. If negative it may be considered fit to work and put under frequent observations. If positive again it is considered unfit.


## 14. Diseases of the Nervous System and Sense Organs

Nervous diseases causing or likely to cause any significant defect of intellect, muscular power, balance, mobility, vision, sensation or co-ordination is unacceptable.

Those with history of epilepsy but who are able to meet the following criteria may be acceptable.

- a. Individual whose job role is such that sudden impairment of consciousness may adversely affect the safety of, or result in serious injury to or death of, either themselves or other (such as crane operators, rope access personnel, rigger, scaffolders, and drill crew) must have been seizure-free for the last 10 years without taking anti-convulsant medication during that period or have an assessed risk of further seizures of less than 2%.
- b. All other individual aside from the job role specified above (a) must be seizure-free for a minimum of 6 months, whether taking medication or not. Individual who stop medication must demonstrate a seizure-free period of 6 months before returning to work. If taking medication, must free from significant side effects and demonstrate from specialist report that they have no indications of sub therapeutic levels on clinical monitoring, nor any indication of poor compliance with treatment.

Any other convulsive disorder, disturbance of consciousness or neurological condition likely to render the individual unable to perform duties safely is unacceptable. This category includes epileptiform seizure following episodic drinking, tranquillizer withdrawal or stroboscopically induced (for example the flicker of helicopter blades).

	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 13 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

Established history of forms of migraine that would not interfere with the individual's ability to work efficiently and safely are acceptable.

## 15. Musculoskeletal System

There should be no deformity or amputation of body or limb that significantly reduces mobility, interferes with performance of duties, or prevents compliance with emergency procedures. Limb prosthesis may be acceptable providing the above criteria can be met, particularly for the offshore assignments.

Acute, chronic, or recurrent diseases of peripheral nerves, muscles, bones, or joints including the spine that significantly affect mobility, balance, coordination, or ability to perform normal duties or perform emergency procedures is unacceptable.

## 16. Skin

The skin must be healthy, without evidence of clinical disease.

Clinical evidence of any recurrent, physically, or socially disabling skin disease or sensitivity is unacceptable.

Any skin condition likely to be aggravated or triggered by the working environment is unacceptable.

## 17. Endocrine and Metabolic Disorders

Adequately controlled thyroid disease may be acceptable, but all cases require careful assessment.

Uncomplicated, stable diabetes mellitus treated by diet alone or with oral hypoglycemics medication and satisfactorily controlled may be acceptable but will require more frequent assessment. Levels of glycosylated hemoglobin (HbA1c) in evaluating such cases is a must.

Diabetes Mellitus treated with insulin is acceptable if:

- Six months history of good control
- Report from diabetologist
- Annual review

Each case assessed individually.

Individual suffering from other endocrine disorders such as Addison's disease, Cushing's syndrome, acromegaly, diabetes insipidus and hypoglycemia, either functional or due to pancreatic or adrenal pathology are unlikely to be acceptable for overseas work but should be individually considered and carefully assessed.

Well-controlled gout may be acceptable.

## 18. Genitourinary System

The presence of kidney, ureteric or bladder calculi is generally unacceptable. Recurrent renal colic without demonstrable calculi requires careful assessment. Successful treatment by surgery or lithotripsy may be acceptable.

Recurring urinary infections are unacceptable until investigated and treated.


Any kidney disease which could lead to acute renal failure (i.e. nephritis, nephrosis) is unacceptable. Polycystic disease, hydronephrosis or unilateral nephrectomy with disease in the remaining kidney is unacceptable unless otherwise indicated by a Nephrologist.

Renal transplant is unacceptable.

Enuresis or incontinence, recent or active is unacceptable.

Prostatitis is unacceptable. Prostate hypertrophy or urethral stricture interfering with adequate bladder evacuation is unacceptable.

Gynaecological disorders, such as menorrhagia, disabling dysmenorrhea, pelvic inflammatory disease or prolapses are unacceptable.

	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 14 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

Hydroceles or painful conditions of the testicles require careful assessment.

Sexually Transmitted Diseases are unacceptable. Herpes need not prohibit an individual from employment but should be assessed on a case-by-case basis. Such employees should receive regular surveillance. Persistent Glandular Lympho-adenopathy and active AIDS related diseases are unacceptable.

## 19. Respiratory System

A history of spontaneous pneumothorax is generally unacceptable except for a single episode without recurrence for one year or after a successful surgical procedure.

Obstructive airways diseases such as chronic bronchitis, emphysema, and any other pulmonary disease-causing significant disability or recurring illness such as bronchiectasis is unacceptable.

Standard spirometry readings of FVC below 70%, and FEV below 65% of below normal predicted value would indicate a significant disability.

Restrictive or fibrotic pulmonary disease resulting in significant symptoms or disability is unacceptable.

Active pulmonary tuberculosis is unacceptable until required treatment is completed, and the attending physician has certified that the patient is no longer infectious.

A history of asthma requiring frequent or recurrent medication including oral steroids requires careful assessment but is usually unacceptable. A history of asthma having resolved in adolescence is acceptable.

## 20. Ear, Nose and Throat

### 20.1 Ear

Active external otitis (acute or chronic) requires treatment.

Disorders of the tympanic membrane (e.g. dry perforations and grommets) or of the middle ear require further assessment. Chronic middle ear disease is unacceptable until completely treated.

Intractable inner ear disorders with severe motion sickness, vertigo, etc. (e.g. Meniere's disease) are unacceptable.

A functional hearing loss sufficient to interfere with communications or to impede safety (e.g. inability to hear audible warning devices) is unacceptable. Intrinsicly safe hearing aids may be worn but the examinee should not be dependent on such an aid to hear a safety warning. Increasing noise induced hearing loss may be a reason for medical unfitness. All personnel who may be exposed to high levels of noise must have audiometry performed both at initial assessment and as directed thereafter by the Examining Physician. If the measured loss in the better ear is greater than 35dBA for lower frequencies, or 60dBA for higher frequencies, then special assessment of the individual is advised. It is also a requirement that normal speech is to be perceived at a distance of 2 meters.

### 20.2 Nose

Significant chronic nasal airway obstruction is unacceptable.

Chronic sinus infection or frequently recurring sinusitis are generally unacceptable.


### 20.3 Throat

Chronic Tonsillitis or frequently recurring tonsillitis require careful assessment but are generally unacceptable.

## 21 Eyes

Any eye disease or visual defect rendering (or likely to render) the applicant incapable of carrying out his/her duties efficiently and safely is unacceptable. A history of conditions such as glaucoma or uveitis requires specialized assessment.



	<p style="text-align: center;"><b>FORM Group</b></p> <p style="text-align: center;"><b>FITNESS MEDICAL EXAMINATIONS FOR LOCAL AND INTERNATIONAL PERSONNEL</b></p>	Doc. no. FORM_GR-GROUP-HR-HLT-033-E	
		Rev. 04	Date 07/12/2023
		Page 15 of 15	
		Ref. Doc. CR_GR-GROUP-HR-HLT-011-E	

Corrected visual acuity must be at least 6/12 (20/40 US equivalent) in the better eye.

A monocular individual is acceptable provided the job role can be performed efficiently and safely. Recent onset of monocular vision is unacceptable (i.e. within six months of onset).

Color vision should be adequate for the particular job role to be undertaken.

## 22 Medicines

Individuals being treated with certain medicines require careful consideration.

Individuals on cytotoxic agents, insulin, anticonvulsants, immunosuppressant, systemic steroid therapy, are unacceptable. Short steroid courses may be acceptable for conditions such as asthma and sinusitis.

Individuals on psychotropic medications (e.g. tranquillizers, antidepressants, narcotics, and hypnotics) are unacceptable. A previous history of such treatment will also require further consideration.

If an individual is taking Anticoagulant (Warfarin) and the underlying condition does not preclude them from work, then the following considerations should be taken into account when deciding whether an individual is fit for work:

1. The nature of work must present a low risk of acute injury.
2. The INR must have been stable for a minimum of 1 month.
3. The dose of warfarin must have been stable for a minimum of 1 month.
4. The operating company medical advisor may wish to consider the need for use of a near patient test system where there is any doubt over the stability of the individual's long-term control.
5. The site doctor must be aware of the medication and competent in the management of a warfarin induced bleeding emergency.
6. The site doctor must have a supply of intravenous vitamin K1 on site.

Individuals with prescribed medication must report to the site medical personnel. Individuals must carry and ensure adequate quantity of prescribed medicines necessary during his current work cycle at site. A change in dosage should also be reported. Previous adverse drug reaction must be brought to the attention of the site medical personnel as well.

## 23 Pregnancy

Pregnancy is a physiological and not a pathological occurrence, but a safe pregnancy still necessitates close medical supervision through proper antenatal care. The primary cause for concern is the risk of complications that might require specialized care and hospitalization. Also, cardiovascular changes and exercise limitation increase the risks of heat related disorders which pose a threat to both mother and foetus. Furthermore, should a pregnant woman require emergency treatment, there are additional risks associated with blood transmitted infection. For these reasons, it is company policy that employees or dependents that are or become pregnant should return to their home country at the earliest convenient opportunity.