

**HAQUE & SONS LTD.**

Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh.

Tel : +880 31 716214-6, Fax : +880 31 710530

Accredited By : BMDC
Accreditation No. A 55144PATIENT CONTROL NUMBER:
HSL-002855**MEDICAL EXAMINATION CERTIFICATE**

SURNAME CHOWDHURI		FIRST NAME SHAKIL		MIDDLE NAME	
PLACE AND DATE OF BIRTH BOGURA 17-Dec-1998		PASSPORT NUMBER EG0963740		SEAMAN'S BOOK NUMBER CO10858	
NATIONALITY : BANGLADESHI		SEX : ☒ Male ☐ Female	VESSEL TYPE : CHEM. TANKER		TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : VILL. BHAGSHIMLA, PO. VATRA, PS. NANDIGRAM, DIST. BOGURA, BANGLADESH				CONTACT NUMBER : 8801866747499	
				RANK :	APOFS

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?	☐	☒
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 74kg	Height (cm) 170	Blood Pressure: Systolic 100mm Diastolic 70mm	PULSE: 80b/min																																
<table border="1"><thead><tr><th colspan="2">Ear</th><th colspan="4">Audiometry</th><th colspan="2">Hearing by Whisper Test</th></tr><tr><th></th><th>Hearing by Audiometry</th><th>500</th><th>1000</th><th>2000</th><th>3000</th><th>☐ Adequate ☐ Inadequate</th><th>☐ Adequate ☐ Inadequate</th></tr></thead><tbody><tr><td>Right</td><td>☐ Adequate ☐ Inadequate</td><td></td><td></td><td></td><td></td><td>☒ Adequate ☐ Inadequate</td><td>☒ Adequate ☐ Inadequate</td></tr><tr><td>Left</td><td>☐ Adequate ☐ Inadequate</td><td></td><td></td><td></td><td></td><td>☒ Adequate ☐ Inadequate</td><td>☒ Adequate ☐ Inadequate</td></tr></tbody></table>				Ear		Audiometry				Hearing by Whisper Test			Hearing by Audiometry	500	1000	2000	3000	☐ Adequate ☐ Inadequate	☐ Adequate ☐ Inadequate	Right	☐ Adequate ☐ Inadequate					☒ Adequate ☐ Inadequate	☒ Adequate ☐ Inadequate	Left	☐ Adequate ☐ Inadequate					☒ Adequate ☐ Inadequate	☒ Adequate ☐ Inadequate
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Left	☐ Adequate ☐ Inadequate					☒ Adequate ☐ Inadequate	☒ Adequate ☐ Inadequate																												
Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☒ NO ☐																																			

	Visual acuity			
	Unaided		Aided	
	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

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

03 APR 2024

	Visual fields	
	Normal	Defective
	Right eye	Left eye
Right eye	☒	☒
Left eye	☒	☒

YES / NO

☐ Doubtful☐ Defective

	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

RESULTS OF ANCILLARY EXAMINATIONS		BIO CHEMICAL (LIVER FUNCTION TEST)		Marijuana	☐ Positive ☒ Negative
Chest X-Ray	<i>10/2</i>	BILIRUBIN	<i>0.57</i>	Alcohol Test	☐ Positive ☒ Negative
ECG	<i>10/2</i>	SGPT	<i>25</i>	URINE R/E	<i>ms</i>
BLOOD R/E		SGOT	<i>22</i>	OTHERS	
DC(differential count)	<i>10/2</i>			HBsAg	☐ Reactive ☒ Nonreactive
HAEMOGLOBIN (HGB)	<i>14.2</i>	DRUG AND ALCOHOL TEST		HIV / AIDS Test	☐ Reactive ☒ Nonreactive
ESR (WESTERGREN)	<i>08</i>	Morphine	☐ Positive ☒ Negative	VDRL	☐ Reactive ☒ Nonreactive
WBC	<i>6800</i>	Amphetamine	☐ Positive ☒ Negative	Blood Type	<i>A B Rh +</i>
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive ☒ Negative	Psychological Exam	<i>10/2</i>
RANDOM	<i>5.2</i>	Barbiturates	☐ Positive ☒ Negative	Others(KUB Ultrasound)	<i>10/2</i>
HBA1C	<i>5.0%</i>	Cocaine	☐ Positive ☒ Negative		<i>10/2</i>

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

03 APR 2024

Signature of Seafarer

SHAKIL CHOWDHURI

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

	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:

03 APR 2024

Valid Until

02 APR 2026

DR. MIA MD. RAIHAN

MBBS (H), DPM, CCD (Bridem), RGT (Ophth)

Name and Signature of Authorized Physician

In Accordance with Medical Examination (Seafarers) Convention 1946 (No. 78) and STCW 1978/1996 as Amended, MLC 2006

Raoal Hospitals Limited

Revision Date : 24th July 2022

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: CHOWDHURI		GIVEN NAME (S): SHAKIL	
DATE OF BIRTH: DAY 17 MONTH 12 YEAR 1998		PLACE OF BIRTH CITY BOGURA COUNTRY BANGLADESH	SEX MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER ☐ DECK OFFICER ☒ ENGINEERING OFFICER ☐ RADIO OPERATOR ☐ RATING ☐		MAILING ADDRESS OF APPLICANT: VILL. BHAGSHIMLA, PO. VATRA, PS. NANDIGRAM, DIST. BOGURA, BANGLADESH BANGLADESH.	

DECLARATION OF THE AUTHORIZED PHYSICIAN

	VISION		COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES		
RIGHT EYE	6/6	—	☐ BOOK	RIGHT EAR AB
			☐ LANTERN	
	6/6	—	YELLOW AB RED AB	
LEFT EYE			GREEN AB BLUE AB	LEFT EAR AB

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) **03 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 ☒

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

Shakil	SHAKIL CHOWDHURI	3-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; M.B.B.S.(D.U.), REG. NO. A-55144**

ADDRESS: **REDICAL HOSPITALS LIMITED, 35, SHAH MAKHDUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230, BANGLADESH.**

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: **DG SHIPPING BANGLADESH**

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: **06-05-2014**

SIGNATURE OF PHYSICIAN **[Signature]** STAMP OF PHYSICIAN: **[Stamp: Redical Hospital Ltd. As Per MLC 2006]** DATE: **03 APR 2024**

EXPIRY DATE OF CERTIFICATE: **02 APR 2026**



HAQUE & SONS LTD.



Rummana Haque Tower, 1267/A, Goshaidanga,
Agrabad C/A, Chattogram, Bangladesh.
Tel: +88 02333316214-6

Name	SHAKIL CHOWDHURI	Date	3-Apr-2024
Age	25	Sex	MALE
Passport No	EG0963740	CDC No	CO10858
Sample	BLOOD	Rank	APOFS

BIOCHEMISTRY REPORT COMPARE

Vessel Name:	ELM GALAXY	GINGA LION	
	After Sign-Off	Before Sign-On	Reference Range
Date of Report	25.02.2023	03.04.2024	-
Serum Bilirubin	1.0	0.54	0.2 - 1.1 mg/dl
Serum S.G.O.T/A.S.T	26	21	Up to 37 U/L
Serum S.G.P.T.	32.	25	Up to 42 U/L

DOCTOR'S REMARKS:

No Restrictions



Doctor Seal & Signature

DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Biderm), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approver
General Physician
Radical Hospital

ID NO : 24040056

Date : 03/04/2024

Patient's Name : SHAKIL CHOWDHURI

Age : 25Y3M17D

Ref. By : DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/10858

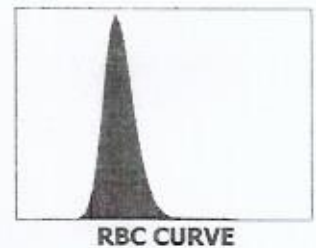
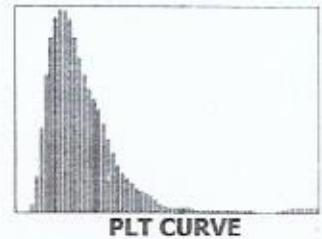
Sex : Male

Specimen : Blood

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

HAEMATOLOGY REPORT

Parameter	Results	Reference Values	Histogram
Haemoglobin(Hb)	14.4	g/dl	M:12-16, F:10-14.0 g/dl
ESR(Westergren)	08	mm/1st hr	M:0-10, F:0-20 mm/1st hr
TOTAL WBC COUNT	6,800	/cumm	4,000 - 11,000 /cumm
DIFFERENTIAL COUNT			
Neutrophils	56	%	(40 - 75)%
Lymphocytes	34	%	(20-45)%
Monocytes	06	%	(2-10)%
Eosinophils	04	%	(1-6)%
Basophil	00	%	0-1 %
TOTAL CIR. EOSINOPHIL COUNT	272	/cumm	40 - 450 /cumm
TOTAL PLATELET COUNT(PC)	245,000	/cumm	1,50,000-4,50,000 /cumm
MPV	11.4	fL	7.0 -11.0 fL
PDW-CV	16.9	%	10 - 18 %
PCT	0.28	%	0.10 - 0.28
P-LCR	39.1	%	9.00 - 45.00%
P-LCC	96	$\times 10^3/\mu\text{L}$	13 - 129 $\times 10^3/\mu\text{L}$
RBC COUNT	7.33	m/ul	M: 4.5-6.5, F: 3.8-5.8 m/ul
HCT/PCV	49.3	%	M: 40-54%, F: 37-47%
MCV	67.2	fL	76-94 fL
MCH	19.6	pg	27-32 pg
MCHC	29.1	g/dL	29-34 g/dL
RDW SD	52	fL	30.0-57.0 fL
RDW CV	22.8	%	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	DIA24040056	Received Date	03/04/2024
Patient's Name	SHAKIL CHOWDHURI		
Patient's Age	25Y 3M 17D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 10858
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.1 mmol/L	4.2 – 6.4 mmol/L
Serum Bilirubin (Total)	0.57 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	25.0 U/L	Up to 40 U/L
Serum AST (SGOT)	21.0 U/L	Up to 37 U/L
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.

Dr. Sumaiya Khatun
MBBS, MD (Microbiology)

Associate Professor
Dept. of Microbiology
East West Medical College and Hospital.



Bill No	DIA24040056	Received Date	03/04/2024
Patient's Name	SHAKIL CHOWDHURI		
Patient's Age	25Y 3M 17D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 10858
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	"AB" (+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	DIA24040056	Received Date	03/04/2024
Patient's Name	SHAKIL CHOWDHURI		
Patient's Age	25Y 3M 17D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 10858
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	0-1/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	DIA24040056	Received Date	03/04/2024
Patient's Name	SHAKIL CHOWDHURI		
Patient's Age	25Y 3M 17D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 10858
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.

Patient ID	24040056	Voucher No	
Test Name	USG OF KUB	Delivery Date	03/04/2024
Patient Name	SHAKIL CHOWDHURI		
Age	25 Yrs	Sex	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		

THANK YOU FOR THE COURTESY OF THIS REFERRAL

RT KIDNEY: - Is normal in size regular in shape and position. Bipolar length – 9.3cm. The cortical echogenicity are normal with clear cortico–medullar differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness.
P-C systems are not dilated.

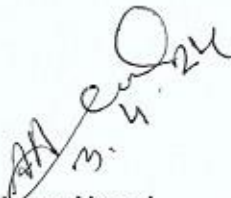
LT KIDNEY: - Is normal in size regular in shape and position. Bipolar length – 9.6 cm. The cortical echogenicity are normal with clear cortico–medullar differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness.
P-C systems are not dilated.

URETER: There is no dilatation in both ureter .

URINARY BLADDER: Is well filled. Wall thickness is regular and within normal limit.
No intravesicle lesion is seen

PROSTATE: Normal in size, volume is- 12.7 cc regular in shape. Echogenicity is homogenous.
No area of calcification is seen.

COMMENT: Suggestive of Normal study.


Dr. Asma Ahmed
MBBS,CMU,DMU
PGT(Gynae &Obs)
Advanced Training on TVS
Consultant Sonologist

REF: MT. GINGA LION

DATE: 03/04/2024

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

EYE EXAMINATION REPORT

NAME: SHAKIL CHOWDHURI

RANK: APP OFF

CDC NO: C/O/10858

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

03-04-2024 12:14:17

Male 25 Years

Spencer O'Connell

HR : 64 bpm

P : 106 ms

PR : 146 ms

QRS : 96 ms

QT/QTc : 378/390 ms

P/QRS/T : 57/63/42 °

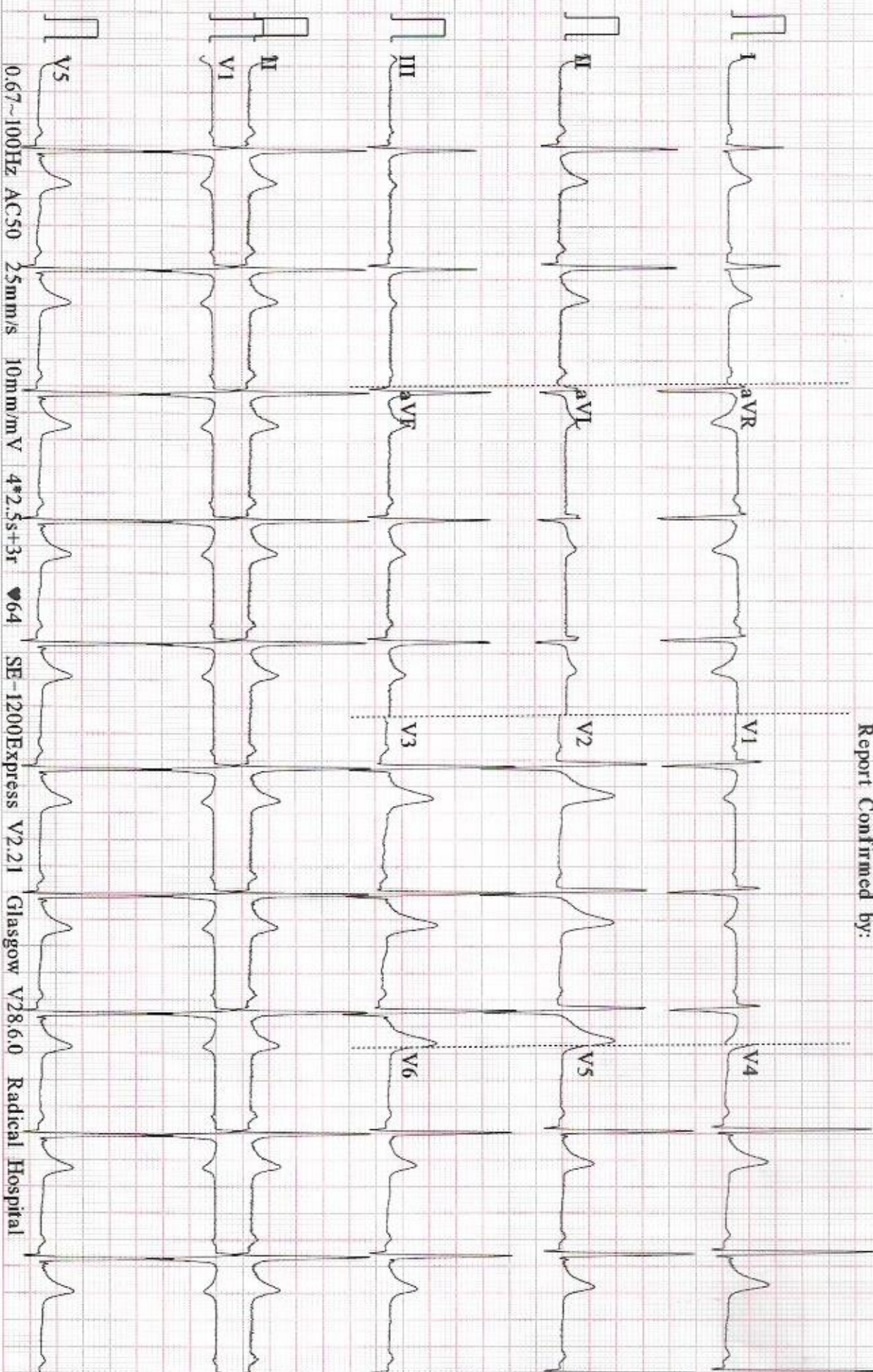
RV5/SV1 : 2.509/1.310 mV

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24040056 Receive: 03/04/2024 Print: 03/04/2024
Patient's Name : **SHAKIL CHOWDHURI**
Age : 25 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

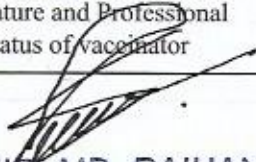
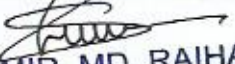
INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION

SHAKIL CHOWDHURY AGAINST CHOLERA

APP. OFFICER-16/10858

This is to certify that } Date of birth 17.12.1998 Sex 'M'
 whose signature follows }

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
31 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 18 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 03 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			