

REPORT OF MEDICAL EXAMINATION OF SEAFARER BY AN APPROVED MEDICAL EXAMINER.

As per Merchant Shipping (Medical Examination) Rules 2000 and ISM / STCW code 1/9 and ILO convention 147 (MLC 2006)

DR. MIR MD. RAIHAN MBBS, (DU), DFM

RADICAL HOSPITAL LIMITED,

35 SHAH MAKHDUM AVENUE, UTTARA, DHAKA-1230.

TEL: +88027920116, +88 01955567000. EMAIL: radical_hospitals@yahoo.com

Name: HUDA ASHIG ELAHI BIN Sex: Male Serial No:

Date of Birth: 22 / 05 / 2001 PP/DOC: C/012399 Rank: ENGINE CADET

Vessel: MV BLUE VOYAGE Type: BULK CARRIER Route:

Home Address: Road-9, House-522, West Nakhla para, Tejgaon, Dhaka

Company Name: DOREEN SHIPPING

Medical History Please answer the following to the best of your knowledge.

Is there any past / present history of any of the following	Candidate Declaration		Examiner Record			Candidate Declaration		Examiner Record	
	Yes	No	Yes	No		Yes	No	Yes	No
Severe one-sided headaches (Migraine)		☒		☒	Hernia / Hydrocoele / Appendicitis		☒		☒
Head Injury / Concussion / Loss of Memory		☒		☒	High / Low blood pressure / Heart disease		☒		☒
Fits / Epilepsy / Dizziness / Fainting		☒		☒	Asthma / Bronchitis / Tuberculosis		☒		☒
Eye / Vision Problems (Glasses, etc)		☒		☒	Allergy / Skin disease		☒		☒
Hearing Impairment		☒		☒	Infection / Contagious Disease		☒		☒
Ear / Nose / Throat problems		☒		☒	Addiction to alcohol / drugs / tobacco		☒		☒
Stomach / Bowel disorders		☒		☒	Fracture / Dislocation / Injury / Amputation		☒		☒
Gall stones / Kidney disorders		☒		☒	Major / Minor Operation		☒		☒
Jaundice / Liver Disease		☒		☒	Diabetes		☒		☒
Piles / Varicose veins		☒		☒	Nervous / Mental disease / Sleep disorder		☒		☒
Blood Disorder		☒		☒	Malignant disease (Cancer)		☒		☒
Female Disorder		☒		☒	Signed off on medical grounds / Declared Unfit		☒		☒

Medical Examination

Height	Weight in Kgs	Chest Insp-Exp	Blood Pressure in mm of Hg	Pulse-Beats / min	Resp. Rate / min	General Condition	
172cm	68kg	43-41	120/80 mmHg	70/min	19/min	Good	
Distant Vision	Uncorrected	Corrected	Field of Vision	Audiometry	Hz	500	1000
Right Eye	6/6		Normal	Right Ear	dB	20	20
Left Eye	6/6		Normal	Left Ear	dB	20	20
Colour Vision	Ishihara	Normal	Abnormal	Hearing	Right Ear	Left ear	
	Other	Normal	Abnormal		9	9	

Systemic Examination	Normal	Abnormal	Notes		Normal	Abnormal
Head & Neck	☒		FIT FOR SEA SERVICE AS ENGINE CADET AS PER MLC 2006 Enhanced GARD Medicals done		Respiratory system	☒
Eyes	☒				Cardiovascular system	☒
Ears / Nose / Throat	☒				Per Abdomen	☒
Teeth / Oral Cavity	☒				Genito-urinary system	☒
Musculo-Skeletal system	☒				Others	☒
Nervous system	☒				Hernia / Hydrocoele	☒
Reflexes	☒				Varicose Veins	☒
Skin	☒				Fissure/Fistula/Piles	☒

Investigations

Blood	Result	Normal	Urine
Hemoglobin	15 gm%	14-16 gm %	Colour
Total WBC count	7200 cu.mm	4000-11000 / cu.mm	Specific Gravity
Neu 65 % Lymph 35 % Eos 05 Ba 00 Mo 04 %			pH
Malarial parasite	Not Found		Albumin
ESR	05 mm / 1st hour	1 - 15 mm / hr	Sugar
SGPT	19 U/L	9 - 43 U / L	Bile pigment
S.Cholesterol	mg/dl	145 - 260 mg / dl	Bile salts
S.Triglycerides	mg/dl	upto 200 mg / dl	Occult blood
Blood Sugar	RBS 5.8 PPBS	upto 125 mg %	RBC cells
HbsAg	Negative		Leucocytes
HIV I & II	Negative		Others
VDRL	Negative		
Others	GGTP U/L		
Blood Group			

ECG: <u>Normal</u>	TMT: <u>N/D</u>	
X-Ray Chest: <u>Normal</u>	Drugs of Abuse: <u>Negative</u>	
	USG: <u>Normal</u>	

Result of Medical Examination

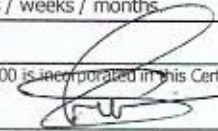
On the basis of the examinee's history, clinical examination and diagnostic tests, I, Dr. MIR MD Raihan, hereby declare the examinee medically Fit Unfit Temporarily unfit Permanently unfit Should be re-examined in days / weeks / months

Remarks / Recommendations

I, Doctor's Name: DR. MIR MD. RAIHAN certify that all information required under Annexure E & F of M.S. (Medical Examination) Rules 2000 is incorporated in this Certificate

This certificate is valid till: 19 APR 2026

Candidate's Signature: Ashig Official Stamp: 

Date: 20 APR 2024 Doctor's signature: 

DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Bldm), PGT (Opht)
DMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.

04.2024.6355



ID NO : 24040413

Date : 20/04/2024

Patient's Name : ASHIQ ELAHI BIN HUDA

Age : 22Y10M28D

Ref. By : DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/12399

Sex : Male

Specimen : Blood

(Relevant estimations were carried out by KT-44 Haematology Analyzer with checked manually)

HAEMATOLOGY REPORT

Parameter		Results	Reference Values	Histogram
Haemoglobin(Hb)	15	g/dl	M:12-16, F:10-14.0 g/dl	
ESR(Westergren)	05	mm/1st hr	M:0-10, F:0-20 mm/1st hr	
TOTAL WBC COUNT	7,200	/cumm	4,000 - 11,000 /cumm	
<u>DIFFERENTIAL COUNT</u>				
Neutrophils	65	%	(40 - 75)%	
Lymphocytes	28	%	(20-45)%	
Monocytes	04	%	(2-10)%	
Eosinophils	03	%	(1-6)%	
Basophil	00	%	0-1 %	
TOTAL CIR. EOSIONOPHIL COUNT	216	/cumm	40 - 450 /cumm	
TOTAL PLATELET COUNT(PC)	217,000	/cumm	1,50,000-4,50,000 /cumm	
MPV	11.8	fL	7.0 -11.0 fL	
PDW-CV	17	%	10 - 18 %	
PCT	0.26	%	0.10 - 0.28	
P-LCR	39.3	%	9.00 - 45.00%	
P-LCC	85	x10^3/uL	13 - 129 x10^3/uL	
RBC COUNT				
HCT/PCV	47.3	%	M: 4.5-6.5, F: 3.8-5.8 m/ul	
MCV	89.7	fL	M: 40-54%, F: 37-47%	
MCH	28.4	pg	76-94 fL	
MCHC	31.6	g/dL	27-32 pg	
RDW SD	50	fL	29-34 g/dL	
RDW CV	16.7	%	30.0-57.0 fL	
			10-16%	

Checked By:

Medical Technologist.
Radical Hospital Ltd.
Uttara,Dhaka.

Dr. Sumaiya Khatun
MBBS,MD (Gold Medilist) (BSMMU)
Associate Professor
Dept.Of Microbiology
East West Medical College & Hospital.

Bill No	DIA24040413	Received Date	20/04/2024
Patient's Name	ASHIQ ELAHI BIN HUDA		
Patient's Age	22Y 10M 28	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/12399
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.8 mmol/L	4.2 – 6.4 mmol/L
Serum Bilirubin (Total)	0.51 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	19.0 U/L	Up to 37 U/L

REMARKS (IF ANY)

IN VIEW OF THE LIVER FUNCTION TEST RESULT, HIS BLOOD IS FREE FROM TOXIC EFFECT OF CHEMICALS.

Checked By

Medical Technologist,
Radical Hospital Ltd.

Dr. Sumaiya Khatun

MBBS, MD (Microbiology)

Associate Professor

Dept. of Microbiology

East West Medical College and Hospital.

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Sample	BLOOD		

SEROLOGICAL REPORT

HBsAg (Method : (ICT)	Negative
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Checked By

Medical Technologists
Radical Hospitals Ltd.

Dr. Sumaiya Khatun
MBBS, MD (Microbiology)
Associate Professor
Dept. of Microbiology
East West Medical College and Hospital



Bill No	DIA24040413	Received Date	20/04/2024
Patient's Name	ASHIQ ELAHI BIN HUDA		
Patient's Age	22Y 10M 28	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/12399
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	Straw	RBC	Nil
Appearance	Clear	Pus Cells	1-2/HPF
Sediment	Nil	Epithelial	1-2/HPF

CHEMICAL EXAMINATION CASTS / LPF

Reaction	Acidic	RBC	Nil
Albumin	Nil	WBC	Nil
Sugar	Nil	Epithelial	Nil
Ex.Phosphate	Nil	Granular	Nil
		Hyaline	Nil

ON REQUESTCRYSTALS & OTHERS

Bile Salt	Not Done	Urates	Nil
Bile Pigment	Not Done	Uric Acid	Nil
Ketones	Not Done	Calcium oxalate	Nil
Urobilinogen	Not Done	Amor. Phos	Nil
B.J. Protein	Not Done	Hippurate crystal	Nil

Checked By

Medical Technologist.
Radical Hospital Ltd.

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Bill No	DIA24040413	Received Date	20/04/2024
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Patient's Age	22Y 10M 28	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/12399
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromato graphic Assay (Rapid one Step Test)

Test Name	Result
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Drug Level of Urine

Cocaine	Negative
Morphine	Negative
Marijuana	Negative
Barbiturates	Negative
Amphetamines	Negative
Phencyclidine	Negative
Alcohol	Negative
Benzodiazepines	Negative
Methadone	Negative
Propoxyphene	Negative

Checked By

Medical Technologist.
Radical Hospital Ltd.

Dr. Sumaiya Khatun

MBBS, MD (Microbiology)

Associate Professor

Dept. of Microbiology

East West Medical College and Hospital.

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24040413 Receive: 20/04/2024 Print: 20/04/2024
Patient's Name : ASHIQ ELAHI BIN HUDA
Age : 23 YRS Sex : M
Refd. by : Dr. Mir Md. Raihan MBBS, (DU), CCD(BIRDEM), PGT(Eye), DFM

X-RAY OF CHEST (DIGITAL)

Diaphragm : Both hemidiaphragm are normal in position.
C-P angles are clear.

Heart : Normal in T.D.

Lung : Lung fields are clear.

Bony thorax : Reveals no abnormality.

Comments : Normal chest skiagram.

Prof. Dr. Md. Mojibor Rahman
MBBS, DMRD (Radiology & Imaging)
Head of the Department (Radiology & Imaging)
Sylhet Women's Medical College Hospital

ID: 24020579

20-04-2024 17:34:08

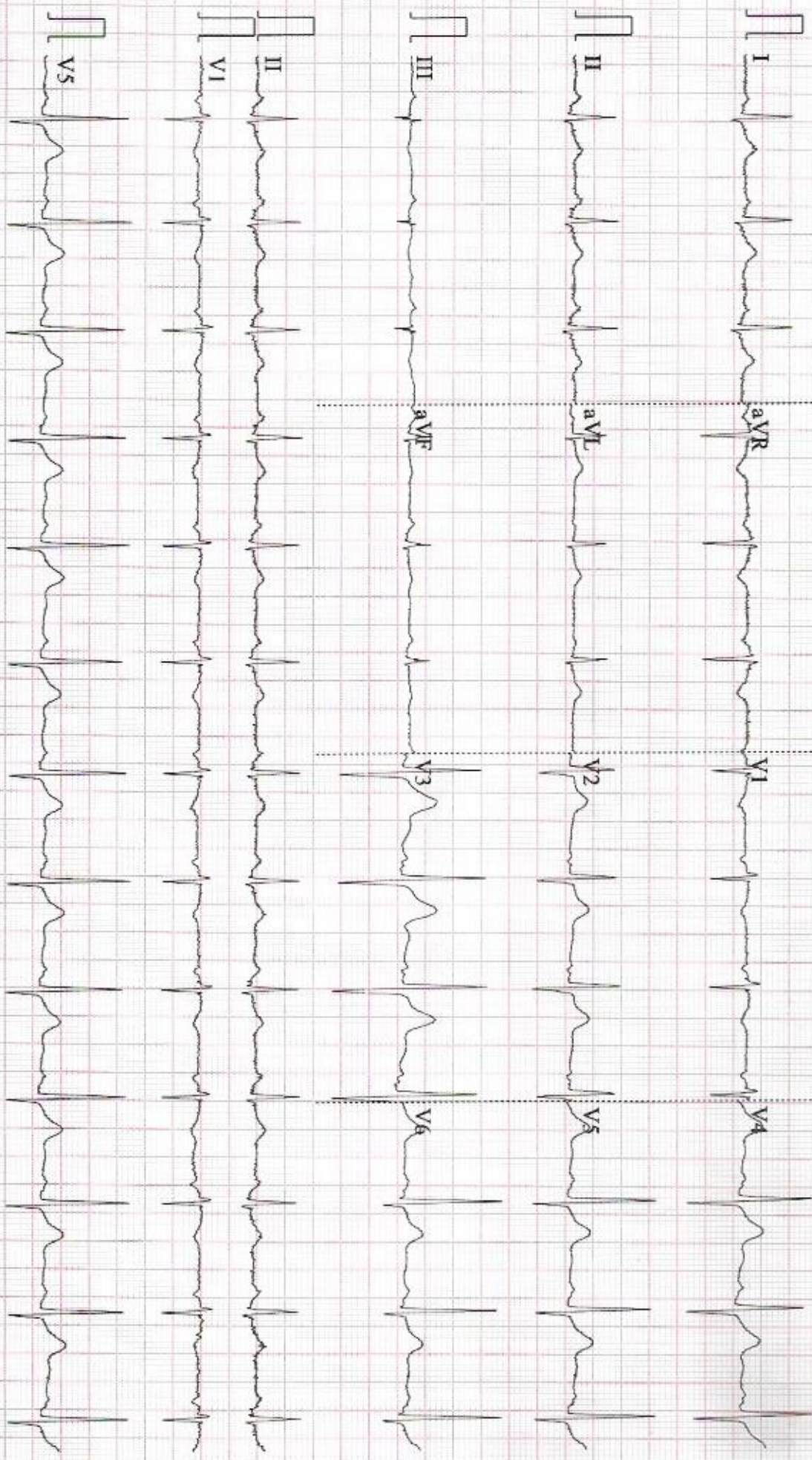
Asim Bhatti

male 23 Years

HR : 77 bpm
P : 124 ms
PR : 160 ms
QRS : 88 ms
QT/QTc : 370/419 ms
P/QRS/T : 59/23/22 °
RV5/SV1 : 1.513/0.660 mV

Diagnosis Information:
Sinus rhythm
Normal ECG

Report Confirmed by:



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24040413 Receive: Print: 20/04/2024
Patient's Name : ASHIQ ELAHI BIN HUDA
Age : 23 YRS Sex : M
Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 77 b/min

Rhythm : Regular

P-Wave : Normal

P-R Interval : Normal

QRS Complex : Normal

ST. Segment : Is electric

T. Wave : Normal

Impression : Findings are within normal limit.


Dr. Debashish Paul
MBBS, MD (Cardiology)
Associate Professor
Department of Cardiology
Sylhet Women's Medical College Hospital

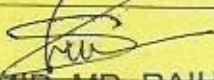
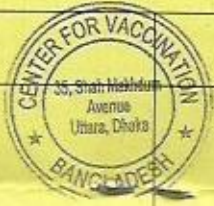
This report has been electronically signed

Page 1 of 1

**INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION
AGAINST YELLOW FEVER
CERTIFICAT INTERNATIONAUX DE VACCINATION OU DE REVACCINATION
CONTRE LA FIEVRE JAUNE**

ASHIQ ELAHI BIN HUDA
This is to certify that JE Soussigne' (e) certifie que _____ date of birth 22-05-2001 Sex MALE
no' (e) le _____ sexe _____
Whose signature follows Ashiq
don't la signature suit _____

has on the Date indicated been vaccinated or revaccinated against cholera
a e'te' vaccine (e) ar revaccine' (e) contre le fièvre jaune a la date indiquée.

Date	Signature and professional Status of Vaccinator Signature et titre du vaccinateur	Manufacturer and batch no of vaccine Fabricant du vaccin et numéro du lot	Official stamp of vaccinating centre Cachet officiel du centre de vaccination
20 APR 2024 1	 DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birm), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approver General Physician		
3			
4			

This certificate is valid only if the vaccine used has been approved by the world health organization and vaccinating centre has been designated by health administration for the territory in which that centre is situated.

The validity of this certificate shall extend for a period of ten years, beginning in days after the date of vaccination or in the event of a revaccination within such period of ten years, from the date of the revaccination.

This certificate must be signed by a medical practitioner in his own hand; his official stamp is not an accepted substitute for the signature.

Any amendment of this certificate, or erasure, or failure to complete any part of it, may render it invalid.

Ce certificat n'est valable que si le vaccin employé a été approuvé par l'Organisation Mondiale de la Santé et si le centre a été désigné par l'administration sanitaire pour le territoire dans lequel ce centre est situé.

La validité de ce certificat couvre une période de dix ans commençant dix jours après la date de la vaccination ou, dans le cas d'une revaccination, ou, à dix ans, le jour de cette revaccination.

Ce certificat doit être signé par un médecin de sa propre main, son cachet officiel ne pouvant que servir de complément au lieu de signature.

Toute altération ou rature sur le certificat ou l'omission d'une quelconque des mentions qu'il comporte peut affecter sa validité.

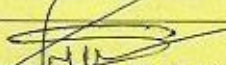
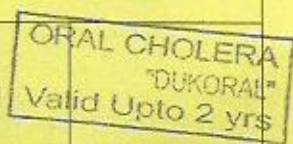
**INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION
AGAINST CHOLERA
CERTIFICAT INTERNATIONAUX DE VACCINATION OU DE REVACCINATION
CON IRE LE CHOLERA**

ASHIQ ELAHI BIN HUDA

This is to certify that
JE Soussigne' (e) certifie que | date of birth
no' (e) le | **22-05-2001** Sex | **MALE**

Whose signature follows | **Ashiq**
dont la signature suit |

has on the Date indicated been vaccinated or revaccinated against cholera
a e'te' vaccine (e) ar revaccine' (e) contre le fievre jaune a la date indiquee.

Date	Signature and professional Status of Vaccinator Signature et qualite profess- sionelle vaccinateur	Approved Stamp Cechet d'authentification
20 APR 2024	 DR. MIRZA MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited	 
1		
2		
3		
4		

The validity of this certificate shall extend for a period of two years, beginning six days after the first injection of vaccine or in the event of revaccination within such period of two years, on the date of that revaccination.

Notwithstanding the above provision in the case of a pilgrim, this certificate shall indicate that two injections have been given at an interval of seven days and its validity shall commence from the date of the second injection.

The approved stamp mentioned above must be in a form prescribed by the health administration of the territory in which the vaccination is performed.

Any amendment of this certificate or erasure or failure to complete any part of it. May render it invalid.

La validite de ce certificate couvre une periode de six mois commençant six jours apres la premiere injection du vaccin ou, dans le cas d'une revaccination, au cours de la periode de six mois apres la seconde revaccination.

Nonobstant les dispositions ci-dessus dans le cas d'un pelerin le present certificate doit faire mention de deux injections partakees a sept jours d'interval et sa validite commence le jour de la seconde injection.

De cachet d'authentification doit etre conforme au modele present per l'administration sanitaire du territoire ou la vaccination est effectuee.

Toute correction ou rajout sur le certificate ou l'omission d'une quelconque des mentions qui il comporte peut en affecter la validite.

ISSUED ON BEHALF OF THE DEPARTMENT OF SHIPPING
GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH



Form No: SMC

SL NO. 04.2024.6355

SEAFARER MEDICAL CERTIFICATE

This certificate is issued in accordance with Bangladesh Merchant Shipping Ordinance, 1983 and Bangladesh Merchant Shipping Officers and Ratings Training, Certification, Recruitment, Work Hours and Watch keeping Rules, 2011 in compliance with the International Convention on Standards of Training Certificate and Watch keeping for Seafarers, 1978 as amended (STCW'78) and Regulation 1.2 of the Maritime Labour Convention, 2006

SEAFARER INFORMATION:

Name: Last HUDA First ASHIG Middle ELAHI BIN
Gender: (Male/Female) MALE Nationality: BANGLADESHI Date: 20 APR 2024
Occupation: Deck/Engine/Catering/Other (specify) ENGINE CADET Rank: ENGINE CADET
Father's/ Husband's name: SAIFUL HUDA C.D.C No. C/01/12399
Mother's Name: KHADIZATUL KOBRA Seaman ID No. 050016642
Address: House No: _____ Street/ Road No: _____ Passport No. A11419563
Locality/Village: MONOHARPUR NID No. 8264707723
P.O.: CHOU PALI BAZAR - 3707 Date of Birth: 22-05-2001
P.S.: CHANDRAGONJ (DD/MM/YYYY)
District: LAKSHMIPUR

DECLARATION OF THE RECOGNIZED MEDICAL PRACTITIONER:

I am duly authorized by the Department of Shipping, Government of the People's Republic of Bangladesh and confirm the followings:

- Confirmation that identification documents were checked at the point of examination : YES/NO
 - Hearing meets the standards in section A-I/9 : YES/NO
 - Unaided hearing satisfactory? : YES/NO
 - Visual acuity meets standards in section A-I/9? : YES/NO
 - Colour vision meets standards in section A-I/9? : YES/NO
Date of last colour vision test : 20 APR 2024
 - Fit for lookout duties? : YES/NO
 - Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for service or to render the health of any other persons on board? : YES/NO
 - Any limitations or restrictions on fitness? : YES/NO
- If YES, specify limitations or restrictions:

Duties:

Location/Vessel:

Medical/Other:

RADICAL HOSPITAL LIMITED
Utara, Dhaka, Bangladesh

9. Medical fitness category : ☒ Fit-No restriction ☐ Fit-Subject to restrictions ☐ Unfit

10. Date of examination/Issue (DD/MM/YYYY) : 20 APR 2024

11. Date of expiry (DD/MM/YYYY) : 19 APR 2026 "No more than 2 years from the date of examination".

I have read the contents of the certificate and have been informed of the right to review.

Seafarer's Signature

Ashiq



DR. MIR. MD. RAIHAN

MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited

Name & Signature of the practitioner:

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifications shall be required to have a physical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer certificate, application for seafarer's identity document, or application for certification of special qualifications. This physical examination must be carried out not more than 24 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. The examination shall be conducted in accordance with the International Labor Organization World Health Organization, *Guidelines for Conducting Pre-sea and Periodic Medical Fitness Examinations for Seafarers (ILO/WHO/D.211997)*. Such proof of examination must establish that the applicant is in satisfactory physical and mental condition for the specific duty assignment undertaken and is generally in possession of all body faculties necessary in fulfilling the requirements of the seafaring profession.

In conducting the examination, the certified physician should, where appropriate, examine the seafarers previous medical records (including vaccinations) and information on occupational history, noting any diseases, including alcohol or drug -related problems and/or injuries. In addition, the following minimum requirements shall apply:

(a) Hearing:

- All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in better ear at 15 feet (4.57m) and in poorer ear at 5 feet (1.52m).

(b) Eyesight:

- Deck officer applicants must have (either with or without glasses) at least 6/6 [20/20] (1.00) vision in one eye and at least 6/12 [20/40] (0.50) in the other. If the applicant wears glasses, he must have vision without glasses of at least 6/45 [20/150] (0.13) in both eyes. Deck officer applicants must also have normal color perception and be capable of distinguishing the colors red, green, blue and yellow.
- Engineer and radio officer applicants must have (either with or without glasses) at least 6/9 [20/30] (0.67) vision in one eye and at least 6/15 [20/50] (0.40) in the other. If the applicant wears glasses, he must have vision without glasses of at least 6/60 [20/200] (0.10) in both eyes. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.

(c) Dental:

- Seafarers must be free from infections of the mouth cavity or gums.

(d) Blood Pressure:

- An applicant's blood pressure must fall within an average range, taking age into consideration.

(e) Voice:

- Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.

(f) Vaccinations:

- All applicants shall be vaccinated according to the requirements indicated in the WHO publication, International Travel and Health, Vaccination Requirements, and Health Advice, and shall be given advice by the certified physician on immunizations. If new vaccinations are given, these shall be recorded.

(g) Diseases or Conditions:

- Applicants afflicted with any of the following diseases or conditions shall be disqualified: epilepsy, insanity, senility, alcoholism, tuberculosis, acute venereal disease or neurosyphilis, AIDS, and/or the use of narcotics. Applicants diagnosed with, suspected of, or exposed to any communicable disease transmissible by food shall be restricted from working with food or in food - related areas until symptom-free for at least 48 hours.

(h) Physical Requirements:

- Applicants for able seaman, bosun, GP-1, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigational officer's certificate.
- Applicants for fireman/watertender, oiler/motorman, pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an engineer officer's certificate.

IMPORTANT NOTE:

An applicant who has been refused a medical certificate or has had a limitation imposed on his/her ability to work, shall be given the opportunity to have an additional examination by another medical practitioner or medical referee who is independent of the shipowner or of any organization of shipowners or seafarers.

Medical examination reports shall be marked as and remain confidential with the applicant having the right of a copy to his/her report. The medical examination report shall be used only for determining the fitness of the seafarer for work and enhancing health care.

DETAILS OF MEDICAL EXAMINATION:

(To be completed by examining physician; alternatively, the examining physician may attach a form similar or identical to the model provided in Appendix 1):

1. Complete physical Examination.

2. Pathological Examination:

a. CBC b. ESR c. HBSAG d. LFT e. ECG f. RBS g. URINE R/M/E

20 APR 2024

DR. MIR. MD. RAIHAN
MBBS (DU), DPM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited