



HAQUE & SONS LTD.



Accredited By: BMDC Accreditation No. A 55144

> PATIENT CONTROL NUMBER: HS6080FF

Tel: +880-2-333316214-6, Fax: +880-2-333310530

RNAME	NO. A	FIRST NA	ME AND		MIDDLE NAM	IE.	
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	.ITY: BANGLADESHI SEX:	Male Male	☐ Female	VESSEL TY	PE : BULK CARRIER TI	RADING AREA: WOF	RLD WI
RMANE	NT HOME ADDRESS :				CONTACT NUMBER :	0088 01776-6	26164
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lave yo	ou ever had any of the following cor	iditions?				21	
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2	High blood pressure		7/	19 Do you s		i i	70
3	Heart/vascular disease		de	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		0	1
4	Heart surgery	0	1/		on/surgery		1
5		0	21	0.000 100000000000000000000000000000000	/seizures		1/
6	Varicose veins	0	7		s/fainting		1
7	Asthma/bronchitis	1.000	2/	A CONTRACTOR OF THE CONTRACTOR	consciousness	(1)	1%
	Blood disorder		71		tric problems	2/	1/
8	Diabetes		4	25 Depress	A Service and the service of the ser	1/0/1	1
9	Thyroid problem	0	2		ed suicide	115/21	11
10	Digestive disorder	0	N	27 Loss of		A Section of the sect	1
11	Kidney problem		41	LC-54V0 N-24V0-24V0-34V0-3	problem	////	1/
12	Skin problem		14		neadaches	1700	1/
13	Allergies		D		e/throat problems		1/
14	Infectious/contagious diseases		71		ed mobility		M
15	Hernia		7/	32 Back pro	oblems		N/
16	Genital disorders			33 Amputal	tion		N/
479	Desense						
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11					Name o	f Seafarer					Date
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Regical Hospitals Limited.

PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

THE REPUBLIC OF LIBERIA

CAST NAME OF A	APPLICANT		FIRST NAME		MIDDLE INITIAL
HASAN			MD		MAHMUDUL
DATE OF BIRTH			PLACE OF BIRTH		SEX
12	26	1991	NAOGAON	BANGLADESH	
MONTH	DAY	YEAR	CITY	COUNTRY	MALE FEMALE
EXAMINATION F	OR DUTY AS	S:	***	MAILING ADDRESS OF APPLIC	ANT:
MASTER		RATING		PADMA BHABAN, FLAT # B5,	UPOSHAHAR,
MATE		MOU DECK		BOGURA SADAR, BOGURA	
ENGINEER	W.	MOU ENGIN	е П		
RADIO OFF	П	SUPERNUME	ERARY	BANGLADESH.	
MEDICAL EXA	MINATION	(SEE PAGE	2) STATE DETAIL:	S ON PAGE 2	
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THIS IS TO CERT (ME) (SHE) IS FOR MOU ENGINE OF NAME AND DE ADDRESS R	UND TO BE (SUPERNUMI EGREE OF P	PHYSICAL EX FIT) (NOT FIT ERARY). HYSICIAN SPITALS LIMI	DR. MIR MD. I	GIVEN TO: MD. 1 N BOARD SHIP (NAME OF ARMASTER, MATE, ENGINEER, RAD RAIHAN; M.B.B.S.(D.U.), KIIDUM AVENUE, SECTOR-12, UTI	PPLICANT) NO OFFICER, RATING, MOU DECK, FARA, DHAKA-1230, BANGLADESH.
THIS IS TO CERT (ME) (SHE) IS FOR MOU ENGINE OF NAME AND DE ADDRESS R	UND TO BE (SUPERNUMI EGREE OF P EDICAL HOS	PHYSICAL EXPENSION OF THE PROPERTY IN THE PROP	DR. MIR MD. I	GIVEN TO: MD. 1 N BOARD SHIP (NAME OF ARMASTER, MATE, ENGINEER, RAD RAIHAN; M.B.B.S.(D.U.), KIIDUM AVENUE, SECTOR-12, UTI	MAHMUDUL HASAN PPLICANT) NO OFFICER, RATING, MOU DECK,

This certificate is issued by authority of the Deputy Commissioner of Maritime Affairs, R.L. and in compliance with the requirements of the Maritime Labour Convention, 2006 for the Medical Examination of Seafairers.

The Medical Certificate shall be valid for no more than two (2) years from the date of the Ex amination for those over 18 years of age and for no more than one (1) year for those under 18 years possible to the extension of the

RLM-I05M ANNEX 2

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

Rev0 - 09/01/2023

MEDICAL REQUIREMENT

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 12 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. Such proof of examination must establish that the applicant is in satisfactory physical 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 addition, the following minimum requirements shall apply:

- (a) All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in the better ear at 15 feet and in the poorer ear at 5 feet.
- Deck officer applicants must have (either with or without glasses) at least 20/20 vision in one eye and at least 20/40 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/160 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 20/30 vision in one eye and at least 20/50 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/200 in both eyes. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.
- (d) An applicant's blood pressure must fall within an average range, taking age into consideration.
- (e) 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.
- (f) Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (g) 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.
- (h) 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.

DETAILS OF MEDICAL EXAMINATION

(To be completed by examining physician)

1. COMPLETE PHYSICA	EXAMINATION INCLUDING HEARING TEST.
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2. PATHOLOGICAL EXAMINATION : A) Complete Blood Count., B) Blood Sugar Estimation,

C) Serological Test(VDR) D) Hepatitis B Sarface Antegen Test (HbsAg),

E) Urinlysis F) Drug Test G) Alcohol Test.

3. X - RAY EXR PA VIEW

4. E.C.G. TEST

5. EYE EXAMINATION FOR V/A & C/V

3 0 APR 2024

RLM-105M ANNEX 2



MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Rhylsici80/01/2023 Radical Hospitals Limited.

PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

LAST NAME OF A	APPLICANT		FIRST NAM	E		MIDDLE INITIAL
HASAN		MD			MAHMUDUL	
DATE OF BIRTH			PLACE OF I	SIRTH		SEX
12	26	1991	NAOGAON		NGLADESH	SEA
MONTH	DAY	YEAR	CITY			5
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MASTER	OKDOLLAS	Standards.	Г	_	G ADDRESS OF APPLIC	
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RADIO OFF		SUPERNUME			ADESII.	
MEDICAL EXA				TAILS ON PAG	E 2	
HEIGHT	WEIGHT	BLOOD PR	ESSURE	PULSE	RESPIRATION	GENERAL APPEARANCE
27hon	80/1	120/	Lalor	78m11	2aborn	asso
VISION:	RIC	OHT EYE	LEF	TEYE		
WITHOUT GLASS	SES	666	1 6	16		
WITH GLASSES			1			
DATE OF LAST C	OLOR VISIO	N TEST (Month	/Day/Year)	3 0 APR 2024	Testing Required	d every 6 years
COLOR VISION M	MEETS STAN	DARDS IN STO	W CODE, TA	BLE A-1/9?	YES	NO T
COLOR TEST TYPE	BOOK LAN	TERN CHECK	IF COLOR TES	T IS NORMAL	YELLOW R	GREEN BLUE
HEARING						
HEARING	RT. EAR	_2/	120	LE	FT YEAR	22
HEAD AND NECK		1200	2001	HEART (CAR	(DIOVASCULAR)	2
LUNGS	1	0140	au .	EBEEGII (DE		romme
LUNGS	n	900	111			FICER AND RADIO OFFICER) IAL VOICE COMMUNICATION
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OR LIKELY TO ET	NDANGER T	HE HEALTH O	F OTHER PER	SONS ON BOAR	D' JE YES, EXPLAIN IN	DETAILS OF MEDICAL
	185	3		3	0 APR 2024	2 9 APR 2026
SIGNA	TURE OF AF	PLICANT		DATE OF	FEXAM	EXPIRY DATE
т	HIS SIGNAT	URE SHOULD	BE AFFIXED	IN THE PRESENCE	CE OF THE EXAMINING	PHYSICIAN.
THIS IS TO CERTI	IFY THAT A	PHYSICAL EX	AMINATION	WAS GIVEN TO.	MD. M	MAHMUDUL HASAN
				ON BOARD	SHID (NAME OF AP	PLICANT)
(HE) (SHE) IS FOU MOU ENGINE or S		(NOT FIT)				O OFFICER, RATING, MOU DECK,
NAME AND DE	GREE OF P	HYSICIAN	DR. MIR N	MD. RAIHAN;	M.B.B.S.(D.U.),	
ADDRESS RI	EDICAL HOS	PITALS LIMIT	ED, 35, SHAR	MAKHDUM AV	ENUE, SECTOR-12, UTT	ARA, DHAKA-1230, BANGLADESH.
NAME OF PHYS	SICIAN'S CE	ERTIFICATIN	GAUTHORI	TY REGISTRA	TION NO.: A-55144, I	B.M.D.C, DHAKA, BANGLADES
DATE OF ISSUE	OF PHYSIC	CIAN'S CERT	HICATE	→ 6-May-14		
			_			

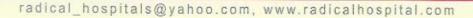
This certificate is issued by authority of the Deputy Commissioner of Maritime Affairs, R.L. and in compliance with the requirements of the Maritime Labour Convention, 2006 for the Medical Examination of Seafarers.

The Medical Certificate shall be valid for no more than two (2) years from the date of the Examination for those over 18 years of age and

RLM-I05M ANNEX 2 MBBS IDUI. DFM. CCD (Birdem), PGT (Ophth) I
BMDC A-55144, MMC-BGD-016

Rev0 - 09/01/2023

DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited





ID NO : 24040667

Patient's Name: MD MAHMUDUL HASAN

Specimen : Blood

Ref. By

: DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/6080

Sex : Male

30/04/2024

32Y 4M 4D

Date :

Age :

(Relevent estimations were carried out by KT-44 Haematology Analyzer with checked manually) HAEMATOLOGY REPORT

"XEIGHING			The second second second	
Parameter	R	esults	Reference Values	Histogram
Haemoglobin(Hb)	13.2	g/dl	M:12-16, F:10-14.0 g/dl	4
ESR(Westergren)	08	mm/1st hr	M:0-10, F:0-20 mm/1st hr	
TOTAL WBC COUNT	6,600	/cumm	4,000 - 11,000 /cumm	4. 4
DIFFERENTIAL COUNT				
Neutrophils	58	%	(40 - 75)%	
Lymphocytes	34	%	(20-45)%	WBC CURVE
Monocytes	05	%	(2-10)%	
Eosinophils	03	%	(1-6)%	T 4.
Basophil	00	%	0-1 %	
TOTAL CIR. EOSIONOPHIL COUNT	198	/cumm	40 - 450 /cumm	MA.
TOTAL PLATELET COUNT(PC)	162,000	/cumm	1,50,000-4,50,000 /cumm	
MPV	13.4	fL	7.0 -11.0 fL	ARIEN.
PDW-CV	18.2	%	10 - 18 %	PLT CURVE
PCT	0.18	%	0.10 - 0.28	PLI CORVE
P-LCR	49.2	%	9.00 - 45.00%	A
P-LCC	65	x10^3/uL	13 - 129 x10^3/uL	A
RBC COUNT	4.82	m/ul	M: 4.5-6.5, F: 3.8-5.8 m/ul	
HCT/PCV	42.2	%	M: 40-54%, F: 37-47%	
MCV	87.6	fL	76-94 fL	
MCH	27.4	pq.	27-32 pg	DDG GUDU
MCHC	31.3	g/dL	29-34 g/dL	RBC CURVE
RDW SD	50	fL	30.0-57.0 fL	
RDW CV	16.8	%	10-16%	

Checked By... Medical Technologist. Redical Hospital Ltd. Uttara, Dhaka.



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



Bill No	DIA24040667	Receive	d Date	30/04/2	2024
Patient's Name	MD MAHMUDUL HASAN				
Patient's Age	32Y 4M 4D		Patient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRD	DEM),PGT(Eye),DFM	1 C	DC NO	C/O/6080
Sample	BLOOD				

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.5 mmol/L	4.2 – 6.4 mmol/L
Serum Bilirubin (Total)	0.50 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	22.0 U/L	Up to 37 U/L
HbA1C	5.0 %	4.0-6.0 %

RADICAL

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	DIA24040667	Receive	Received Date 30/04/20		2024
Patient's Name	MD MAHMUDUL HASAN				
Patient's Age	32Y 4M 4D	32Y 4M 4D Pa		s Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),Co	CD(BIRDEM),PGT(Eye),DFM	и с	DC NO	C/O/6080
Sample	BLOOD				4

SEROLOGICAL REPORT

Test Name Result

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



Checked By

Medical Technologist. Radical Hospital Ltd. or Sumaiya Kh

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



Bill No	DIA24040667	Received Date	30/04/2	2024
Patient's Name	MD MAHMUDUL HASAN			
Patient's Age	32Y 4M 4D	Patier	nt's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/6080
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
	I mar	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. FORTIS AUSTRALIS

DATE: 30/04/2024

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

EYE EXAMINATION REPORT

NAME: MD MAHMUDUL HASAN RANK: 1A/ENG CDC NO: C/O/6080

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

666

666

AIDED

COLOUR VISION:

NORMAL / BLIND

OPINION

UNFITS / FIT FOR EMPLOYMENT ON BOARD

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

Radical Hospital		Glasgow V28.6.0		SE-1200Express V2.21	SE-12001		2.5s+3r	10mm/mV 4*2.5s+3r \\ \psi 90	-	C50 25mm/s	0.67~100Hz AC50	0.67~
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RADICAL HOSPITAL

radical_hospitals@yahoo.com, www.radicalhospital.com

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24040667 Receive:30/04/2024 Print: 30/04/2024

Patient's Name : MD MAHMUDUL HASAN

Age : 32 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

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that whose signature follows

Date of birth 26-DFQ-1991 Sex MALE

MD. MAHMUDUL HAZAN (C/0/6080)

has on the date indicated been vaccinated or revaccinated against Cholera

ate	Signature and Professional status of vaccinator	20 V4	Approved	l Stamp
NA OFFI	DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician	Uttera, Che	10 X	
2 R	DR. MHR. MD. RAIFIA MBBS (DU), DFM, CCD (Birdem), PGT (Opt BMDC A-55144, MMC-BGD-01 DG Shipp.ng Bangladesh Approv General Physician Radical Hospitals Limited.	6 13 A	VACCIAL Makhdum Quenue se, Dhoko dr	
Agra			3	4
		in it	THE STATE OF	po sin nyominekajeko
		Ven Commons	5	MCI WILLIAM SUBSECTION 6
			7	8

Continued overleaf Suite our erso

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that whose signature follows

Date of birth 26-DEC-1991 Sex MALE

MD. MAHMUDUL HASAN (C/0/6080)

has on the date indicated been vaccinated or revaccinated against yellow-fever

Date	Signature and Professional status of vaccinator	Origin and batch no, of vaccine	Official stamp of vaccination centre
1 MAPE	DR. AAR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician Radical Hospitals Limited.	L NO PO	S Shah Makhdum Aventuo Uttern, Dhalan
3	A STATE AND THE MINISTER AND ADDRESS AND A	La L	3 4
4	DR MIN MD RAIHAN	1 (September) 2 American (American) 2 American (American) 4	1 1

This certificate is valid on only if the vaccine used has been approved by the World Health Organization and if the vaccinating centre has been designated by the 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 ten days after date vaccination or in the extent of a revaccination within such period of ten years, from the date of that revaccination.

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