



HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaidanga, Agrabad C/A, Chattogram, Bangladesh.
Tel : +880-2-333316214-6, Fax : +880-2-333310530



Accredited By : BMOC
Accreditation No : A-55144

PATIENT CONTROL NUMBER:
HSL-002958

MEDICAL EXAMINATION CERTIFICATE

SURNAME RAHMAN	FIRST NAME AND MD ASHFAKUR	MIDDLE NAME
PLACE AND DATE OF BIRTH NAOGAON 1-Jan-2001	PASSPORT NUMBER B00010511	SEAMAN'S BOOK NUMBER CO11013
NATIONALITY : BANGLADESHI SEX : ☒ Male ☐ Female	VESSEL TYPE : CONTAINER	TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : VILL-PAISAWTA, PO-ISLAMGATI, PS-ATRAI, DIST-NAOGAON, 6596, BANGLADESH.		CONTACT NUMBER : +8801833366785 (SELF)
RANK :		APPRENTICE ENGINEER

Have you ever had any of the following conditions?

Condition	YES	NO	Condition	YES	NO
1 Eye/vision problem	☐	☒	18 Sleep problems	☐	☒
2 High blood pressure	☐	☒	19 Do you smoke?	☐	☒
3 Heart/vascular disease	☐	☒	20 Operation/surgery	☐	☒
4 Heart surgery	☐	☒	21 Epilepsy/seizures	☐	☒
5 Varicose veins	☐	☒	22 Dizziness/fainting	☐	☒
6 Asthma/bronchitis	☐	☒	23 Loss of consciousness	☐	☒
7 Blood disorder	☐	☒	24 Psychiatric problems	☐	☒
8 Diabetes	☐	☒	25 Depression	☐	☒
9 Thyroid problem	☐	☒	26 Attempted suicide	☐	☒
10 Digestive disorder	☐	☒	27 Loss of memory	☐	☒
11 Kidney problem	☐	☒	28 Balance problem	☐	☒
12 Skin problem	☐	☒	29 Severe headaches	☐	☒
13 Allergies	☐	☒	30 Ear/nose/throat problems	☐	☒
14 Infectious/contagious diseases	☐	☒	31 Restricted mobility	☐	☒
15 Hernia	☐	☒	32 Back problems	☐	☒
16 Genital disorders	☐	☒	33 Amputation	☐	☒
17 Pregnancy	☐	☒	34 Fractures/dislocations	☐	☒

If any of the above questions were answered "yes", please give details.

Additional questions

	YES	NO
35 Have you ever been signed off as sick or repatriated from a ship?	☐	☒
36 Have you ever been hospitalised?	☐	☒
37 Have you ever been declared unfit for sea duty?	☐	☒
38 Has your medical certificate ever been restricted or revoked?	☐	☒
39 Are you aware that you have any medical problems, diseases or illnesses?	☐	☒
40 Do you feel healthy and fit to perform the duties of your designated position/occupation?	☒	☐
41 Are you allergic to any medications?	☐	☒

Comments:

FIT FOR DUTY ON BOARD SHIP

42 Are you taking any non-prescription or prescription medications?	☐	☒
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If yes, please list the medications taken and the purpose(s) and dosage(s)

I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to **Dr. Mir Md. Raihan** (approved medical practitioner) I also certify that my history contained above is true and any false statement will disqualify me from my employment, benefits and claims.

Md. Ashfakur Rahman

Signature of Seafarer

MEDICAL EXAMINATION

Weight 70kg	Height (cm) 172	BM 23.6	Blood Pressure: Systolic 110 mm	Diastolic 80 mm	PULSE: 78 1/2
Ear	Hearing by Audiometry	Audiometry	Hearing by Whisper Test		
Right	☐ Adequate ☐ Inadequate	500 1000 2000 3000	☐ Adequate ☐ Inadequate		
Left	☐ Adequate ☐ Inadequate	MS	☒ Adequate ☐ Inadequate		
Hearing meets the standards as laid down in STCW Code Section A-1/9? YES ☒ NO ☐					

	Visual acuity				Visual fields	
	Unaided		Aided		Normal	Defective
	Right eye	Left eye	Right eye	Left eye		
Distant	6/6	6/6			☒	☐
Near					☒	☐

Visual acuity meets the standard laid down in STCW Code Section A-1/9
 Colour vision as per STCW CODE Section A-1/9: ☒ Normal ☐ Doubtful ☐ Defective

Date of last colour vision test: Date (day/month/year) 26 APR 2024

	Normal	Abnormal		Normal	Abnormal
Head	☒	☐	Varicose veins	☒	☐
Sinuses, nose, throat	☒	☐	Vascular (inc. pedal pulses)	☒	☐
Mouth/teeth	☒	☐	Abdomen and viscera	☒	☐
Ears (general)	☒	☐	Hernia	☒	☐
Tympanic membrane	☒	☐	Anus (not rectal exam)	☒	☐
Eyes	☒	☐	G-U system	☒	☐
Ophthalmoscopy	☒	☐	Upper and lower extremities	☒	☐
Pupils	☒	☐	Spine (C/S, T/S and L/S)	☒	☐
Eye movement	☒	☐	Neurologic (full brief)	☒	☐
Lungs and chest	☒	☐	Psychiatric	☒	☐
Breast examination	☒	☐	General appearance	☒	☐
Heart	☒	☐	Skin	☒	☐

RESULTS OF ANCILLARY EXAMINATIONS

Chest X-Ray	<u>N/A</u>	BIO CHEMICAL (LIVER FUNCTION TEST)	Marijuana	☐ Positive ☒ Negative
ECG	<u>N/A</u>	BILIRUBIN	Alcohol Test	☐ Positive ☒ Negative
BLOOD R/E		SGPT	URINE R/E	<u>N/A</u>
DC (differential count)	<u>N/A</u>	SGOT	OTHERS	
HAEMOGLOBIN (HGB)	<u>15.1</u>		HBsAg	☐ Reactive ☒ Nonreactive
ESR (WESTERGREN)	<u>04</u>	Morphine	HIV / AIDS Test	☐ Reactive ☒ Nonreactive
WBC	<u>8800</u>	Amphetamine	VDRL	☐ Reactive ☒ Nonreactive
BLOOD GLUCOSE LEVEL		Phencyclidine	Blood Type	<u>A, B, O</u>
RANDOM	<u>5.0</u>	Barbiturates	Psychological Exam	<u>N/A</u>
HBA1C	<u>4.87</u>	Cocaine	Others (KUB Ultrasound)	<u>N/A</u>

Hereby I declare that I am in knowledge of the contents of the Physical examinations:

Md. Ashfakur Rahman

MD ASHFAKUR RAHMAN

Signature of Seafarer

Name of Seafarer

26-Apr-2024

Date

Assessment of fitness for service at sea:

On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the examinee medically:



Fit for lookout duties



Not fit for lookout duties

	Deck service	Engine service	Catering service	Other services
Fit	☒	☐	☐	☐
Unfit	☐	☐	☐	☐

☒ Without restrictions ☐ With restrictions

Is the Seafarer free from any medical conditions likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?

☒ Yes ☐

☐ No ☐

Describe restrictions (e.g., specific position, type of ship, trade area):

Action taken by medical examiner (e.g., referral):

Fitness Date:

26 APR 2024

Valid Until:

25 APR 2026

DR. MD. MIRAZIZ RAHMAN Physician

MBBS (DU), DPM, CCD (Broom), PGD (Optim)

Under the supervision of MDC-0945-016

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited

In Accordance with Medical Examination Rules 1978/1996 as Amended, MLC 2006

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: RAHMAN		GIVEN NAME (S): MD ASHFAKUR	
DATE OF BIRTH: DAY 1 MONTH 1 YEAR 2001		PLACE OF BIRTH CITY NAOGAON COUNTRY BANGLADESH	SEX MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER ☐ DECK OFFICER ☐ ENGINEERING OFFICER ☒ RADIO OPERATOR ☐ RATING ☐		MAILING ADDRESS OF APPLICANT: VILL-PAISAWTA, PO-ISLAMGATI PS-ATRAI, DIST-NAOGAON BANGLADESH.	

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION		COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	
RIGHT EYE	6/6	—	RIGHT EAR ms
LEFT EYE	6/6	—	LEFT EAR ms

Confirmation that identification documents were checked at the point of examination: YES ☒ NO ☐

Hearing meets the standards in STCW Code, Section A-1/9? YES ☒ NO ☐ NOT APPLICABLE ☐

Unaided hearing satisfactory? YES ☒ NO ☐

Visual acuity meets standards in STCW Code, Section A-1/9? YES ☒ NO ☐

Colour vision meets standards in STCW Code, Section A-1/9? YES ☒ NO ☐

(the visual test it is required every six years)

Date of the last colour vision test: (Day/Month/Year) **26 APR, 2024**

Are glasses or contact lenses necessary to meet the required vision standards? YES ☐ NO ☒

Able for watchkeeping? YES ☒ NO ☐

Is applicant taking any non-prescription or prescription medications? YES ☐ NO ☒

Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarers unfit for such service or to endanger the health of other persons on board? YES ☐ NO ☒

Hereby I declare that I am in knowledge of the contents of the Physical Examination.

MD. Ashfakur Rahman

MD ASHFAKUR RAHMAN

26-Apr-2024

Signature of Applicant

Name of Applicant

Date

CIRCLE APPROPRIATE CHOICE: (HE / SHE) IS FOUND TO BE (FIT / NOT FIT) FOR DUTY AS A (MASTER / DECK OFFICER / ENGINEERING OFFICER / RADIO OPERATOR / RATING) (WITHOUT ANY / WITH THE FOLLOWING) RESTRICTIONS:

FIT FOR DUTY ON BOARD SHIP

NAME AND DEGREE OF PHYSICIAN: **DR. MIR. MD. RAIHAN, MBBS (DU) DFM. CCD (BIRDEM) P.G.T. (OPHIH)**

ADDRESS: **RADICAL HOSPITALS LTD, 35, SHAH MAKHDUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230.**

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: **DG SHIPPING BANGLADESH, REG. NO.A-55144 (B.M.D.C)**

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: **06-MAY-2014**

SIGNATURE OF PHYSICIAN:

STAMP OF PHYSICIAN:

26 APR 2024
DATE:

EXPIRY DATE OF CERTIFICATE:

25 APR 2026

This certificate is issued in compliance with the requirements of the STCW Convention, 1978, as amended and the Maritime Labour Convention, 2006.

DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (BIRDEM), PGT (Ophth)
BMDC A-55144, MMC-BGD-018
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited



HAQUE & SONS LTD



DECLARATION OF HEALTH BY CREW

NAME OF CREW : MD ASHFAKUR RAHMAN

RANK : APPRENTICE ENGINEER

CDC NO : C/O/11013

DOB : 01-Jan-2001

HEALTH QUESTIONNAIRE

PLEASE ANSWER FOLLOWING BY TICKING (✓) YES OR NO

	YES	NO
1 Have you ever had coronary thrombosis or certain types of heart surgery?	☐	☒
2 Are you suffering from any heart related complications?	☐	☒
3 Are you a diabetic ?	☐	☒
4 If you are diabetic, do you need injections of insulin for diabetes?	☐	☒
5 Have you ever had a stroke, or unexplained loss of consciousness?	☐	☒
6 Have you ever been treated for a mental or nervous problem?	☐	☒
7 Are you an alcoholic, or have you had alcohol or drug addiction problems?	☐	☒
8 Do you have any hearing difficulties or are you using any hearing aid?	☐	☒
9 Have you ever suffered from any STD (Sexually Transmitted Disease)?	☐	☒
10 Are you aware of any other health condition that could affect your fitness for seafaring employment *	☐	☒

I declare that I read above questionnaire and answered by ticking as appropriate and the answers are, to the best of my knowledge, true and complete. I also declare that I am a healthy man and will be fully responsible for all the consequences in case of detection of any chronic disease or its past history which I may have concealed before joining vessel, and will bear all the expenses as may incur as a direct result of such concealment.

Date : 26 APR 2024

Signed : Md. Ashfakur Rahman

The Crew Member

* If yes, mention details below:-


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

Medical Information: (医療情報) * Please check the appropriate items.
該当する二欄にノ印を入して下さい。

1. ALLERGIES: (アレルギー)
二 Urticaria (hives) (じんましん) 二 Asthma (ぜんそく) 二 Other (その他)
二 Drug allergies (name): (薬品名) 二 Food allergies (name): (食品名)

2. PAST HISTORY: (病歴)

- (1) Past serious illness: (三) 既往症 (Age (年齢))

(2) Surgery: (手術)

When?

(時期) Age (年齢)

3. PRESENT ILLNESS (CHRONIC DISEASE).....(Now): (持病/有無)

Name of illness: (持病名)

Name (s) of medicine (s) used for the above disease (s). (上記持病に使用した一投薬品名)

4. DAILY LIFE HABITS: (日常生活)

- (1) Alcohol intake: (飲酒) 二 Do not drink (飲まない)

- 二 Drink 2-3 times a week (週に2~3回) 二 Drink every evening (毎日)
二 Heavy drinker (強い) 二 Moderate drinker (中程度) 二 Light drinker (弱い)

- (2) Smoking: (喫煙)

- 二 Never smoke (吸わない)

- 二 Quit smoking in 19 () 二 年 () 年に禁煙
二 Smoke () cigarettes a day () 日平均 () 支吸

- (3) Bowel movements: (排便)

- 二 Regular (規則的)

- 二 Constipated (便秘)

- (4) Dietary preferences: (食味の好み)

- 二 Meat (肉類)

- 二 Fish (魚類)

- 二 Only (類々) 二 Never (しない)

- (5) Exercise: (運動)

- 二 Often (よくする)

- 二 Sometimes (時々)

- 二 Never (しない)

- (6) Sleep: (睡眠)

- 二 Sleep well (良く寝る)

- 二 Have Sleeplessness (眠れない)

- 二 Have insomnia (不眠症)

- 二 Sometimes take sleeping pills, etc. (時々睡眠薬使用)

- (7) Weight: (体重)

- 二 Constant (変わらない)

- 二 Putting on weight (太ってきこ)

- 二 Losing weight (やせてきこ)

26 APR 2024

DR. MIR. MD. RAIHAN

MBBS (DU), DFM, CCD (Biodem), PGT (Opti)

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited



5. FAMILY HISTORY: (家族歴)

Notation: F = father, M = mother, B = brother, S = sister

(父) (母) (兄弟) (姉妹)

☐ Heart disease (心臓病)	F	M	B	S
☐ Cancer (癌/部位)	F	M	B	S
☐ Diabetes (糖尿病)	F	M	B	S
☐ Hypertension (高血圧症)	F	M	B	S
☐ Cerebral Apoplexy (脳卒中)	E	M	B	S
☐ Liver disease (肝臓疾患)	F	M	B	S
☐ Other: Name of disease (病名)	F	M	B	S

Briefly enter any special comments to the Attending Physician in English.

(受診医師へ特に伝えたいこと、病歴を簡潔に)

Date: 26 APR 2024

Signature: (署名)

MD. Ashfaqur Rahman
(Card holder) (本人)

MEDICAL RECORDS
(Write in block letters)

Name of Company: Tel: Fax: Nationality: Bangladesh

(所属会社) (国)

Name: MD ASHFAQUR RAHMAN Sex: M (男/女)

(氏名) given name (名) family name (姓)

Name of Position: APP SMR Date of Birth: 22-07-2002 (ID: M-Y)

(職位)

Height: (身長) 232 cm Weight: (体重) 72 kg

Pulse: 78/min Normal breathing rate: 22/min Normal temperature: 36.5°C

(脈拍/分) (正常呼吸数/分) (正常体温/度)

Blood pressure: 110/80 mmHg Blood type: A+B Rh: + Single/Married

(血圧) (血液型) (独身/結婚)

Blood sugar (血糖値): mg/dl $\times$ 0.05625 = mmol/l

Uric acid (尿酸値): mg/dl $\times$ 0.05914 = mmol/l

DR. MIR. MD. RAIHAN

MBBS (DU), DPM, CCD (Birdem), PGT (Jashin)

BMDC A-55144, MIMC-BGD-016

DG Shipping Bangladesh Approver

General Physician
Radical Hospitals Limited



ID NO : 24040573

Date : 26/04/2024

Patient's Name : MD.ASHFAKUR RAHMAN

Age : 23Y3M25D

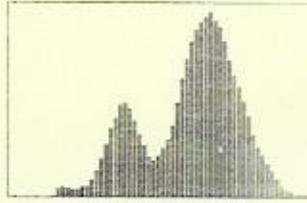
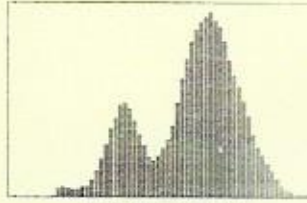
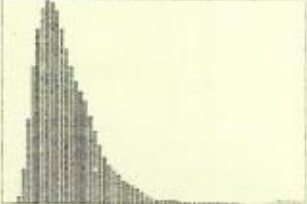
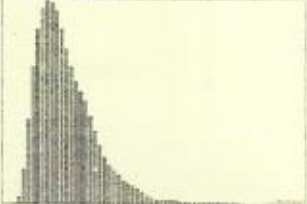
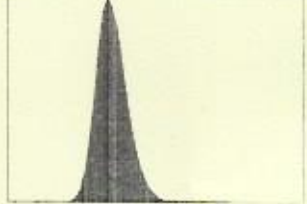
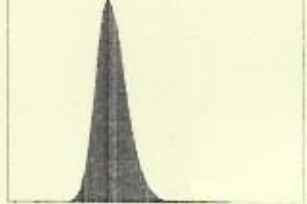
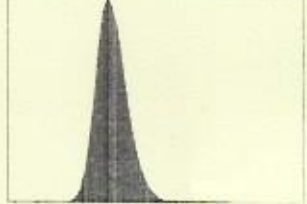
Ref. By : DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/11013

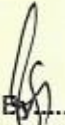
Sex : Male

Specimen : Blood

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

HAEMATOLOGY REPORT

Parameter	Results	Reference Values	Histogram
Haemoglobin(Hb)	15.1 g/dl	M:12-16, F:10-14.0 g/dl	
ESR(Westergren)	04 mm/1st hr	M:0-10, F:0-20 mm/1st hr	
TOTAL WBC COUNT	8,800 /cumm	4,000 - 11,000 /cumm	
DIFFERENTIAL COUNT			
Neutrophils	62 %	(40 - 75)%	
Lymphocytes	28 %	(20-45)%	
Monocytes	06 %	(2-10)%	
Eosinophils	04 %	(1-6)%	
Basophil	00 %	0-1 %	
TOTAL CIR. EOSIONOPHIL COUNT	352 /cumm	40 - 450 /cumm	
TOTAL PLATELET COUNT(PC)	220,000 /cumm	1,50,000-4,50,000 /cumm	
MPV	10.9 fL	7.0 -11.0 fL	
PDW-CV	17 %	10 - 18 %	
PCT	0.24 %	0.10 - 0.28	
P-LCR	33.9 %	9.00 - 45.00%	
P-LCC	75 x10 ³ /uL	13 - 129 x10 ³ /uL	
RBC COUNT	5.51 m/uL	M: 4.5-6.5, F: 3.8-5.8 m/uL	
HCT/PCV	47.2 %	M: 40-54%, F: 37-47%	
MCV	85.7 fL	76-94 fL	
MCH	27.4 pg	27-32 pg	
MCHC	32 g/dL	29-34 g/dL	
RDW SD	44 fL	30.0-57.0 fL	
RDW CV	15.3 %	10-16%	

Checked By: 
Medical Technologist.
Radical Hospital Ltd
Uttara,Dhaka.

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



Bill No	DIA24040573	Received Date	26/04/2024
Patient's Name	MD ASHFAKUR RAHMAN		
Patient's Age	23Y 3M 25D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11013
Sample	BLOOD		

BIOCHEMISTRY REPORT

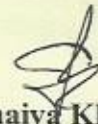
Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.0 mmol/L	4.2 – 6.4 mmol/L
Serum Bilirubin (Total)	0.50 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	24.0 U/L	Up to 40 U/L
Serum AST (SGOT)	18.0 U/L	Up to 37 U/L
HbA1C	4.8 %	4.0- 6.0 %

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.

Bill No	DIA24040573	Received Date	26/04/2024
Patient's Name	MD ASHFAKUR RAHMAN		
Patient's Age	23Y 3M 25D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11013
Sample	BLOOD		

SEROLOGICAL REPORT

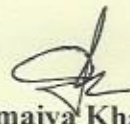
Test Name	Result
HBs Ag (Method : (ICT)	Negative
HIV 1 & 2 (Method : (ICT)	Negative
VDRL	Non-reactive

BLOOD GROUPING RESULT

ABO Blood Group	"A" (+ve)
Rh(D)Factor	Positive


Checked By

Medical Technologist.
Radical Hospital Ltd.


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



Bill No	DIA24040573	Received Date	26/04/2024
Patient's Name	MD ASHFAKUR RAHMAN		
Patient's Age	23Y 3M 25D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11013
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromato graphic Assay (Rapid one Step Test)

Test Name	Result
-----------	--------

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.

Bill No	DIA24040573	Received Date	26/04/2024
Patient's Name	MD ASHFAKUR RAHMAN		
Patient's Age	23Y 3M 25D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11013
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.

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

REF: MV. ONE HELSINKI

DATE: 26/04/2024

M/S. HAQUE & SONS LTD.
RUMMANA HAQUE TOWER
1267/A, GOSHAIL DANGA
AGRABAD C/A, CHITTAGONG.

EYE EXAMINATION REPORT

NAME: MD ASHFAKUR RAHMAN

RANK: APP ENG

CDC NO: C/O/11013

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

6/6

6/6

AIDED

COLOUR VISION:

NORMAL / BLIND

OPINION

: UNFIT / ☒ FIT FOR EMPLOYMENT ON BOARD


Dr. Mir Md. Raihan
MBBS, PGT (Ophthalmology)
Assistant Registrar (EX)
East west Medical College & Hospital

ID: 24020579
Dr. Ashtakar Rahim
Male 23 Years

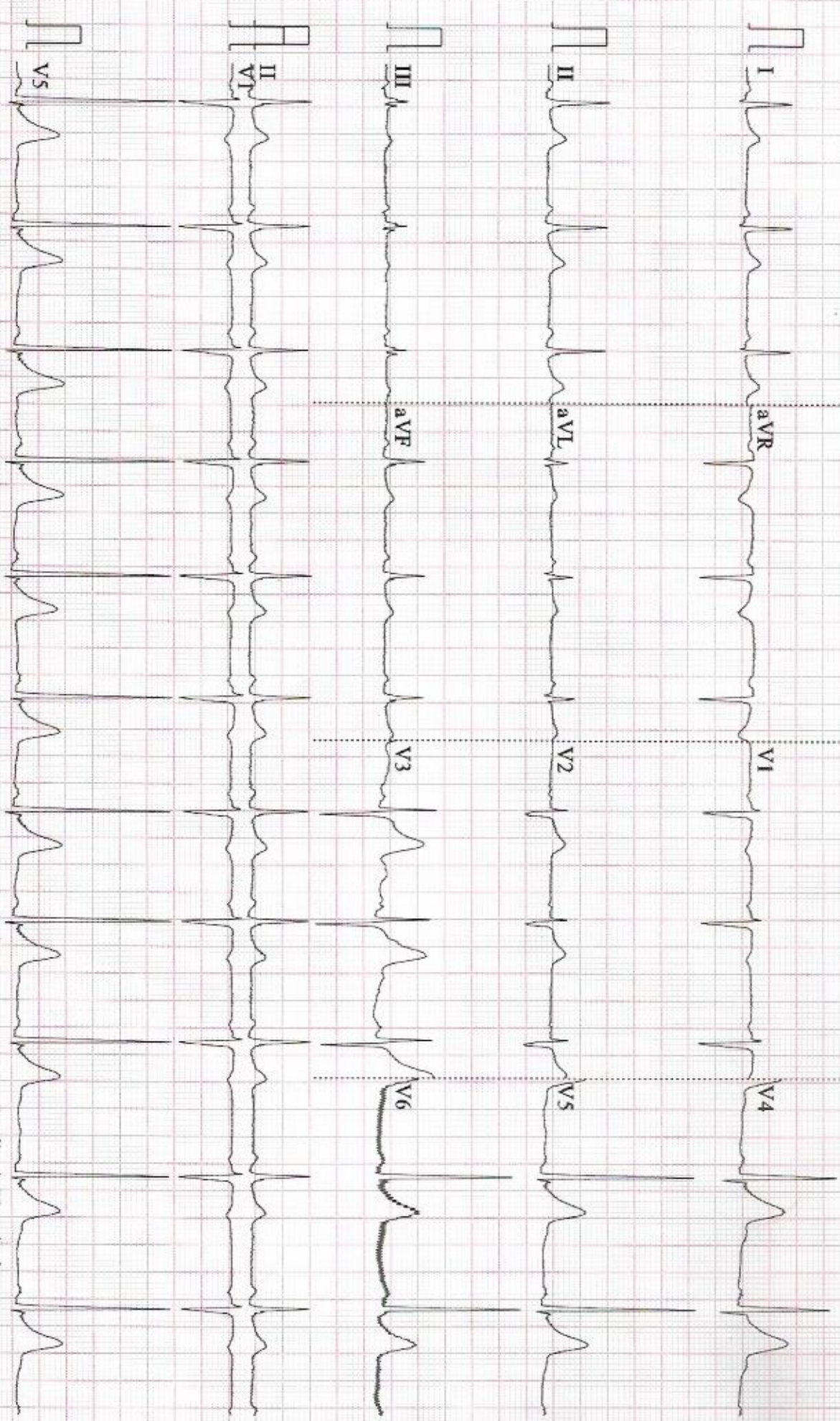
26-04-2024 15:19:57
HR : 67 bpm

Diagnosis Information:

Sinus rhythm
Normal ECG

P : 104 ms
PR : 140 ms
QRS : 90 ms
QT/QTc : 398/421 ms
P/QRS/T : 41/48/41 °
RV5/SV1 : 2.837/0.947 mV

Report Confirmed by:



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24040573 Receive: 26/04/2024 Print: 26/04/2024
Patient's Name : MD ASHFAKUR RAHMAN
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

Pre-Joining Medical Report to be

Date of Exam	Ship Assigned	B.P./Pulse	Pathological Investigations					
			X-ray	ECG	Urine	Blood	LFT	
26 AUG 2021	ONE HOSAN	ONE PUSC 120/80	~3pc2	~3pc2	~3pc2	~3pc2	~3pc2	
24 APR 2022	ONE WELSHIN	ONE PUSC 120/80	~3pc2	~3pc2	~3pc2	~3pc2	~3pc2	
26 APR 2024	ONE HELAND	ONE PUSC 120/80	~3pc2	~3pc2	~3pc2	~3pc2	~3pc2	

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Completed by Company's M.O.

Creatine	USG	Addl. Test	Special Conditions	Fit / Unfit & Remarks	Doctor's Sign.
				DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Borden), PGT (Opth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited	
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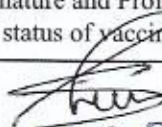
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INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION

MD ASHFAKUR RAHMAN AGAINST CHOLERA

This is to certify that } Date of birth 01-01-2001 Sex Male
whose signature follows }

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
1 26 AUG 2021	 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.		
2 24 APR 2022	 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.		
3 26 APR 2024	 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.		4
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