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

Form No: SMC



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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

Gender: (Male/Female) MALE Nationality: BANGLADESHI Date: Occupation: Deck/Engine/Gatering/Other (specify) DECK Rank: TR/ Father's/ Husbad'sname: MD. KAMAL C.D.C No. T/ Mother's Name: NURVANU Seaman ID No. Address: House No: Street/ Road No: Passport No. DELTR PAR P.O: JSLAMPUR Date of Birth: 1	25 APR 2024 OS 34562			
Gender: (Male/Female). MALE: Nationality: BANGILADESHI Date: Occupation: Deck/Engine/Gatering/Other (specify). DECK. Rank: TR/ Father's/ Husbad'sname: MD. KAMAL. C.D.C No. T/. Mother's Name: NURVANU Seaman ID No. Address: House No: Street/ Road No: Passport No. Address: House No: DELTR PAR NID No. 51. P.O: JSLAMPUR Date of Birth: 1	25 APR 2024 OS 34562			
Occupation: Deck/Engine/Gatering/Other (specify) DECK Father's/ Husbad'sname: MD. KAMAL Mother's Name: NURVANU Address: House No: Street/ Road No: Passport No. 1. Locality/Village: BORO DELTR PAR P.O: JSLAMPUR Date of Birth: 1	°08 '34562			
Father's/ Husbad'sname: MD : KHMAL C.D.C No. 1./. Mother's Name: NURVANU Seaman ID No. Address: House No: Street/ Road No: Passport No. 1/2 Locality/Village: BORO DELTR PAR NID No. 51/2 P.O: JSLAMPUR Date of Birth: 1	08 34562 05001/1020			
Father's/ Husbad'sname: MD : KHMAL C.D.C No. 1./. Mother's Name: NURVANU Seaman ID No. Address: House No: Street/ Road No: Passport No. 1/2 Locality/Village: BORO DELTR PAR NID No. 51/2 P.O: JSLAMPUR Date of Birth: 1	34562			
Address: House No: Street/ Road No: Passport No. Address: House No: Street/ Road No: Passport No. Address: House No: DELTR PAR NID No. 513 P.O. JSLAMPUR Date of Birth: 1	15/1/1/1000			
Address: House No: Street/ Road No: Passport No. Address: House No: Street/ Road No: Passport No. Address: House No: DELTR PAR NID No. 513 P.O. JSLAMPUR Date of Birth: 1	050014232			
Locality/Village: BORO DELTR PAR PO: JSLAMPUR Date of Birth: 1	101750243			
PO: JSLAMPUR Date of Birth: 1	11176615			
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TAMAL DINO	D/MM/YYYY)			
District: DIA IMAL POR				
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	XES/NO			
Unaided hearing satisfactory?	YESINO			
Visual acuity meets standards in section A-I/9?	XES/NO			
Colour vision meets standards in section A-I/9?	XES/NO			
Date of last colour vision test	2.5 APR 2024			
6. Fit for lookout duties?	:XES/NO			
7. Is the seafarer free from any medical condition likely to be aggravated by service at sea or				
render the seafarer unfit for service or to render the health of any other persons on board?	:YES/NO			
8. Any limitations or restrictions on fitness?	:YES/NO			
If YES, specify limitations or restrictions:				
Duties:				
Location/Vessel: RADICAL HOSPITAL LIMITED				
Medical/Other: Uttara, Dhaka, Bangladesh				
	11.5			
Medical fitness category : Fit-No restriction Fit-Subject to restrictions	Unfit			
10. Data of examination/legus (DD/MM/VVVV) 2.5 APR 2024				
To. Date of examination/issue (DD/MW/TTTT)				
11. Date of expiry (DD/MM/YYYY)2.4 APR 2026	ate of examination".			
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I have read the contents of the certificate and have been informed of the right to review.





DR. MIR. 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
Name & Signature of the practitioner:

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifig:itions 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 whis pered 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, Interna-tional 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 useofnarcotics.
 Applicants diagnosed with, suspected of, orexposed to any communicable disease transmit table 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 enineer 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 fight 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 Appendix1):

1. Complete physical Examination.

2. Pathological Examination:

a.CBC b.ESR c.HBSAG d.LFT e.ECG f.RBS g.URINER/M/E 7.5 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

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