

**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 : BMDC
Accreditation No. A 55144PATIENT CONTROL NUMBER
H823**MEDICAL EXAMINATION CERTIFICATE**

SURNAME ISLAM		FIRST NAME AND MD SHARIFUL		MIDDLE NAME
PLACE AND DATE OF BIRTH SIRAJGANJ 16-Feb-1991		PASSPORT NUMBER A07844589		SEAMAN'S BOOK NUMBER C/O/6321
NATIONALITY : BANGLADESHI	SEX : ☒ Male ☐ Female	VESSEL TYPE : BULK CARRIER		TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : VILL: MASUMPUR (NATUN PARA), PO-SIRAJGANJ, PS-SIRAJGANJ, DIST-SIRAJGANJ, BANGLADESH			CONTACT NUMBER : +88 01745371317 (SELF)	
			RANK : 2ND 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

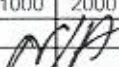
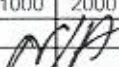
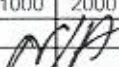
42 Are you taking any non-prescription or prescription medications?	☐	☒
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If yes, please list the medications taken and the purpose(s) and dosage(s)

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.


Signature of Seafarer

MEDICAL EXAMINATION

Weight 68kg	Height (cm) 168	Blood Pressure: Systolic 110mm Diastolic 70mm	PULSE: 78/min																												
<table border="1"> <thead> <tr> <th colspan="2">Hearing by Audiometry</th> <th colspan="4">Audiometry</th> <th colspan="2">Hearing by Whisper Test</th> </tr> <tr> <th></th> <th></th> <th>500</th> <th>1000</th> <th>2000</th> <th>3000</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Right</td> <td>☐ Adequate ☐ Inadequate</td> <td colspan="4" rowspan="2"></td> <td>☒ Adequate</td> <td>☐ Inadequate</td> </tr> <tr> <td>Left</td> <td>☐ Adequate ☐ Inadequate</td> <td>☒ Adequate</td> <td>☐ Inadequate</td> </tr> </tbody> </table>				Hearing by Audiometry		Audiometry				Hearing by Whisper Test				500	1000	2000	3000			Right	☐ Adequate ☐ Inadequate					☒ Adequate	☐ Inadequate	Left	☐ Adequate ☐ Inadequate	☒ Adequate	☐ Inadequate
Hearing by Audiometry		Audiometry				Hearing by Whisper Test																									
		500	1000	2000	3000																										
Right	☐ Adequate ☐ Inadequate					☒ Adequate	☐ Inadequate																								
Left	☐ Adequate ☐ Inadequate					☒ 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: ☒ YES / NO ☐ Doubtful ☐ Defective

Colour vision as per STCW CODE Section A-1/9: ☒ Normal ☐ Defective

Date of last colour vision test: Date (day/month/year) **04 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	MD	BIO CHEMICAL (LIVER FUNCTION TEST)	Marijuana	☐ Positive ☒ Negative
ECG	MD	BILIRUBIN	Alcohol Test	☐ Positive ☒ Negative
BLOOD R/E		SGPT	URINE R/E	MD
DC (differential count)	MD	SGOT	OTHERS	
HAEMOGLOBIN (HGB)	13.3	DRUG AND ALCOHOL TEST		HBsAg
ESR (WESTERGREN)	29	Morphine	☐ Positive ☒ Negative	HIV / AIDS Test
WBC	8900	Amphetamine	☐ Positive ☒ Negative	VDRL
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive ☒ Negative	Blood Type
RANDOM	5.2	Barbiturates	☐ Positive ☒ Negative	Psychological Exam
HBA1C	5.0%	Cocaine	☐ Positive ☒ Negative	Others (KUB Ultrasound)

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

MD	MD SHARIFUL ISLAM	4-Apr-2024
Signature of Seafarer	Name of Seafarer	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
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 ☐
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Describe restrictions (e.g., specific position, type of ship, trade area):

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

Fitness Date: 04 APR 2024	Valid Until: 03 APR 2026
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Name and Signature of Authorized Physician

MBBS (DU), DPM, CCD (BIRM), PGD (IPAH)

In Accordance with Medical Examination (Seafarers) Convention 1948 (No. 78) and STCW 1978/1996 as Amended, MLC 2006



MARITIME AND PORT AUTHORITY OF SINGAPORE

ANNEX C

SEAFARER'S MEDICAL CERTIFICATE

This certificate is issued by the undersigned recognized medical practitioner to the named seafarer on behalf of the **Maritime and Port Authority of Singapore** and meets both the requirements of the International Convention on Standards of Trainings, Certification and Watchkeeping for Seafarers, 1978, as amended (STCW Convention) and the Maritime Labour Convention, 2006.

Seafarer's Name : (Last, first, middle)		Gender:
ISLAM MD SHARIFUL		Male/ Female *
Date of Birth: (Day/month/year)	Nationality:	Place of Birth:
16-Feb-1991	BANGLADESHI	SIRAJGANJ

Declaration of the recognized medical practitioner:

		Yes	No
1	Identification documents were checked at the point of examination?	☒	☐
2	Hearing meets the standards in STCW Code Section A-I/9?	☒	☐
3	Unaided hearing satisfactory?	☒	☐
4	Visual acuity meets the standards in STCW Code Section A-I/9?	☒	☐
5	Colour vision meets the standards in STCW Code Section A-I/9?	☒	☐
	Date of last colour vision test:	04 APR 2024	
6	Fit for look-out duty?	☒	☐
7	Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or endanger the life of person onboard?	☒	☐
8	No limitations or restrictions on fitness?	☒	☐
	If "no" specify limitations or restrictions		
9	Date of examination: (day/month/year)	04 APR 2024	
10	Expiry of certificate: (day/month/year) ** Maximum two years from date of examination unless the seafarer is under the age of 18	03 APR 2026	

04 APR 2024

Date

Signature of Authorised
Medical Practitioner

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

Medical Practitioner's Official stamp
(name, licence number, address etc)

I have been informed of the content of the certificate and of the right to a review.

Signature of Seafarer

* delete as appropriate



**MARITIME AND PORT AUTHORITY OF SINGAPORE
SHIPPING DIVISION**

RECORD OF MEDICAL EXAMINATIONS OF SEAFARER

Part A – to be completed by the Seafarer who is responsible for answering each question accurately.

Seafarer's Name : (Last, first, middle) (BLOCK CAPITALS) ISLAM MD SHARIFUL		Gender: Male/ Female *
Date of Birth: day/month/year 16-Feb-1991	Place of Birth: SIRAJGANJ	Nationality: BANGLADESHI
Type of ID documents: NRIC No. / Passport No.: A07844589	Dept: Deck / Engine / Catering / others Rank: 2ND ENGINEER	Type of ship: CHEM/OIL TANKER
Home Address: VILL. MASUMPUR (NATUN PARA), PO-SIRAJGANJ, PS-SIRAJGANJ, DIST-SIRAJGANJ, BANGLADESH	Routine and emergency duties: BOTH	Trading area: e.g coastal / world wide

Seafarer's Declarations (please tick)

Have you ever had any of the following conditions?

	Yes	No		Yes	No
1. Eye/vision problem		/	18. Sleep problem		/
2. High blood pressure		/	19. Do you smoke, use alcohol or drugs?		/
3. Heart/vascular disease		/	20. Operation/surgery		/
4. Heart Surgery		/	21. Epilepsy/seizures		/
5. Varicose veins/piles		/	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/hearing, tinnitus/nose/throat problem		/
14. Infectious / contagious diseases		/	31. Restricted mobility		/
15. Hernia		/	32. Back or joint problem		/
16. Genital disorder		/	33. Amputation		/
17. Pregnancy		NM	34. Fracture/dislocations		/

If you answer "yes" to any of the above questions, please provide details:

Additional questions

	Yes	No
35. Have you ever been signed off as sick or repatriated from a ship?		/
36. Have you ever been hospitalized?		/

37. Have you ever been declared unfit for sea duty?		
38. Has your medical certificate even 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 medication?		
42. Are you using any non-prescription or prescription medication?		

If you answer "yes", please list the medications taken, the purpose(s) and the dosage:

I hereby declare that the personal declaration above is a true statement to the best of my knowledge.

04 APR 2024

Date

[Signature]

Signature of Seafarer

[Signature]

Name and Signature of Witness

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

I hereby authorize the release of all my previous medical records (including my last Seafarer Medical Certificate) from any health professional, health institutions and public authorities to Dr.

DR. MIR. MD. RAIHAN.

04 APR 2024

Date

[Signature]

Signature of Seafarer

[Signature]

Name and Signature of Witness

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



Part B – Result of medical examinations

Eyesight

Use of glasses or contact lenses

☐ No

☒ Yes Type Purpose

Visual Acuity

Unaided			Aided		
Right eye	Left eye	Binocular	Right eye	Left eye	Binocular
Distant			Distant	6/6	6/6
Near			Near	15	15

Visual fields

	Normal	Defective
Right eye	/	
Left eye	/	

Colour Vision (please tick)

☐ Not tested ☒ Normal ☐ Doubtful ☐ Defective

Hearing

Pure tone and audiometry (threshold values in dB)				
	500 Hz	1,000 Hz	2,000 Hz	3,000 Hz
Right ear	20	20	20	
Left ear	20	20	20	

Speech and whisper test (metres)

	Normal	Whisper
Right ear	4	4
Left ear	4	4

Clinical Findings

Height	168 (cm)	Weight	68 (kg)
Pulse rate	(per minute) 78	Rhythm	Regular
Blood Pressure Systolic (mm Hg)	110	Diastolic (mm Hg)	70
Urinalysis: Glucose	nil	Protein	nil
		Blood	nil

	Normal	Abnormal
Head	/	
Sinus, nose, throat	/	
Mouth/teeth	/	



Ears (general)	/	
Tympanic membrane	/	
Eyes	/	
Ophthalmoscopy	/	
Pupils	/	
Eye movement	/	
Lungs and chest	/	
Breast examination	N/A	
Heart	/	
Skin	/	
Varicose Vein	/	
Vascular (inc. pedal pulse)	/	
Abdomen and viscera	/	
Hernia	/	
Anus (not rectal exam)	/	
G-U system	/	
Upper and lower extremities	/	
Spine (C/s, T/S, L/S)	/	
Neurologic (full/brief)	/	
Psychiatric	/	
General appearance	/	

Chest X-ray

☐ Not performed

☒ Performed on (day/month/year): 04 APR 2024

Results: Normal

Other diagnostic test(s) and result(s):

Test: ECG

Results: Normal

Medical practitioner's comments and assessment of fitness, with reasons for any limitations.

FIT FOR DUTY ON BOARD SHIP

Assessment of fitness for service at sea (please tick)

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

☒ Fit for look out duty

☐ Unfit for lookout duty

☒ Visual aid required

☐ Visual aid not required

	Deck Service	Engine Service	Catering Service	Other Service
Fit	/	/		
Unfit				





Without restrictions



With restrictions

Description of restrictions (e.g. specific position, type of ship, trading area etc.)

04 APR 2024

Date



Signature of
Medical Practitioner

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

Medical Practitioner's name, licence number, address



Bill No	DIA24040091	Received Date	04/04/2024
Patient's Name	MD SHARIFUL ISLAM		
Patient's Age	33Y 1M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO
Sample	BLOOD		C/O/ 6321

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Fasting Blood Sugar (FBS)	5.2 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.55 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	25.0 U/L	Up to 40 U/L
Serum AST (SGOT)	19.0 U/L	Up to 37 U/L
Serum Alkaline Phosphate	153 U/L	98 - 279 U/L
Serum (BUN)	20 mg/dl	7- 23 mg/dl
GGT	38 U/L	Adult Male : <55
Total Protein	7.1 g/dl	6.3-7.9 g/dl
Serum HDL- Cholesterol	44 mg/dl	>35 mg/dl
Serum LDL- Cholesterol	82 mg/dl	<130 mg/dl
Albumin	4.0	3.4-5.4 g/dL
HbA1C	5.0 %	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.

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

Bill No	DIA24040091	Received Date	04/04/2024
Patient's Name	MD SHARIFUL ISLAM		
Patient's Age	33Y 1M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 6321
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.

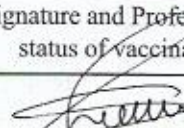
Dr. Sumaiya Khatun
MBBS, MD (Microbiology)
Associate Professor
Dept. of Microbiology
East West Medical College and Hospital.

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that
whose signature follows

Date of birth 16-FEB-1991 Sex MALE
MD. SHARIFUL ISLAM (C/O/6324)

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
10 OCT 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			
3			3 4
4			

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.

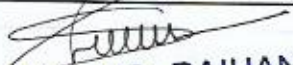
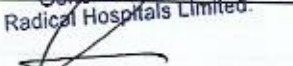
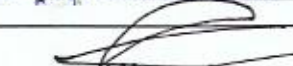
INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that
whose signature follows

Date of birth 16-FEB-1991 Sex MALE

MD. SHARIFUL ISLAM (C/196321)

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
1 10 OCT 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 03 JUL 2023	 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 04 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
5		5	6
6			
7		7	8
8			

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ID NO : 24040091

Date : 04/04/2024

Patient's Name : MD SHARIFUL ISLAM

Age : 33Y 1M 19D

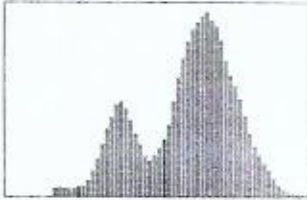
Ref. By : DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/ 6321

Sex : Male

Specimen : Blood

(Relevant estimations were carried out by KT-4 Haematology Analyzer with checked manually)

HAEMATOLOGY REPORT

Parameter	Results	Reference Values	Histogram
Haemoglobin(Hb)	13.3 g/dl	M:12-16, F:10-14.0 g/dl	
ESR(Westergren)	09 mm/1st hr	M:0-10, F:0-20 mm/1st hr	
TOTAL WBC COUNT	8,900 /cumm	4,000 - 11,000 /cumm	
DIFFERENTIAL COUNT			
Neutrophils	71 %	(40 - 75)%	
Lymphocytes	21 %	(20-45)%	
Monocytes	05 %	(2-10)%	
Eosinophils	03 %	(1-6)%	
Basophil	00 %	0-1 %	
TOTAL CIR. EOSINOPHIL COUNT	267 /cumm	40 - 450 /cumm	
TOTAL PLATELET COUNT(PC)	216,000 /cumm	1,50,000-4,50,000 /cumm	
MPV	13.7 fL	7.0 -11.0 fL	
PDW-CV	17.4 %	10 - 18 %	
PCT	0.3 %	0.10 - 0.28	
P-LCR	49.9 %	9.00 - 45.00%	
P-LCC	108 x10 ³ /uL	13 - 129 x10 ³ /uL	
RBC COUNT	5.37 m/uL	M: 4.5-6.5, F: 3.8-5.8 m/uL	
HCT/PCV	45.1 %	M: 40-54%, F: 37-47%	
MCV	83.9 fL	76-94 fL	
MCH	24.8 pg	27-32 pg	
MCHC	29.5 g/dL	29-34 g/dL	
RDW SD	52 fL	30.0-57.0 fL	
RDW CV	18.1 %	10-16%	

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

Dr. S.M.Shariar Rizvi
MBBS,MD(BSMMU)
Consultant
Dept Of Microbiology
Radical Hospital Ltd.

Bill No	DIA24040091	Received Date	04/04/2024
Patient's Name	MD SHARIFUL ISLAM		
Patient's Age	33Y 1M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 6321
Sample	BLOOD		

SEROLOGICAL REPORT

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

BLOOD GROUPING RESULT	
ABO Blood Group	"O" (+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	DIA24040091	Received Date	04/04/2024
Patient's Name	MD SHARIFUL ISLAM		
Patient's Age	33Y 1M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 6321
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	Straw	RBC	Nil
Appearance	Clear	Pus Cells	0-1/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.

Bill No	DIA24040091	Received Date	04/04/2024
Patient's Name	MD SHARIFUL ISLAM		
Patient's Age	33Y 1M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 6321
Sample	STOOL		

STOOL ANALYSIS

Physical Examination:

Color : Brown
Consistency : Soft
Worm : Nil
Mucus : Nil
Blood : Nil

Chemical Examination:

Reaction : Acid
Occult Blood Test (OBT) : Not done
Reducing Substance (RS) : Not done

Microscopic Examination:

Ova	: Not found	Mucus flakes	: Nil
Cyst	: Not found	Cyst of Giardia	: Not found
Protozoa (Trophozoite)	: Not found	Macrophage	: Not found
Larva	: Not found	Fat Globules	: (+)
Epithelial Cell	: Nil	Vegetable Cell	: Nil
Pus Cell	: 0-1	Starch	: (+)
RBC	: Nil	Muscle fibre	: Nil

Checked By

Medical Technologist,
Radical Hospital Ltd.


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

Patient's Name	: MD SHARIFUL ISLAM	ID NO	: 24040091
Age	: 33 Yrs	Date	: 04/04/2024
Sex	: Male		
Referred by	: Dr. Mir Md. Raihan MBBS,(DU), DFM		
Nature of Specimen	:		

PULMONARY FUNCTION TEST (SPIROMETRY)

FVC = 6
 FEV = 5
 FEV/FVC = 80%

Comments: Normal Lung Function



Dr. Mir Md. Raihan

MBBS (DU) CCD(Birdem),PGT (ophth)
 Reg- A55144 BGD-016(MMC)
 DG Shipping Bangladesh Approved
 Malaysian Medical Council Approved
 General Physician
 Radical Hospitals Limited

REF: MT. STRATEGIC SYNERGY

DATE: 04/04/2024

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

EYE EXAMINATION REPORT

NAME: MD SHARIFUL ISLAM

RANK: 2ND ENG

CDC NO: C/O/6321

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

AIDED

6/6 6/6

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

04-04-2024 14:24:28

Male
33 Years*Mr. Smith*

HR : 61 bpm

P : 86 ms

PR : 152 ms

QRS : 82 ms

QT/QTc : 376/379 ms

P/QRS/T : 23/64/36 °

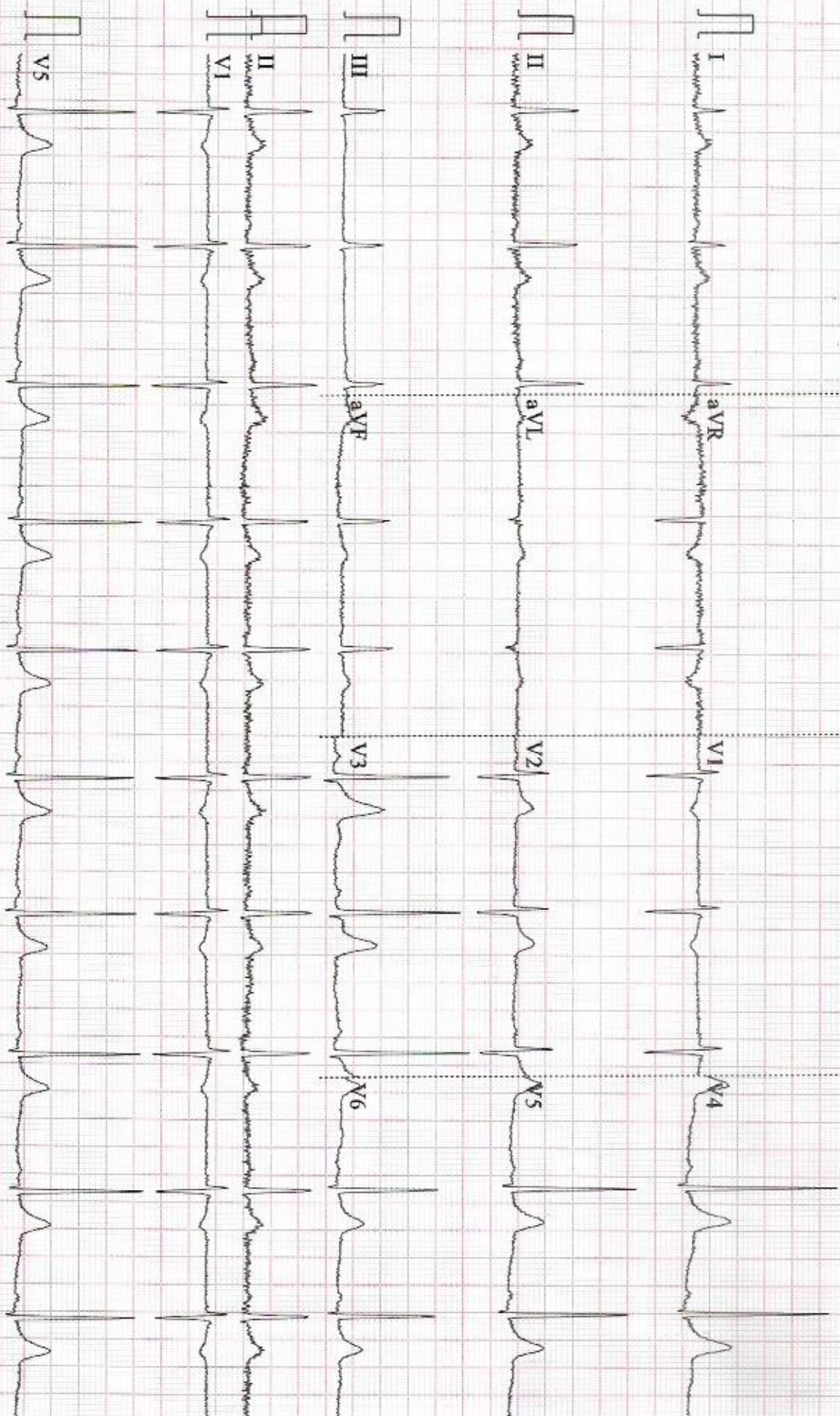
RV5/SV1 : 2.178/0.962 mV

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



0.67~100Hz AC50 25mm/s

10mm/mV

4*2.5s+3r

61

SE-1200Express V2.21

Glasgow V28.6.0

Radical Hospital

AUDIOLOGICAL REPORT

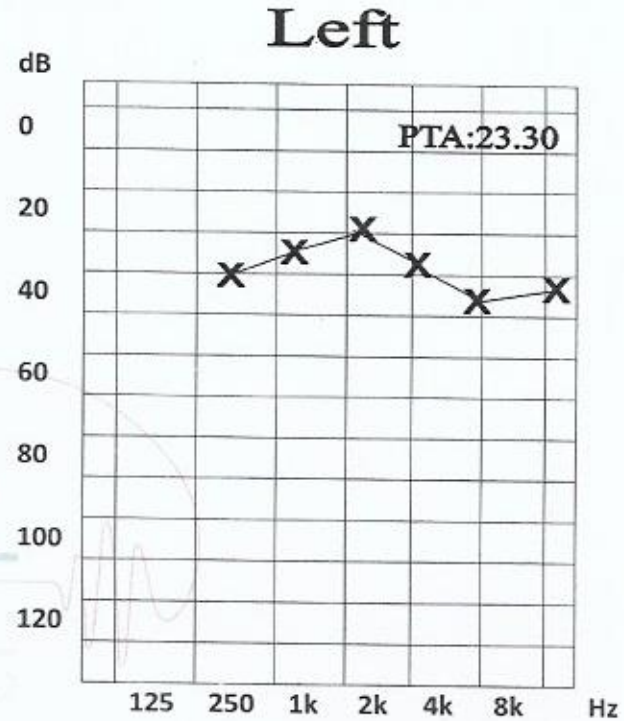
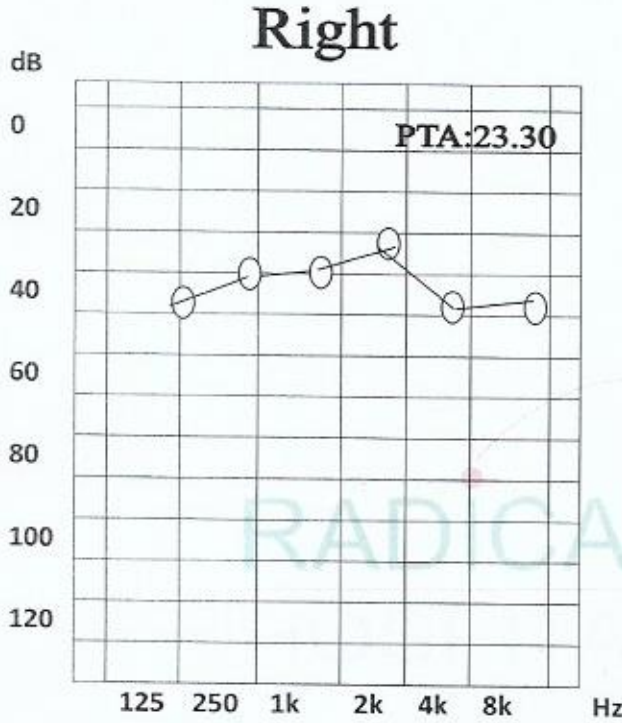
Patient Name : MD SHARIFUL ISLAM

04/04/2024

Age : 33 Yrs

Address : RHL, UTTARA

Referred By : Dr. Mir Md. Raihan, MBBS,(DU), DFM



0-25= Normal Hearing.
26-40= Mild Hearing Loss.
41-55= Moderate Hearing Loss.
56-70= Moderately Severe Hearing Loss.
71-90= Severe Hearing Loss.
91-120= Profound Hearing Loss.

	Right Ear	Left Ear
Air Unmasking OX		
Bone Unmasking		
Air Masking OX		
Bone Masking ΔΔ		

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24040091 Receive: 04/04/2024 Print: 04/04/2024
Patient's Name : MD SHARIFUL ISLAM
Age : 33 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

This report has been electronically signed.

Page of 1

Patient's Name	: MD SHARIFUL ISLAM	Date	: 04/04/2024
Age	: 33 Yrs	CDC NO:	C/O/6321
Sex	: Male		
Referred by	: Dr. Mir Md. Raihan - MBBS, (DU), DFM		

Psychometric Test

Test Name	Remarks
1.APTITUDE TEST	
Numerical Reasoning test	Poor /Good /very good /excellent
Verbal Reasoning test	Poor /Good /very good /excellent
Inductive reasoning test	Poor /Good /very good /excellent
Diagrammatic Reasoning test	Poor /Good /very good /excellent
Logical Reasoning test.	Poor /Good /very good /excellent
Error checking test	Poor /Good /very good /excellent
2.Skill Test	Poor /Good /very good /excellent
3.Personality Test	INFJ / ENFJ / ISFJ / ENTP/ ESFJ /ESFP
4.Watson Glaser test(Critical Thinking Test)	
Arguments	Poor /Good /very good /excellent
Assumptions	Poor /Good /very good /excellent
Deductions	Poor /Good /very good /excellent
Interpreting Information's	Poor /Good /very good /excellent
Inferences	Poor /Good /very good /excellent
5.Situational Judgment Test.	Poor /Good /very good /excellent

Poor: <6

Good: 6-7

very good: 7-8

excellent: 8-10

COMMENTS: HE IS MENTALLY FIT FOR SHIP JOB

Dr. Mir Md. Raihan

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

Reg- A55144 BGD-016(MMC)

DG Shipping Bangladesh Approved

Malaysian Medical Council Approved

General Physician

Radical Hospitals Limited

Patient's Name	:	MD SHARIFUL ISLAM	ID NO	:	24040091
Age	:	33 Yrs	Date	:	04/04/2024
Sex	:	Male			
Referred by	:	Dr. Mir Md. Raihan MBBS,(DU),CCD (BIRDEM),PGT(Eye),DFM			

Dental Examination Reports

On Examination

1. Dental Caries : Absent
2. Calculus : Absent
3. Missing : Absent
4. Gum Condition : Normal
5. Filling : No
6. Root Canal Treatment : No
7. Any Bridge/Denture/Crown : No
8. Oral Hygiene : Normal

Comments : Normal



Dr. Mir Md. Raihan

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DG Shipping Bangladesh Approved
Malaysian Medical Council Approved
General Physician
Radical Hospitals Limited

Patient ID	24040091	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	04/04/2024
Patient Name	MD SHARIFUL ISLAM		
Age	33 YRS	Sex	Male
Refd. By	DR. MIR MD. RAIHAN MBBS,(DU),DFM		

THANK YOU FOR THE COURTESY OF THIS REFERRAL

LIVER :- Is normal in size 13.5cm shape and position. The echogenicity of the parenchyma is normal. Intrahepatic biliary channel are not dilated. No focal lesion is seen.

GALL BLADDER :- Normal size regular in shape. **Lumen is normal.**
 Wall thickens is normal.

CBD & Intrahepatic biliary trees are not dilated. Diameter of CBD is normal.

PANCREASE :- Is normal in size margin are regular parenchyma show normal echo-texture
 pancreatic duct is not dilated. No focal area of altered echogenicity or calcification is seen.

SPLEEN :- Is normal in size and shape uniform in echo-texture.

BOTH KIDNEYS :- Are normal in size. RK-10.2cm, LK-10.8cm The cortical echogenicity are normal with clear cortico-medullary differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness. P-C systems are not dilated.

URINARY BLADDER : Is well filled. Wall thickness is within normal limit. No intravesicle lesion is seen
Prostate: Normal size regular in shape. Echogenicity is homogenous.

COMMENT: Normal Study.

Sonologist


Dr. Asma Ahmed
 MBBS,CMU,DMU
 PGT(Gynae & obs)
 Advanced Training in TVS