



Initial Progress Notes :

Patient admitted to SSU on 11/12/2019 under blunt trauma protocol.

Seen on admission

Noted pt was a motorcyclist who was involved in a RTA:

rear ended a taxi with his left side striking the boot/rear bumper area

subsequently fell on his right side and skidded, eventually ending up with his head stuck directly underneath the exhaust pipe

pt was wearing helmet and when bystanders lifted the rear end of the cab, they took off the helmet which he noted was still intact

pt did not suffer any HI nor did he had any LOC

denies neck pain

no chest or abdo pain

no SOB

no nausea/vomiting

with left hip and left thigh pain

was initially having severe difficulty moving the left LL d/t the pain

no LL numbness or weakness

currently, pain is better

O/E:

conscious, coherent, per trolley, speaks in full

no cephalhematoma

PEARL

no midline CTLS tenderness

no raccoonning, no battle sign

-ve chest compression

lungs clear

abdo soft nontender

-ve hip compression

left hip and left knee movement - (passive and active) limited

-noted abrasion with contusion hematoma over the anterolateral aspect of the mid to distal third of the left thigh

left ankle ROM good

right LL and both UL NAD

xrays - chest, pelvis, hip, left knee, left femur and LS xray - no obvious fracture or dislocation

noted bloods: CK 341, ALT 102, AST 54

plan:

repeat bloods cm

analgesics

hydrate (oral)

observe for progression of hyperemia/contusion of the left thigh



A&E IV / IM Procedures

Time Prescribed	Order Name	Duration	Frequency	Dosage	Status	Performed By	Prescribed By
11-Dec-2019 19:36	Tramadol HCl Injection		Once	50 mg	Performed	Doctor Muhamad Syamil Bin Rosli (19:44)	Doctor Muhamad Syamil Bin Rosli
11-Dec-2019 19:36	MetoCLOPramide HCl Injection		Once	10 mg	Performed	Doctor Muhamad Syamil Bin Rosli (19:44)	Doctor Muhamad Syamil Bin Rosli
11-Dec-2019 20:16	Ketorolac Trometamol Injection		Once	30 mg	Performed	Doctor Muhamad Syamil Bin Rosli (20:24)	Doctor Muhamad Syamil Bin Rosli

Disposition

Disposition : Referred to Polyclinic Disposition By : Doctor Arshad Iqbal
Disposition Date/Time : 12-Dec-2019 11:25:45 Condition on Disposition : Good

Clinical Summary

Summary : Noted the CK 341-930
Repeat CK in polyclinic
Drink lots of water
Spoke to on call ortho Dr Ang Ke Xin MagneLine
Advised to see the patient in ortho clinic in 4 weeks for the left thigh contusion
Gastro TCU for LFTs

eReferral

Date and Time First Seen
Date: 14-Dec-2019 Time First Seen: 11:33

To
Department: Accident & Emergency (A&E)
Institution: Vishnu Health (KTPH/ADMC)

Urgency: Immediate

Patient Details

Name: MAHAADHIR BIN AHMAD
URN/RLC: 5960040E
Date of Birth: 03/01/1996 23Y 11M
Gender: Male
Address: BLK 662 VISHNU AVENUE 4 #03-235 SG 760662
Phone Number: 84849937

Purpose of Referral

Diagnosis / Problem List

Type	Visit	PD	PL	Year of	Status	Remarks	Care	Care	Recorded	Recorded	By	Outcome
Diagnosis	Diagnosis			Diagnosis			Issues	Plan	Date			
SNOMED-CT	INJURY 25540				A							
	70018											

Referral / Memo Note

Please review this young man, involved in RTA, with increasing trend to CK with current level >3000 U for IV hydration and further management

Thank you

Referral Details

Drug and Non-Drug Allergy/Adverse Reactions

No drug allergy records found.

Medical Alerts

No medical alert records found.

Chief Complaint/History of Present Illness

comes for repeat bbs in view of the elevated CK and ALT/AST from the RTA noted later as marked incr in the CK since the A&E visit at CGH 3150 U/L from 930 on thursday morning

sgys has been improving with the pain in the left thigh able to flex the knee and weight bear more than before

Past Medical History

Patient Existing Diagnosis (As of 14-Dec-2019 11:34)

Type	Description	Year of	Diagnosis	Remarks	Updated By
Diagnosis		Diagnosis			

SNOMED-CT ARTHROPATHY 1778721018 NHGP
SNOMED-CT DISORDER OF SKIN AND/OR SUBCUTANEOUS CT NHGP
ICD9CM ARTHROPATHY 71690 NHGP
SNOMED-CT GASTRITIS 7841019 NHGP

Physical Examination

left lateral thigh tenderness with soft tissue swelling noted
jux hip and knee - NAD normla ROM



2 Yishun Ave 9 Singapore 768998
Tel: 6355 3000

MAHADHIR BIN AHMAD
POLYCLINICS
59600040E, 23Y 117A, Male

REFERRAL

Referral Reply

Name: MAHADHIR BIN AHMAD

NRIC: 59600040E

Preliminary Diagnosis & Management

Patient Admitted? Yes/No

Name & Signature of Doctor: Date & Clinic Stamp

General Lab Result

Patient Name:	MAHADHIR BIN AHMAD		
Patient MRN:	S9600040E	Location:	Yishun Polyclinic
Gender:	Male	Test Date:	21 Dec 2019 08:46 AM
Date of Birth:	03/01/1996	Ordering Doctor:	MAHAVIJIYAN ARVIN (17105J)
Accession No.:	9125734176		

Test	Results	Unit	Reference Interval
Sodium Potassium			
Sodium	139	N mmol/L	135 - 145
Potassium	4.6	N mmol/L	3.5 - 5.1
Signed by : RAJAGOPAL RAMASWAMI (14496G) on 21-Dec-2019 12:36			
Creatinine	99	N umol/L	67 - 112
Signed by : RAJAGOPAL RAMASWAMI (14496G) on 21-Dec-2019 12:36			
ALT	88	H U/L	10 - 44
Signed by : RAJAGOPAL RAMASWAMI (14496G) on 21-Dec-2019 12:45			
AST	39	H U/L	10 - 34
Signed by : RAJAGOPAL RAMASWAMI (14496G) on 21-Dec-2019 12:45			
Creatine Kinase	225	H U/L	24 - 200
	Test repeated and verified		
Signed by : RAJAGOPAL RAMASWAMI (14496G) on 21-Dec-2019 12:45			
eGFR	92	N mL/min	>60
Signed by : RAJAGOPAL RAMASWAMI (14496G) on 21-Dec-2019 11:02			

Handwritten notes:
 → Kidney Fine too

Printed By ANDREW LEE YEW WENG

Printed Date 26 Dec 2019 10:13 AM

Page 1 of 1



Please bring this Referral Letter and your Identity Card / Passport / Work Permit /
Birth Certificate(if <12yrs) on the day of your appointment.

Referral for Continuation of Treatment

These documents will help us speed up your Registration at the
Specialist Clinics when you come for your appointment

Short Stay Unit (SSU)

To : Attending MEDICAL - GASTROENTEROLOGY Doctor

TCU Duration : First Available

Date of Visit : 11-Dec-2019 21:41

Name of patient : MAHADHIR BIN AHMAD

NRIC : S9600040E Account Number : 69190790551

Address : Blk 662 #03-235 YISHUN AVENUE 4 Singapore 760662

Telephone : 84849937, 67544068

Doctor's Decision

Appt Date :	_____
Appt Time :	_____
SOC :	_____
X-Ray No :	_____
Stitches Removal Date :	_____
Name of Staff :	_____

Date of Birth : 03-Jan-1996 Sex : Male Race : Malay

FINAL DIAGNOSIS : General symptom
Blunt trauma

Referral Remarks

- First Available

Triage Information

Time Of Triage : 11-Dec-2019 19:11 Triage Category : P1
Arrival From : SCDF
Travel History : Yes Travel in the last 21 days? No
Chief Complaint : RTA Self skidded sustained LT thigh swelling. NIL Flung/LOC.

Main Complaints

Chief Complaint: 23/M/Malay
NKDA
Studying Mechanical in NTU
Nil long term meds
Nil Asthma

Hist:
presented with RTA at 6pm
motorcyclist was trying to avoid a taxi while changing lane
emergency break, loss balance and fall + skidded under the taxi, says his legs/knees/thighs hit the
rear end of the taxi before his upper body went under the taxi with an intact helmet
no LOC and no ENT bleeding, nil giddiness/nausea & vomiting and nil headache
remembers the events clearly
however was stuck under the taxi for about 2 minutes as the helmet was stuck
bystander help lift up the taxi rear end and able to bring the patient out from under the taxi
denies neck pain/numbness & weakness of ULs & LLs
Has pain over left mid-lower thigh, lower back and right hand
Nil BoV

Arshad Iqbal
Doctor
dr62787i

Accident & Emergency

Attending Doctor's Name

Doctor's Signature



Changi
General Hospital
SingHealth

Referral for Continuation of Treatment

Date of Visit : 11-Dec-2019 21:41
Name of patient : MAHADHIR BIN AHMAD
NRIC : S9600040E Account Number : 69190790551
Address : Blk 662 #03-235 YISHUN AVENUE 4 Singapore 760662
Telephone : 84849937, 67544068
Date of Birth : 03-Jan-1996 Sex : Male Race : Malay

Physical Examination

Physical Exam 1:

alert, GCS 15
noted abrasion over the right and left palms
right hypothenar 0.1cmx0.2cm and left medial thenar 0.2cmx0.1cm
no bony tenderness over wrist/metacarpals and fingers
small 0.5 cm abrasion over the right 4th MCPJ, nil underlying bony tenderness
no snuffbox tenderness b/l
ROM of wrists b/l-Full but has some pain over right wrist on RoM with no bony tenderness though
power full in all limbs except the left LL due to pain

hip compression and chest compression negative
neck no midline tenderness, ROM-Full and nil pain on ROM of Neck
left thigh mid to distal tenderness with mild swelling and superficial abrasions over the lateral aspect,
unable to bend the left knee due to pain of the left thigh
Left knee/leg/ankle/foot-Not tender
DP/TP felt well b/l
Sensations below thigh in left LL-same as right side
Abrasions seen below both knees
ROM at ankles b/l-Full
Right LL ROM-Full, not painful, nil bony tenderness
Log roll:
Nil bony tenderness over posterior ribs/scapula/thoraco-lumbar spine, nil step felt
DRE. anal tone intact. no saddle anesthesia

Unable to walk/weight bear currently due to left LL pain

Doctor's Notes

Arshad Iqbal
Doctor
dr62787i

Accident & Emergency

Attending Doctor's Name

Doctor's Signature



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Nil bony tenderness over posterior ribs/scapula/thoraco-lumbar spine, nil step felt
DRE: anal tone intact. no saddle anesthesia

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Doctor's Notes

Arshad Iqbal
Doctor
dr62787i

Accident & Emergency

Attending Doctor's Name

Doctor's Signature



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Name of patient : MAHADHIR BIN AHMAD
NRIC : S9600040E Account Number : 69190790551
Address : Blk 662 #03-235 YISHUN AVENUE 4 Singapore 760662
Telephone : 84849937, 67544068
Date of Birth : 03-Jan-1996 Sex : Male Race : Malay

Initial Progress Notes

Patient admitted to SSU on 11/12/2019 under blunt trauma protocol
Seen on admission
Noted pt was a motorcyclist who was involved in a RTA:
rear ended a taxi with his left side striking the boot/rear bumper area
subsequently fell on his right side and skidded, eventually ending up with his head stuck directly
underneath the exhaust pipe
pt was wearing helmet and when bystanders lifted the rear end of the cab, they took off the helmet
which he noted was still intact
pt did not suffer any HI nor did he had any LOC
denies neck pain
no chest or abdo pain
no SOB
no nausea/vomiting
with left hip and left thigh pain
was initially having severe difficulty moving the left LL d/t the pain
no LL numbness or weakness
currently, pain is better

O/E:
conscious, coherent, per trolley, speaks in full
no cephalhematoma
PEARL
no midline CTLS tenderness
no raccoonng, no battle sign
-ve chest compression
lungs clear
abdo soft nontender
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the left thigh
left ankle ROM good

right LL and both UL NAD

xrays - chest, pelvis, hip, left knee, left femur and LS xray - no obvious fracture or dislocation

noted bloods: CK 341, ALT 102, AST 54

plan:
repeat bloods cm
analgesics
hydrate (oral)
observe for progression of hyperemia/contusion of the left thigh

Arshad Iqbal
Doctor
dr62787i

Accident & Emergency

Attending Doctor's Name

Doctor's Signature



Changi
General Hospital
SingHealth

Referral for Continuation of Treatment

Date of Visit : 11-Dec-2019 21:41
Name of patient : MAHADHIR BIN AHMAD
NRIC : S9600040E Account Number : 6919079055I
Address : Blk 662 #03-235 YISHUN AVENUE 4 Singapore 760662
Telephone : 84849937, 67544068
Date of Birth : 03-Jan-1996 Sex : Male Race : Malay

A&E IV / IM Procedures

Time Prescribed	Order Name	Duration	Frequency	Dosage	Status	Performed By	Prescribed By
11-Dec-2019 20:16	Ketorolac Trometamol Injection		Once	30 mg	Performed	Doctor Muhamad Syamil Bin Rosli (20:24)	Doctor Muhamad Syamil Bin Rosli
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11-Dec-2019 19:36	Tramadol HCl Injection		Once	50 mg	Performed	Doctor Muhamad Syamil Bin Rosli (19:44)	Doctor Muhamad Syamil Bin Rosli

Disposition

Disposition : Referred to SOC Disposition By : Doctor Arshad Iqbal
Disposition Date/Time : 12-Dec-2019 11:25 Condition on Disposition : Good

Clinical Summary

Summary : Noted the CK 341--930
Repeat CK in polyclinic
Drink lots of water
Spoke to on call ortho Dr Ang Ke Xin Magneline
Advised to see the patient in ortho clinic in 4 weeks for the left thigh contusion
Gastro TCU for LFTs

Discharge Prescription

Allergy : No Known Allergies

Drug Name	Dosage	Instruction	PRN Instruction	Duration / Quantity
ANArex Tablet (Paracetamol 450mg, Orphenadrine 35mg)	2 tablet - TDS			5 days
Diclofenac Sodium EC Tablet	50 mg - TDS			3 days
Famotidine Tablet	20 mg - OM			3 days

Medical Certificate

Arshad Iqbal
Doctor
dr62787i

Accident & Emergency

Attending Doctor's Name

Doctor's Signature



Changi
General Hospital
SingHealth

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Date of Visit : 11-Dec-2019 21:41

Name of patient : MAHADHIR BIN AHMAD

NRIC : S9600040E

Account Number : 69190790551

Address : Blk 662 #03-235 YISHUN AVENUE 4 Singapore 760662

Telephone : 84849937, 67544068

Date of Birth : 03-Jan-1996

Sex : Male

Race : Malay

Hospitalization Leave - 11 Dec 2019 to 17 Dec 2019

Arshad Iqbal
Doctor
dr62787i

Accident & Emergency

Attending Doctor's Name

Doctor's Signature

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	13/12/2019 12:24
Date Of Accident	11/12/2019 18:05
Exact Location Of Accident	TPE BEFORE EXIT 3A TOWARDS PUNGGOL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBG5689U
Insured/Policyholder	
Name Of Registered Owner	MAHADHIR BIN AHMAD
NRIC No	SXXXX040E
Email Address	MAROON-58@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-84849937
Alternative Phone No	OTHERS-84849937
Vehicle Particulars	
Manufacturer	YAMAHA
Model	FZ16ST
Exact Purpose for which vehicle was being used at time of accident	PTE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5112091661
Cover Note Number	03/09/19 - 02/09/20
Driver	
Name of Driver	MAHADHIR BIN AHMAD
NRIC No	SXXXX040E
Date Of Birth	03/01/1996
Occupation	INDOOR
Date Of Driving Pass	19/04/2018
Driving Experience	1 YEAR AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84849937
Fax Number	
Contact Number	OTHERS-84849937
EMail Address	MAROON-58@HOTMAIL.COM

Address BLK 662 YISHUN AVE 4 #03-235
Postcode 760662
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OWNER
Vehicle Registration Number of Driver's Own Vehicle -
Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE
Weather Conditions RAINING
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO
Number of vehicles (including own vehicle) involved in the accident 2
Was any body injured in the Accident? YES
Was any injured conveyed to hospital by ambulance? YES
Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? YES
If Yes, Please state which Police Station
Police Station Name YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

REFER POLICE REPORT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number UNKNOWN
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category TAXI
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	MAHADHIR BIN AHMAD
Approximate Age	23
Injuries Sustain	PAIN ON LOWER BACK, ABRASION ON PALMS & KNEE. SWELLING & ABRASION ON LEFT THIGH
Injured person in which vehicle?	FBG5689U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	BLK 662 YISHUN AVE 4 #03-235
Postcode	760662

Sketch Plan

SKETCH PLAN


VEHICLE NO.: FB 656894
INSURER : NTCC
DATE & TIME: 11/12/17 18:05

IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
2. This form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

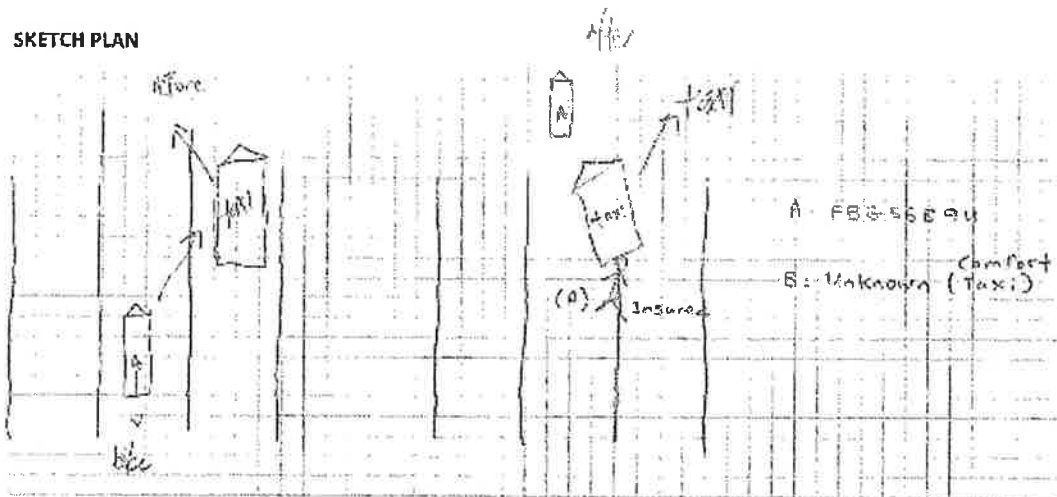

Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:
NRIC/TIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Polycynholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Notes:

NRIC/FIN No.:

() Claim Own Policy () Claim Third Party (✓) Reporting Only
() Claim OOT/TP at other workshop ()



**SINGAPORE
POLICE FORCE**



T/20191212/2165

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

1 of 3

Report No: T/20191212/2165

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/12/2019 18:27		Vide Report No.: G/20191211/0148		Station Diary No.: 110	
Informant's Particulars					
Name of Informant: MAHADHIR BIN AHMAD			Address: APT BLK 652 YISHUN AVENUE 4 #03-235 SINGAPORE 760562		
ID Type / ID No.: NRIC NO / S9600040E			Contact No.: Home/Office: Mobile: 84849937		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 23	Date of Birth: 03/01/1996	Type of Informant: Rider		
Race: Boyanese			Language: English		Institution / School Name:
Occupation: STUDENT FROM NTU			Driving Licence Information: Class: 2B		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 11/12/2019 18:05	Type of Location: Straight Road
Location: Along Road 1 TAMPINES EXPRESSWAY				
Along Tampines Expressway before Exit 3A travelling towards the direction of Punggol				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicle - No contact made			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBG5689U	Motorcycle	YAMAHA	FZ16ST	White	Seriously Damaged	0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date	
FBG5689U	NTUC Income Insurance Co-Operative Limited	5112091661	03/09/2019	02/09/2020	

PR2



**SINGAPORE
POLICE FORCE**



T/20191212/2165

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768627
Tel No: 1800-8529999

2 of 3

Report No: T/20191212/2165

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MAHADHIR BIN AHMAD	ID No	S9600040E
Related Vehicle	FBG5689U (Motorcycle)	Contact No.	84849937
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	11/12/2019	Date Discharge	12/12/2019
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

On 11/12/2019 at about 1805hrs, I was riding my motorcycle alone along Tampines Expressway before Exit 3A travelling towards the direction of Punggol and was travelling on the second lane from the extreme right. As I wanted to change lane to the extreme right lane, I signaled right before making a lane change. While I was making the lane change to the right and before I could complete my lane change to the right lane, there was a blue Comfort taxi which was travelling in front of me on the extreme right lane and it suddenly switched lane to the second lane. To avoid making any contact with the said taxi, I brake my motorcycle and fell on my right; thereafter landed below the said taxi with my helmet intact on my head.

Ambulance came and I was conveyed to Changi General Hospital after Traffic Police came. I felt pain on my lower back region, sustained abrasions on both palms and both knee regions. I also sustained some swelling and abrasion on my left thigh region. I was giving 7 days of hospitalization leave from 11/12/2019 to 17/12/2019. I do not have vehicle camera installed on my motorcycle and could not remember the vehicle number of the said taxi. I do not know if there were other vehicles involved except for me and the said taxi.

PR3



**SINGAPORE
POLICE FORCE**



T/20191212/2165

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529989

3 of 3



Report No T/20191212/2165

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: L / Staff Sgt LAU JIXIANG	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 12/12/2019 18:27
Officer In Charge Of Case: TP / GIT / Sgt 3 MUHAMMAD AFIQ BIN RAHMAT Contact No.: 65476171	Classification Of Case: 

Authentication Stamp
NP168

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 9:00 - 17:00
UEN: S66550206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MCHM19164122 Vehicle Registration No: F86 5689 U
Name (as shown in NRIC) : mahadhir bin Ahmad NRIC/FIN/Passport No : S9600040 E
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : Blk 662 Yushun Ave. 4 #03-235 Singapore 760612
Contact (Tel) : _____ Mobile No. : 84849937
Email Address : anaroon-58@hotmail.com
Date of Accident : 11.12.2019 Time of Accident : 18:05
Place of Accident : TPE before Exit 3A towards
Insurance Company : NTMC Income

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend to claim 3rd party

Policyholder / Driver's Signature
Date: 29/2/2020

Reporting Centre Personnel's Signature
Name: Evel
NRIC/FIN No.: _____
Date: 29/2/20



**SINGAPORE
POLICE FORCE**



T/20191212/2165

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

1 of 3

Report No. T/20191212/2165

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/12/2019 18:27	Vide Report No.: G/20191211/0148	Station Diary No.: 110
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Informant's Particulars			
Name of Informant: MAHADHIR BIN AHMAD		Address: APT BLK 662 YISHUN AVENUE 4 #03-235 SINGAPORE 760662	
ID Type / ID No.: NRIC NO / S9600040E		Contact No.: Home/Office: Mobile: 84849937	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 23	Date of Birth: 03/01/1996	Type of Informant: Rider
Race: Boyanese		Language: English	Institution / School Name:
Occupation: STUDENT FROM NTU		Driving Licence Information: Class: 2B Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 11/12/2019 18:05	Type of Location: Straight Road
Location: Along Road 1 TAMPINES EXPRESSWAY				
Along Tampines Expressway before Exit 3A travelling towards the direction of Punggol				
Weather: Raining	Road Surface: Wet		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicle - No contact made			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
FBG5689U	Motorcycle	YAMAHA	FZ16ST	White	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
FBG5689U	NTUC Income Insurance Co-Operative Limited	5112091661	03/09/2019	02/09/2020



**SINGAPORE
POLICE FORCE**



T/20191212/2165

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

2 of 3

Report No. T/20191212/2165

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MAHADHIR BIN AHMAD	ID No.	S9600040E
Related Vehicle	FBG5689U (Motorcycle)	Contact No.	84849937
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	11/12/2019	Date Discharge	12/12/2019
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

On 11/12/2019 at about 1805hrs, I was riding my motorcycle alone along Tampines Expressway before Exit 3A travelling towards the direction of Punggol and was travelling on the second lane from the extreme right. As I wanted to change lane to the extreme right lane, I signaled right before making a lane change. While I was making the lane change to the right and before I could complete my lane change to the right lane, there was a blue Comfort taxi which was travelling in front of me on the extreme right lane and it suddenly switched lane to the second lane. To avoid making any contact with the said taxi, I brake my motorcycle and fell on my right; thereafter landed below the said taxi with my helmet intact on my head.

Ambulance came and I was conveyed to Changi General Hospital after Traffic Police came. I felt pain on my lower back region, sustained abrasions on both palms and both knee regions. I also sustained some swelling and abrasion on my left thigh region. I was giving 7 days of hospitalization leave from 11/12/2019 to 17/12/2019. I do not have vehicle camera installed on my motorcycle and could not remember the vehicle number of the said taxi. I do not know if there were other vehicles involved except for me and the said taxi.



**SINGAPORE
POLICE FORCE**



T/20191212/2165

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

3 of 3

Report No. T/20191212/2165

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

L /

Staff Sgt LAU JIXIANG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MUHAMMAD AFIQ BIN RAHMAT

Contact No.: 65476171

Signature Of Informant:

Date/Time:

12/12/2019 18:27

Classification Of Case:

Authentication Stamp

NP168



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 6259
www.police.gov.sg

Our Ref : TP/IP/76753/2019
Date : 17 February, 2020

MAHADHIR BIN AHMAD
APT BLK 662 YISHUN AVENUE 4
#03-235
SINGAPORE 760662

Dear Sir/Madam

**ACCIDENT INVOLVING FBG5689U/SHD3565B ON 11/12/2019 AT 1802 HRS, ALONG TPE
TOWARDS SLE 3 KM**

I refer to the above accident.

2. Please be informed that we have completed our investigations which shows that the driver of SHD3565B has committed an offence of Careless Driving causing hurt under Sec 65(4)(a) Of The Road Traffic Act. Action has been initiated against the driver for the said offence.

3. If you have any queries, please contact the Investigation Officer, Alex Chong at telephone number 6547 6083 or via email at Alex_CHONG@spf.gov.sg.

Yours faithfully

SHAHUL HAMEED
FOR HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE

Enquire Vehicle & Owner Information (Vehicle No. SHD3565B As At 11 Dec 2019 / 18:05:00)

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident
Law Firm Case No.: DP.11196.20.TIMC

Current Owner Details

Owner ID Type: Company
Owner ID: 199303821R
Owner Name: COMFORT TRANSPORTATION PTE LTD
Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes
Registered Block/House No.: 383
Registered Street Name: SIN MING DRIVE
Registered Unit No.: -
Registered Building Name: GAS BUILDING
Registered Postal Code: 575717

Current Vehicle Details

Vehicle No.: SHD3565B
Make Description/Model: HYUNDAI / I40 1.7 CRDI F/L AT ABS AIRBAG 4DR
Insurance Company Name: INDIA INT'L INS PTE LTD

Print OK

Enquire Transaction History

Transaction History Details

Log Date/Time: 02 Mar 2020 / 15:28:26

Asset Type:	Vehicle	Transaction Amount:	\$7.49
Asset ID:	SHD3565B		
Transaction Type:	18.19 Enquire Veh Owner Info (Others) by Law Firm	Channel:	External Agency
User ID:	EDPOSAB0 - SITI AWIYAH BTE SENIAN	Business Transaction Reference No.:	20200302152826280361

As at Date of Search: 11 Dec 2019

As at Time: 18:05:00

Vehicle No.: SHD3565B

Search Reason: Insurance claim in relation to traffic accident

Date of Filing: -

Suit No.: -

Law Firm Case No.: DP.11196.20.TIMC

Information displayed is correct as at the log date and time.

[Enquire Related Logs](#)

[Back to List](#)