

REPORT OF MEDICAL EXAMINATION OF SEAFARER BY AN APPROVED MEDICAL EXAMINER

As per Merchant Shipping (Medical Examination) Amendment Rules, 2000 and ILO IMO/JMS/2011/2012
(In Compliance with MLC 2006 & ISM/STCW 2010, Code 1/9)

Name : GAFFER ABDUL Sex : MALE Serial No. : _____
Date of Birth : 31/10/1975 PP/CDC No. : C/O/2763 Nationality : BANGLADESH
Rank : ADD. MASTER Vessel : _____ Type : TANKER Route : WORLD WIDE
Home Address : FLAT - C6, H.NO-111/A, RD-3, BLOCK-F, BANANI, DHAKA-1213, BANGLADESH.
Company Name & Address : _____

Medical History : Please answer the following to the best of your knowledge

Is there any past/present history of any of the following?	Candidate Declaration		Examiner Record		Is there any past/present history of any of the following?	Candidate Declaration		Examiner Record	
	Yes	No	Yes	No		Yes	No	Yes	No
Severe one-side headaches (Migraine)		✓		✓	Hernia / Hydrocoele / Appendicitis		✓		✓
Head Injury / Concussion / Loss of Memory		✓		✓	High/Low Blood Pressure / Heart Disease		✓		✓
Fits / Epilepsy / Dizziness / Fainting		✓		✓	Asthma / Bronchitis / Tuberculosis		✓		✓
Eye / Vision / Problems (Glasses etc)		✓		✓	Allergy / Skin Disease		✓		✓
Hearing Impairment		✓		✓	Infection / Contagious Disease		✓		✓
Ear / Nose / Throat Problem		✓		✓	Addiction to alcohol / drugs / tobacco		✓		✓
Stomach / Bowel Disorders		✓		✓	Fracture / Dislocation / Injury / Amputation		✓		✓
Gall Stones / Kidney Disorders		✓		✓	Major / Minor Operation		✓		✓
Jaundice / Liver Disease		✓		✓	Diabetes		✓		✓
Piles / Varicose veins		✓		✓	Nervous / Mental disease / Sleep disorder		✓		✓
Blood Disorder		✓		✓	Malignant Disease (Cancer)		✓		✓
Female Disorders		✓		✓	Signed off on medical ground/Declared Unfit		✓		✓

Notes : _____
Candidate's Declaration :- My signature below acknowledges that all statements provided by me in this application are true & correct to the best of my knowledge and belief and I further authorise & consent to the release of any / all of my medical records from any source including Insurance offices, Doctors, Hospitals or other institutions and public authorities. This general medical release will also authorize the release of any / all of my psychological records. If I am being tested for HIV virus, I consent to have the result revealed to my employer. I declare the above statements to be correct.
I hereby certify that the above medical statements are true and will form the basis of my medical examination. I agree that any omission or mis-representation shall preclude me from employment and other medical benefits.

Date : 06 APR 2024

Abdul Gaffer
Candidate's Signature

Medical Examination :

Height in cms	Weight in Kgs	Blood Pressure in mm of Hg	Pulse-beats/min	Resp. Rate/min	General Appearance
<u>173 cm</u>	<u>77 kg</u>	<u>130/80 mmHg</u>	<u>78 bpm</u>	<u>19 /min</u>	<u>HEALTHY</u>
Compliant with MLC2006, STCW 2010 STANDARD A-1/9	Distant Vision (Snellen's Chart)	Uncorrected	Corrected	Field Of Vision	Audiometry Hz
	Right Eye		<u>6/6</u>	Normal	500 1000 2000 3000 4000 5000 6000 8000
	Left Eye		<u>6/6</u>	Abnormal	Not Indicated
	Others	Normal	Abnormal	*Hearing	Normal Voice
Colour Vision	Ishihara	Normal	Abnormal	Right Ear	4 METER
	Others	Normal	Abnormal	Left Ear	2 METER

Systemic Examination	Norm	Abnor	Notes	Norm	Abnor
Head & Neck	✓		FIT FOR SEA SERVICE AS ADD MASTER AS PER MLC 2006 Enhanced GARD Medicals done	Respiratory System	✓
Eyes	✓			Cardiovascular System	✓
Ear / Nose / Throat	✓			Pier Abdomen	✓
Teeth / Oral Cavity	✓			Genito-urinary System	✓
Musculo-Skeletal System	✓			Others	✓
Nervous System	✓			Hernia / Hydrocoele	✓
Reflexes	✓			Varicose Veins	✓
Skin	✓			Fissure / Fistula / Piles	✓

Investigations :

Blood	Result	Normal	Urine	Result
Hemoglobin	<u>13.2</u>	M:13-17 F:12-15 gm%	Colour	<u>SW</u>
Total WBC Count	<u>6500</u>	4000 - 10000 / cu.m	Specific Gravity	
Neu 60% Lymph 30% Eos 0% Bas 0% Mo 0%			pH	
ESR	<u>9</u>	1 - 10 mm/hr	Albumin	<u>N/I</u>
SGOT	<u>15</u>	0 - 35 IU / L	Sugar	<u>N/I</u>
SGPT	<u>25</u>	10 - 60 IU / L	Bile Pigment	
S. Cholesterol	<u>165</u>	130 - 220 mg / dl	Bile Salt	
S. Triglycerides	<u>136</u>	upto 200 mg / dl	Occult Blood	
Blood Sugar	<u>5.8</u>	upto 140 mg %	RBC Cells	<u>N/I</u>
Creatinine	<u>0.89</u>	upto 1.5 mg / dl	Leucocytes	
GGTP	<u>35</u>	upto 55 IU / L	Spirometry	<u>NORMAL</u>
HbA1c	<u>NEGATIVE</u>		Drug of Abuse	<u>NORMAL</u>
HIV 1 & 2	<u>NEGATIVE</u>		TMT	<u>NORMAL</u>
VDRL	<u>NEGATIVE</u>		ECG	<u>NORMAL</u>
Others	<u>NEGATIVE</u>		USG	<u>NORMAL</u>
Blood Group	<u>B+ve</u>		XRy (Chest PA)	<u>NORMAL</u>

Result Of Medical Examination

On the basis of the history, clinical examination & diagnostic tests, I, _____ hereby declare the above examinee has been DECLARED FIT
Remarks / Recommendation : *Unaided Hearing : Satisfactory
I, _____, certify that all information required under Annexure E & F of M.S (Medical Examination) Rules 2000 are incorporated in this certificate.

Date of Medical Exam : 06 APR 2024
Date of Medical fitness : 06 APR 2024
Validity of Medical Certificate : 05 APR 2026



DR. MIR MIR RAIHAN
MBBS (DUL DPM CCD (Bdram) PGD (JOM))
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.



04.2024.6302

IDENTITY OF CANDIDATE CONFIRMED WITH

WALLEM	SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER In accordance with: STCW Convention, 1978, as amended, MLC 2006, ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended (Confidential Document)	Form: OHF 48 Version: 01 Date: 18 Aug 21 Page: 1 of 7

Pre-Sea Exam: ☐	Periodic Exam: ☐	Other: ☐
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Examination for duty as: Master: ☒ Y/N: ☒ Deck Officer: Y/N: ☐ Eng Officer: Y/N: ☐ Ratings: Y/N: ☐ Cook: Y/N: ☐ Other: Y/N: ☐ Please specify _____ 	Fit to perform the duties he/she is to carry out. ☐	Fit to perform the duties he/she is to carry out with the prescribed medicines which will not affect seafarer's health while onboard. ☐	Temporarily unfit to perform the duties he/she is to carry out. ☐	Permanently unfit to perform the duties he/she is to carry out. ☐
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To be filled by Manning Centres

Name, Address with Contact details of Manning Centre:					
Vessel to be assigned:		Routine & Emergency Duties (if known):		Position Offered/ Applied for:	ADD. MASTER
Type of vessel (Container, Tanker, Passenger etc):	TANKER				
Trade area (e.g. Coastal, Tropical, Worldwide):	Cosatal ☐ Tropical ☐ WorldWide ☒				

Part I - Examinee's Personal Declaration with Medical History

(Examinee is to be answer the following to the best of examinee's knowledge)

(Assistance should be offered by medical staff)

In case of any wrongful Act or misrepresentation/ suppression of material fact(s) of information or infringement the concerned seafarer shall be fully responsible/ liable for the consequences/ damages / penalties as per the provisions or the applicable laws.

Examinee's Personal Details

Name of Examinee (Family/ last, first, middle):				GAFFER ABDUL			
Home/ Permanent Address:				FLAT - C6, H.NO - III/A, RD-3, BLOCK - F, BANANI, DHAKA, BANGLADESH.			
Mailing Address:				SAME AS ABOVE			
Date of birth (day/month/year):				31	1	10	1
				1975		Sex:	MALE
Place of Birth:	City: NOAKHALI		Nationality:		BANGLADESHI		Rank:
	Country: BANGLADESH						ADD. MASTER
Civil Status:				MARRIED			
Identity Docs/ Passport /Discharge Book No:				C/O/ 2763			

Examinee's Medical History

Is there any past / present history of any of the following	Examinee	Examiner's	Is there any past / present history of any of the following	Examinee	Examiner's
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	Declaration		Record			Declaration		Record	
	Yes	No	Yes	No		Yes	No	Yes	No
Loss of Consciousness/ Fits / Head Injury / Dizziness / Loss of Memory		✓			Malignant Disease (Cancer) including Lymphoma, Leukaemia and related conditions Recurrence – especially Acute Complications, e.g. Harm to Self from Bleeding and to others from Seizures / Tumor		✓		
Neuropsychiatric diseases or Depression/ Suicidal Tendency/ Psychosis		✓			Stomach / Bowel Disorders/ Digestive Disorder		✓		
Ear (Hearing, tinnitus) Problems / Impairment		✓			Gall Stones/ Jaundice / Kidney Disorders		✓		
Mental Diseases, Breakdown / Sleep Disorder		✓			Severe/ Frequent/ One Sided Headaches (Migraine)		✓		
Fractures / Dislocations / Injury / Amputation/ Restricted Mobility		✓			Back / Joint Problems/ Wrist Problems/ Slipped Disc		✓		
Eye/ Vision Problems (Whether using Glasses/ Contact lenses)		✓			Hernia / Hydrocoele / Appendicitis		✓		
Balance Problem		✓			Piles / Varicose Veins		✓		
Sinuses/ Nose/ Throat Problems		✓			Allergies / Rash/ Skin Disease		✓		
Thyroid Problem		✓			Female Disorders	—	—	—	—
High / Low Blood Pressure/ Blood Disorder		✓			Major / Minor Operation/ Surgery		✓		
Heart Disease, Surgery / Chest Pain/ Vascular Disease (inc. Pedal Pulses)		✓			Contagious Diseases/ Gastrointestinal infection / Other Infections		✓		
Chronic Cough/ Asthma / Bronchitis / Tuberculosis/		✓			Sexually Transmitted Disease/ Infections		✓		
Shortness of Breath		✓			Addiction to Alcohol/Drugs/Cigarettes /Tobacco.		✓		
Rheumatic Fever		✓			Diabetes		✓		
for Male Examinee	Yes	No	If "Yes", give details			for Female Examinee	Yes	No	
Prostate Problems/ Testicular Lumps		✓				Breast Lumps/ Menstrual Problems			✓
Penile Discharge		✓				Pregnancy			✓
Multiple Partners		✓				Multiple Partners			✓
If "Yes", to any of the above, please explain:									

Additional questions :	Yes	No
Have you ever been signed off on medical grounds, declared unfit or repatriated from a ship?		✓
Have you ever been hospitalized?		✓
Have you ever been declared unfit for sea duty?		✓
Has your medical certificate ever been restricted or revoked?		✓
Are you aware that you have any medical problems, diseases or illnesses?		✓
Do you feel healthy and fit to perform the duties of your designated position/occupation?	✓	
Are you currently under a doctor's care/ medication?		✓
Are you allergic to any medications?		✓
Malaria, Typhoid, Viral fever (Dengue, Chikungunya, etc), Chicken Pox		✓
Liver diseases (Hepatitis A,B,C,D & E, Amoebic Abscess)		✓

WALLEM

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Arthritis, Spondylosis (Osteoarthritis, Rheumatoid) & Gout		✓
In the last one week have you consumed any of these Drugs/ Medication		
Cough Syrup, Sleeping Tablets, Cold, Action 500 etc.		✓
Pain Killers, If Yes, Please State name of Drug Crocin/ Aspirin/ Fortwin etc.		✓
Corticosteroids, Anti-epileptic Drugs, Nasal Drops etc.		✓
Any Medicine/ Injections from your family Doctor		✓
To What Extent Do You Use: Alcohol: <u>NONE</u> , Cigarettes: <u>NONE</u>		
Tobacco: <u>NONE</u> , Drugs: <u>NONE</u>		
Are you taking any non-prescription or prescription medications?		✓
If yes, please list the medications taken and the purpose(s) and dosage(s).		
Date and contact details for previous medical examination (if known):		
Are you coming from or have travelled through high risk areas? If yes, please mention the names of countries that you have been to (including ports of call in your last vessel).		
Family History :	Yes	No
Diabetes		✓
Blood Pressure/ Heart Disease		✓
Mental Illness/ Epilepsy/ Seizure		✓
Cancer	✓	
If "Yes", to any of the above, please explain: <u>My mother had suffered from breast cancer.</u>		

Any other major conditions? <u>None</u>
Would you say that your health is: <u>Excellent</u> * <u>Good</u> * <u>Fair</u> *
I <u>ABDUL GAFFER</u> holding Passport/Seaman Book no. <u>40/2763</u> hereby declare that I have made full disclosure of all of my medical history to the doctors and staff of this clinic. I am aware that the information supplied by me forms the basis upon which I will be offered employment as a seafarer. I understand that in the event of any misrepresentation either by statement or omission I will lose the right to benefit from sick pay and / or compensation which would otherwise be due to me under the Contract of Employment or under any Collective Bargaining Agreement. I also hereby consent to my medical records being made available upon demand to my employers and / or the owners and / or Insurers of the vessel or their authorized representatives. I hereby also certify that the personal declaration above is a true statement to the best of my knowledge and I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to
Dr. <u>MIRMO. RAHMAN</u> (the approved medical practitioner carrying out the medical examinations).
Signature of Examinee: <u>Abdul Gaffer</u> Date(day/month/year): <u>31/10/1975</u>

Height in cms: <u>173</u>	Weight in Kg: <u>76</u>	Blood Pressure	Systolic <u>120</u> (mmHg)	Diastolic <u>80</u> (mmHg)
BMI: <u>25.4</u>	Temperatures: <u>98°</u>	Pulse Rate:	<u>78 3/4</u>	Respiratory rate
Chest:	Insp: <u>43</u>	Rhythm:	<u>cur</u>	<u>19 3/4</u>
Exp: <u>41</u>		Oral Health	<u>cur</u>	General Condition
				<u>cur</u>

Part II - Medical Examination

The Company has set the following BMI limits:
A seafarer with a BMI: 18 or below; or 30 or above is considered temporarily unfit.
For seafarers from Northern Europe, the Indian subcontinent, Russia, Ukraine & Romania with a BMI of between 30 and 35 and where this, in the Government (DGS) approved medical examiner's opinion, is attributable solely to physique with broad shoulders/large muscle bulk with main muscles clearly defined and not obscured by subcutaneous fat and no co-morbid complications (eg. Diabetes, Hypertension, Dyslipidemia etc), then the seafarer in question MUST undergo a stress/ treadmill test.

If the results of the stress/ treadmill test are average or above, seafarer can be considered "fit to work", however, the seafarer MUST always be counselled on weight loss and ways/means to improve their health.

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BMI MUST also be taken into consideration during the seafarer's pre-employment medical examination and it is the responsibility of each manning centre to instruct their accredited clinic(s) to ensure that a seafarer's BMI is taken during the medical examination, the Company standards applied and if outside the limits, the manning centre must be notified, who will then seek further guidance from the Crewing Dept.

	Visual acuity					
	Unaided			Aided		
	Right eye	Left eye	Binocular	Right eye	Left eye	Binocular
Distant				6/6	6/6	✓
Near				15	15	✓

	Visual fields	
	Normal	Defective
Right eye	4	
Left eye	4	

Are glasses or contact lenses necessary to meet the required vision standard? Yes / No
If yes, specify which type and for what purpose:

Colour vision:

Date of last colour vision test:		Type:							
		Book *	Lantern *	Jethihara *	CIE-43-2001 *				
Check if colour test is Normal:	Yellow	*	Red	*	Green	*	Blue	*	
Colour Vision:	Not tested	*	Normal	*	Doubtful	*	Defective	*	

Hearing:

Pure tone and audiometry (threshold values in dB)						
Audiometry	500 Hz	1,000 Hz	2,000 Hz	3,000 Hz	4,000 Hz	6,000 Hz
Right ear	20	20	20			
Left ear	20	20	20			

Speech and Whisper Test (Meters)		
	Normal	Whisper
Right ear	4	4
Left ear	4	4

Speech (Deck/Navigation Officer): Is speech unimpaired for normal voice communication?

	Normal	Abnormal		Normal	Abnormal
Head	✓		Varicose Veins	✓	
Eyes	✓		Vascular (Inc. Pedal Pulses)	✓	
Eye Movement/Pupils	✓		Abdomen and Viscera	✓	
Ophthalmoscopy	✓		Hernia	✓	
Ears, Tympanic Membrane	✓		Anus (Not Rectal Exam.)	✓	
Sinuses, Nose, Throat	✓		G-U System	✓	
Mouth/Teeth/Gums	✓		Upper & Lower Extremities	✓	
Nervous System	✓		Spine (C/S, T/S and L/S)	✓	
Heart	✓		Neurologic (Full Brief)	✓	
Lung and Chest	✓		Psychiatric	✓	
Breast Examination	✓		Pupils	✓	
Skin	✓		Musculoskeletal System	✓	

Cardiovascular System:

	Normal	Abnormal		Normal	Abnormal
Ischaemic Heart Disease	✓		Hypertension	✓	
Dysrhythmia/ Pacemaker	✓		Congenital Heart Disease	✓	
Valvular Heart Disease	✓		Peripheral Circulation	✓	
Cardiomyopathy	✓		Pulmonary Circulation/ TB	✓	
Aneurysms	✓				

Chest X-ray (PA)	Not performed *				
Result :	Performed * on (day/month/year):		Normal	Abnormal	



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

Test:			Result:					
Investigation:								
Blood		Result	Normal	Urine	Result	Additional Tests	Result	Normal
Haemoglobin "Hb"		13.2 g/dl	13 - 18 gm/dl	Colour	nil	(HbA1c)	5.0	4.0 % - 6.5 %
Total WBC count			4,000 - 11,000 / cu.mm	Specific Gravity	4	RBS/ FBS (Blood test)	5.8	
Neu 60 %, Lymph 30 %, Eos 04 %, Bas 0 %, Mo 0.6 %				pH	4	Total Bilirubin	0.55	0.1 - 1.0 mg/dl
Blood Group & Rh factor (tested only once, need not be repeated)				Albumin	4	Direct Bilirubin	ND	0.0 - 2.5 mg/dl
BI ESR		0.8	1 - 15 mm / hr	Sugar	4	Indirect Bilirubin	ND	0.0 - 0.75 mg/dl
Platelets		226000	1.50-4.00 Lakh/ul	Bile Pigment	4	SGPT	25	9 - 43 U / L
Fasting Lipid Profile				Bile Salt	4	SGOT	19	0 - 40 IU/L
S. Triglycerides		13.6	25-200 mg/dl	Occult Blood	4	SGGT	38	0 - 49 IU/L
Cholesterol Serum		165	130-220 mg/dl	RBC Cells	4	Blood Urea	ND	10 - 50 mg/dl
HDL Cholesterol Serum		44	35-65 mg/dl	Leucocytes	4	S. Creatinine	0.99	0.8 - 1.4 mg/dl
LDL Cholesterol Serum		82	85-150 mg/dl	Stool Test	Result	BUN	20	5-23mg/dl
VLDL Cholesterol Serum		ND	07-35 mg/ dl	Bacterological	nil	PSA	ND	Less than 4.00 ng/ml
Total / HDL Cholesterol		ND	3.0-5.0	Parasitical	4	Malarial Parasite	ND	
LDL/ HDL Cholesterol		ND	2.5-3.5	Others		Uric Acid	4.1	2.4 - 7.5 mg/dl
Hepatitis B	Positive	Negative		HIV I & II	negative			
Hepatitis C	Positive	Negative		VDRL	negative			

Drugs: Method:

Results:					
Detected	Amphetamines / Urine *	Barbiturate/ Urine *	Marijuana, THC, Cannabinoids Urine *	Cocaine / Urine *	Opiates & Morphine *
Cut Off Limit	(1000 ng/ ml)	(200 ng/ ml)	50 ng/ ml	(300 ng/ ml)	
Not Detected	Amphetamines / Urine *	Barbiturate/ Urine *	Marijuana, THC, Cannabinoids / Urine *	Cocaine / Urine *	Opiates & Morphine *
Spirometry	Normal	TMT	negative	Drugs of Abuse	negative
ECG	Normal	ECHO	Normal	Ultrasound (USG) of the Abdomen & Pelvis	Normal.

Part III - Result of Medical Examination

Is applicant vaccinated in accordance with WHO requirements? Yes / No

Vaccination status recorded: Yes / No Satisfactory * to be renewed *

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Details:

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

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

Examination	Results of the examination		Examination	Results of the examination	
	Pass	Fail		Pass	Fail
Medical History	✓		Fecalysis (food service/ handlers only)	✓	
Physical Examination	✓		Hep B Antigen	✓	
Dental Examination	✓		Hep C Antibodies	✓	
Psychological Test	✓		Stress Test	✓	
Visual Test	✓		Diabetes	✓	
Colour Vision	✓		Ultrasound Examination (Presence of gall & Kidney Stones)	✓	
Audiometry	✓		Alcohol/ Drug Test	✓	
EKG	✓		2D echo Doppler study (for heart patient) Psychometric evaluation	✓	

If failed in any above mentioned examinations and examinations report attached to this form, please provide reasons with examination number:

This examinee is certified free of communicable disease (or viruses for cooks) : Yes / No

I have evaluated the above-named seafarer after establishing his identity as per the documents mentioned above and in compliance with the medical standards of STCW Convention, 1978, as amended, MLC 2006, ILO/IMO/JMS/2011/12- Guidelines on the Medical Examinations of Seafarers and also Merchant Shipping (Medical Examination) Rules by the Government (DGS), as amended from time to time. On the basis of the examinee's history, personal declaration, my clinical examination, the diagnostic test results obtained, and in consideration of the essential requirements of the position applied for, my opinion is

- (a) that the hearing meets the required standards for his / her rank and detect any audible alarms/ Unaided hearing is satisfactory
- (b) Visual acuity meets the required standards for his/her rank /Colour Vision meets the required standard (testing only required every 6 years unless considered necessary)/ that he / she is fit / unfit for look out duty
- (c) that he / she needs / does not need visual aids / informed to carry spares
- (d) that he/she is/is not taking regular medication & seafarer does /does not require to take same during his tenure onboard vessel that he/she is/is not taking any medication that has side effects that will impair judgment, balance, or any other requirements for effective and safe performance of routine and emergency duties onboard?
- (e) that the seafarer is not suffering from any disease, medical condition, disorder or impairment which renders him/her that will prevent the effective and safe conduct or likely to be aggravated by, or unfit for, routine and emergency service at sea or likely to endanger the health of other persons onboard ships.

	Deck service	Engine service	Catering service	Other services (training/ examination)
Fit:	✓	✓	✓	✓
Unfit:	✓	✓	✓	✓

this seafarer is **UNFIT FOR DUTY**/ FIT FOR DUTY with/ without restrictions*** as mentioned below,

* This Medical Certificate is issued with following restrictions (e.g. specific position, type of ship, trade area & other as applicable):

** Reasons for being unfit



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This is to certify ABDUL GAFFER was physically examined and he/she is found to
be FIT for sea service/ look-out duty for the period from RADICAL HOSPITAL LIMITED Place of medical
examination 06 APR 2024 Date of medical examination: Uttara, Dhaka, Bangladesh Medical
certificate validity date (day/month/year): 05 APR 2026 Name of Examiner (Please Print):

(Validity should not be more than 2 years)

Degree: _____ Address: RADICAL HOSPITAL LIMITED
Tel./Fax/Email: Uttara, Dhaka, Bangladesh

Name of Medical Examiner/ Physician Certificate /License Issuing Authority:

Date of issue of Medical Examiner/Physician Certificate/ License: _____ Registration No.:

Abdul Gaffer

Examinee's Signature

(This signature is affixed in the presence of the Medical Examiner
(print name of medical examiner if not legible) and I acknowledge, that
I have been advised of the content of the medical certificate & of the
right to a review in accordance with paragraph (6) of section A-1/9 of STCW
Code and my obligations.)

Date: 06 APR 2024

Original: Master & Crewing Dept
cc: Seafarer

Official Stamp & Signature with Govt. (DGS) Approval/

No.....of Medical Examiner

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



Remark: This form is to be uploaded in Crew Management System, Medical tab by the Manning centre.

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: GAFFER		GIVEN NAME (S): ABDUL	
DATE OF BIRTH: DAY 31 MONTH 10 YEAR 1975		PLACE OF BIRTH CITY NOAKHALI COUNTRY BANGLADESH	SEX MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER ☒ DECK OFFICER ☐ ENGINEERING OFFICER ☐ RADIO OPERATOR ☐ RATING ☐		MAILING ADDRESS OF APPLICANT: FLAT-C6, H.NO-111/A, ROAD-3, BLOCK-F, BANANI, DHAKA-1213, BANGLADESH.	

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION		COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	
RIGHT EYE	—	6/6	RIGHT EAR <u>mm</u>
LEFT EYE	—	6/6	LEFT EAR <u>mm</u>

COLOR TEST TYPE:
☒ BOOK
☒ LANTERN
 YELLOW mm RED mm
 GREEN mm BLUE mm

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) 06 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.

Abdul Gaffer

Signature of Applicant

ABDUL GAFFER

Name of Applicant

06 APR 2024

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, DTM
 ADDRESS: RADICAL HOSPITAL LIMITED, UTTARA
 NAME OF PHYSICIAN'S CERTIFYING AUTHORITY: DG SHIPPING BANGLADESH
 DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06 MAY 2024

SIGNATURE OF PHYSICIAN: [Signature] STAMP OF PHYSICIAN: [Stamp] DATE: 06 APR 2024

EXPIRY DATE OF CERTIFICATE: 05 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 (Birm), PGT (Ophth)

BMDC A-5544, MMC BCD-016

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited

MEDICAL FITNESS CERTIFICATE

LAST NAME OF APPLICANT GAFFER		FIRST NAME ABDUL		MIDDLE INITIAL
DATE OF BIRTH 10 MONTH 31 DAY 1975 YEAR		PLACE OF BIRTH NOAKHAL CITY BANGLADESH COUNTRY		
EXAMINATION FOR DUTY AS : MASTER ☐ MATE ☒ ENGINEER ☐ RADIO OFF ☐ SEAMAN ☐		MAILING ADDRESS OF APPLICANT FLAT - CG, H. NG-III/A, ROAD - 3, BLOCK - F, BANANI, DHAKA - 1213, BANGLADESH.		
MEDICAL EXAMINATION				
HEIGHT 1.73 M	WEIGHT 76 KG	BLOOD PRESSURE 130/80 mmHg	PULSE 78 b/min	RESPIRATION 19 b/min
VISION:			HEARING:	
RIGHT EYE WITHOUT GLASSES WITH GLASSES 6/6			LEFT EYE WITHOUT GLASSES WITH GLASSES 6/6	
COLOR TEST TYPE : BOOK ☐ LANTERN ☐ Check if color test is normal			YELLOW ☒ RED ☒ GREEN ☒ BLUE ☒	
HEAD AND NECK Normal			HEART (CARDIOVASCULAR) Normal	
LUNGS				
SPEECH : Is speech unimpaired for normal voice communication ?				
EXTREMITIES: UPPER Normal			LOWER Normal	
Is applicant suffering from any disease likely to be aggravated by, or to render him unfit for, service at sea or likely to endanger the health of other persons onboard? No				
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO : ABDUL GAFFER				
AND HE / SHE IS FOUND TO BE FIT FOR SEA SERVICE FROM				
NAME AND DEGREE OF PHYSICIAN DR. MIR. MD. RAIHAN, MBBS, DFM (PLEASE PRINT)				
ADDRESS RADICAL HOSPITAL LIMITED,				
NAME OF PHYSICIAN'S LICENSING AUTHORITY DC SHIPPING BANGLADESH				
DATE OF ISSUE OF PHYSICIAN'S LICENSE 06 MAY 2011				
				SIGNATURE OF PHYSICIAN

This certificate is issued in compliance with the requirements of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73)



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

MEDICAL CERTIFICATE FOR FITNESS FOR SERVICE AT SEA

FLAT- CG, H. NO- 111/A, ROAD- 3,
BLOCK-F, BANANI, DHAKA-1213,
BANGLADESH

Last/Family Name

GAFFER

First & Middle /Given Name

ABDUL

Position applied for

ADD. MASTER

Date of Birth

31/10/1975

Sex

MALE

Nationality

BANGLADESH

ID (Passport/Discharge book) No.

C/012763

I have evaluated the above-named seafarer after establishing his identity as per the documents mentioned above and in compliance with the medical standards of MLC 2006 Reg 1.2; STCW 2010 & the guidance for the conduct of medical examination issued by the Directorate, as amended from time to time. On the basis of the seafarer's personal declaration, my clinical examination, the diagnostic test results obtained, and in consideration of the essential requirements of the position applied for, my opinion is -

(a) that the hearing meets the required standards for his rank:-

Unaided hearing is satisfactory

Yes ☒ No

Yes ☒ No

(b) Visual acuity meets the required standards for his rank

Colour Vision meets the the required standard

that he is fit for look out duty

Yes ☒ No

Yes ☒ No

Yes ☒ No

(c) that he needs visual aids / informed to carry spares

Yes ☒ No

(d) that he is taking regular medication & seafarer does require to take same during his tenure on board vessel

Yes ☒ No

(e) that the seafarer is not suffering from any disease likely to be aggravated by, or render him unfit for, service at sea or likely to endanger the health of other persons on board ships

Yes ☒ No

(f) this seafarer is **FIT FOR DUTY without restrictions*** as mentioned below

** This Medical Certificate is issued with following restrictions

** Reasons for being unfit

Physician Signature:

Physician Name Printed:

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

Clinic Stamp



Date:

06 APR 2024

Valid Till:

05 APR 2026

Authorizing body of Medical Examiner: Directorate General of Shipping, Govt. of Bangladesh

I acknowledge, that I have been advised of the content of the medical certificate & of the rights for a review and my obligations.

Seafarers signature with Date:-

Abdul Gaffer.



WALLEM SHIPMANAGEMENT(INDIA) PVT. LTD.

REQUISITION FOR SEAFARER'S MEDICAL EXAMINATION
(Confidential Document)

Form : MHRS 08
Prepared by : MR
Approved by : MD
Issued : Feb '08
Revised : Mar '17

From : _____

(Please write Name, Address & Contact Details of Manning Centre)

RADICAL HOSPITAL LIMITED
Utara, Dhaka, Bangladesh

To : _____

(Please write Name, Address & Contact Details of the Doctor/ Clinic/Examiner)

Please carry out medical examination of the seafarer, the details and requirements for which are as stated below.

Date : **06 APR 2024**

(Name & Signature of Responsible Person from Manning Centre)

Examinee's Details :

Full Name : **ABDUL GAFFER** Address : **H.No-111/A, RD-3, BLOCK-F, BANANI, DHAKA.**

Date of Birth : **31/10/1975** Rank : **ADD. MASTER** Name of vessel to be assigned : _____

Type of vessel : **OIL TANKER** Trade area : **WORLD WIDE**

(Container, Tanker, Passenger etc) (e.g. Coastal, Tropical, Worldwide) :

CDC No. : **0102763** Passport No. : **A07542891** Crew ID.(from Compas) : _____

Position Offered/ Applied for : **ADD. MASTER** Routine & Emergency Duties (if known) : **AS PER COMPANY'S JOBORDER**

As per requirements of applicable P&I club :

- | | | |
|--|--|--|
| ☐ West of England P&I | ☐ UK P&I | ☐ Steamship Mutual Underwriting Association |
| ☐ Britannia P&I | ☐ Skuld P&I | ☐ North of England Association P&I |
| ☐ Standard P&I | ☐ Gard P&I | ☐ London Steamships P&I |
| ☐ Japan P&I | ☐ American Steamships P&I | ☐ Others : _____ |

As per requirements of applicable Flag State :

- | | | | | |
|-----------------------------------|------------------------------|-------------------------------------|---|--------------------------------|
| ☐ Liberian | ☐ NIS | ☐ Panamanian | ☐ Marshall Islands | ☐ Malta |
| ☐ Danish | ☐ ILO | ☐ UK | ☐ Others : _____ | |

Medical Examination Module (as applicable): _____ (Please refer to "Annex 1" of WSM(I)'s Quality Manual)

FOR SEAFARERS : Please write any past medical history [Injury or Illness] in detail; any history of allergy to drugs should be mentioned in the box provided below :

Please read and sign the following statement :-

"I certify that my past medical history will be/has been fully declared to the Company Doctor and any false statement or undisclosed material and/or information in regard to past or present illness and/or medical condition(s) will disqualify me from any employment benefits and claims."

Abdul Gaffer.

Seafarer's Signature

Date : **06 APR 2024**



Doctor's Signature

Date : **06 APR 2024**

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

Original: Doctor & Copy : Manning Centre

Remark: The document to be uploaded into CMS under "Medical" Tab.

ID NO : 24040154

Date : 07/04/2024

Patient's Name : ABDUL GAFFER

Age : 48Y 5M 5D

Ref. By : DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/2763

Sex : Male

Specimen : Blood

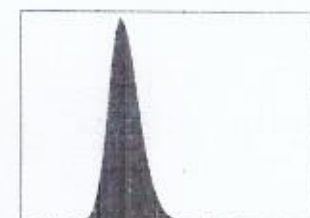
(Relevant estimations were carried out by KT-44 Haematology Analyzer with checked manually)

HAEMATOLOGY REPORT

Parameter	Results	Reference Values	Histogram
Haemoglobin(Hb)	13.2	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	6,500	/cumm	4,000 - 11,000 /cumm
DIFFERENTIAL COUNT			 WBC CURVE
Neutrophils	60	%	(40 - 75)%
Lymphocytes	30	%	(20-45)%
Monocytes	06	%	(2-10)%
Eosinophils	04	%	(1-6)%
Basophil	00	%	0-1 %
TOTAL CIR. EOSIONOPHIL COUNT	260	/cumm	40 - 450 /cumm
TOTAL PLATELET COUNT(PC)	226,000	/cumm	1,50,000-4,50,000 /cumm
MPV	13	fL	7.0 -11.0 fL
PDW-CV	17.6	%	10 - 18 %
PCT	0.29	%	0.10 - 0.28
P-LCR	45.8	%	9.00 - 45.00%
P-LCC	103	$\times 10^3/\mu\text{L}$	13 - 129 $\times 10^3/\mu\text{L}$
RBC COUNT	4.59	m/ μL	M: 4.5-6.5, F: 3.8-5.8 m/ μL
HCT/PCV	40.3	%	M: 40-54%, F: 37-47%
MCV	87.8	fL	76-94 fL
MCH	28.7	pg	27-32 pg
MCHC	32.7	g/dL	29-34 g/dL
RDW SD	48	fL	30.0-57.0 fL
RDW CV	16.5	%	10-16%



PLT CURVE



RBC CURVE

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


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

Bill No	DIA24040154	Received Date	06/04/2024
Patient's Name	ABDUL GAFFER		
Patient's Age	48Y 5M 5D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 2763
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.8 mmol/L	4.2 – 6.4 mmol/L
Serum Creatinine	0.89 mg/dl	0.3 - 1.3 mg/dl
Serum (BUN)	20 mg/dl	7- 23 mg/dl
Uric Acid	4.1 mg/dl	3.8 - 8.0 mg/dl
GGT	38 U/L	Adult Male : <55
Total Protein	7.1 g/dl	6.3-7.9 g/dl
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	172 U/L	98 - 279 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	DIA24040154	Received Date	06/04/2024
Patient's Name	ABDUL GAFFER		
Patient's Age	48Y 5M 5D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 2763
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
<u>Lipid profile</u>		
Serum Cholesterol	165 mg/dl	up to 200 mg/dl
Serum HDL- Cholesterol	44 mg/dl	>35 mg/dl
Serum Triglyceride	136 mg/dl	up to 220 mg/dl
Serum LDL- Cholesterol	82 mg/dl	<130 mg/dl

RADICAL
HOSPITAL
LIMITED

Checked By

Medical Technologist,
Radical Hospital Ltd.


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

Bill No	DIA24040154		Received Date	06/04/2024	
Patient's Name	ABDUL GAFFER				
Patient's Age	48Y 5M 5D			Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM			CDC NO	C/O/ 2763
Sample	BLOOD				

SEROLOGICAL REPORT

Test Name

Result

HIV 1 & 2 (Method : (ICT)	Negative
HBsAg (Method : (ICT)	Negative
HCV (Method : (ICT)	Negative
Malaria Parasite (ICT)	Negative
VDRL	Non-reactive
Hepatitis A(IgG + IgM)	Negative

BLOOD GROUPING Result

ABO Blood Group	"B" (+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	DIA24040154	Received Date	06/04/2024
Patient's Name	ABDUL GAFFER		
Patient's Age	48Y 5M 5D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 2763
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	DIA24040154	Received Date	06/04/2024
Patient's Name	ABDUL GAFFER		
Patient's Age	48Y 5M 5D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 2763
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.

AUDIOLOGICAL REPORT

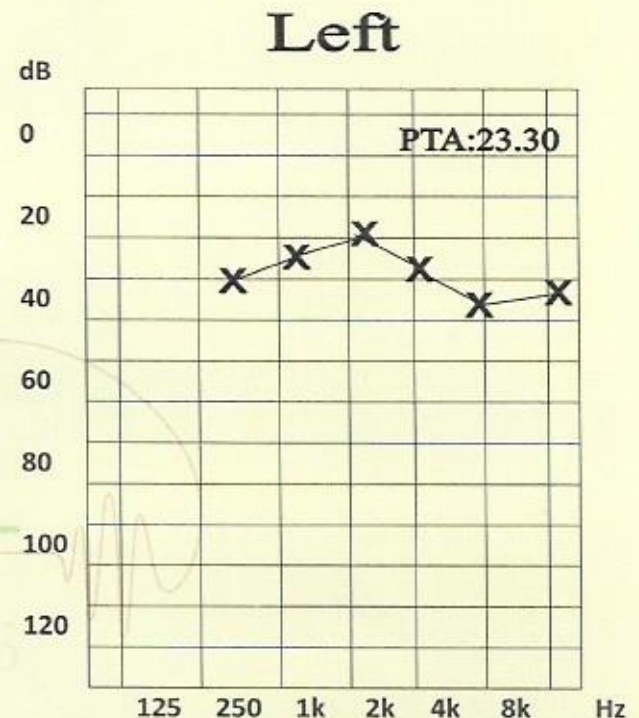
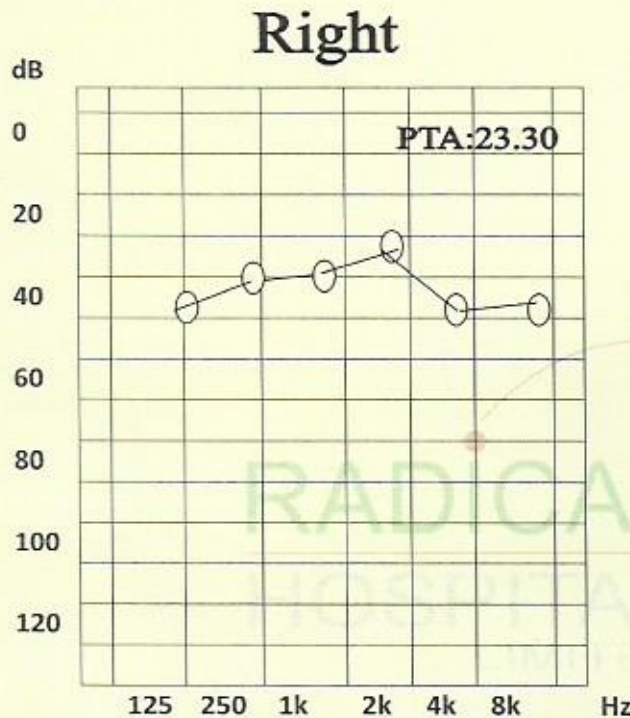
Patient Name : ABDUL GAFFER

06/04/2024

Age : 48 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.

Patient ID	24040154	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	06/04/2024
Patient Name	ABDUL GAFFER		
Age	48 YRS	Sex	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		

THANK YOU FOR THE COURTESY OF THIS REFERRAL

LIVER :- Is normal in size 13.4cm, regular in shape and normal position. **The echogenicity of the parenchyma is increased.** Intrahepatic biliary channel are not dilated. No focal lesion is seen.

GALL BLADDER : Normal in size & regular in shape. Lumen is normal. Wall thickens is normal. **Multiple (3 to 4) echogenic structure with posterior acoustic shadowing are noted within the lumen of GB .** CBD not dilated .

PANCREASE :- Normal size regular in shape. Echogenecity is homogenous. PD not dilated.

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

BOTH KIDNEYS :- Are normal in size RK-9.6cm, LK- 10.3cm regular in shape. 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.

URINARY BLADDER : Is well filled. Wall thickness is normal. No intravesicle lesion is seen

PROSTATE: Normal in size volume is 8.7 cc ,regular in shape. Echogenicity is homogenous.
No area of calcification is seen.

IMPRESSION: Suggestive of 1.Fatty change in liver. Grade-1

2. Cholelithiasis.


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

Patient's Name	: ABDUL GAFFER	ID NO	: 24040154
Age	: 48 Yrs	Date	: 06/04/2024
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

Patient's Name	:	ABDUL GAFFER		
Age	:	48 Yrs	Date	: 06/04/2024
Sex	:	Male	CDC NO:	C/O/2763
Referred by	:	Dr. Mir Md. Raihan - MBBS, (DU), DFM		

Psychometric Test

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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24040154 Receive: Print: 06/04/2024
Patient's Name : ABDUL GAFFER
Age : 48 YRS Sex : M
Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 95 b/min

Rhythm : Regular

P-Wave : Normal

P-R Interval : Normal

QRS Complex : Normal

ST. Segment : Is electric

T. Wave : Normal

Impression : Findings are within normal limit.



Dr. Debashish Paul
MBBS, MD (Cardiology)
Associate Professor
Department of Cardiology
Sylhet Women's Medical College Hospital

This report has been electronically signed

Page 1 of 1

ID: 24020579

06-04-2024 19:31:35

Robert Carter
Male 98 Years

HR : 95 bpm

P : 108 ms

PR : 144 ms

QRS : 82 ms

QT/QTc : 328/413 ms

P/QRS/T : 55/74/17 °

RV5/SV1 : 1.505/0.921 mV

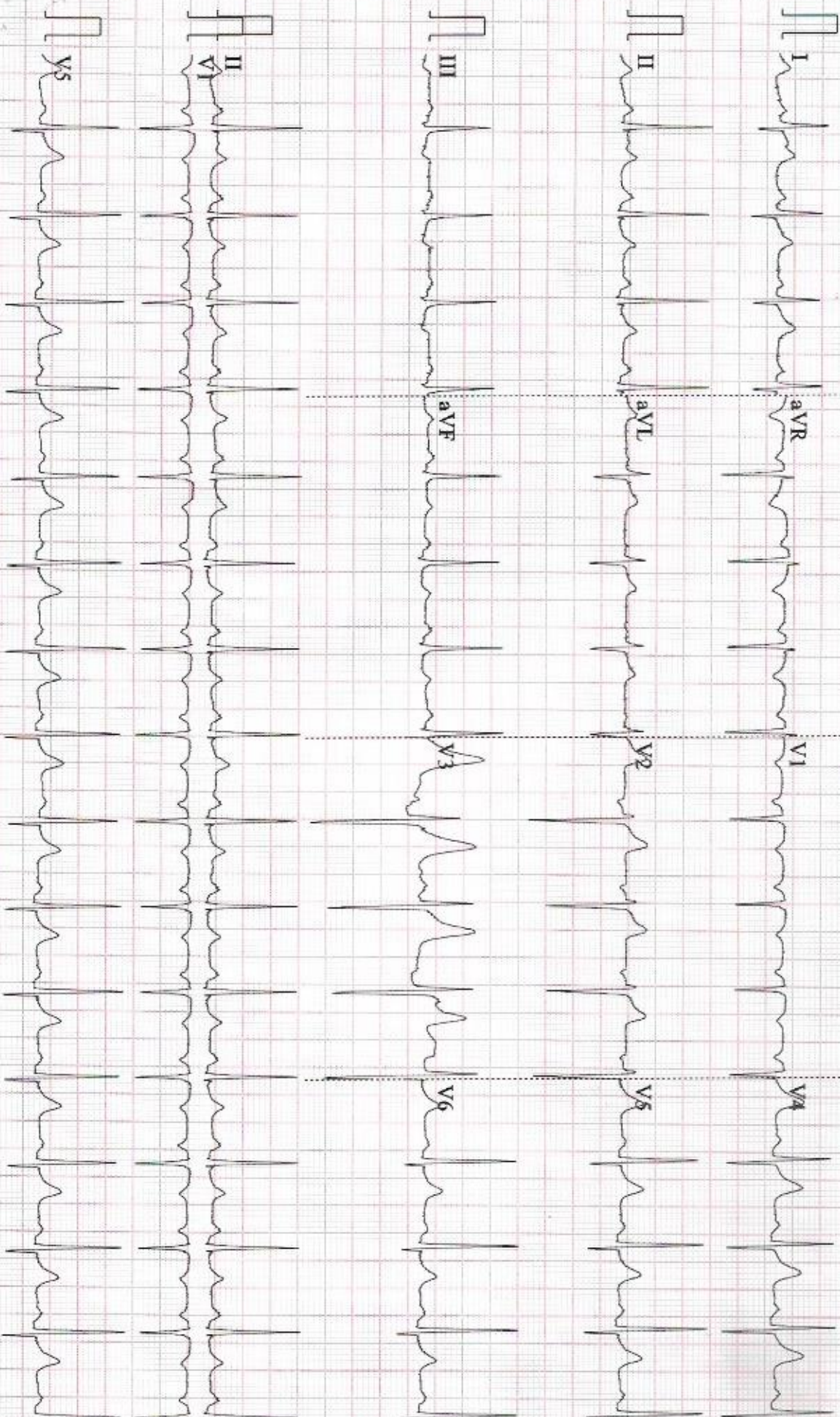
Diagnosis Information:

Sinus rhythm

Possible left atrial abnormality

Borderline ECG

Report Confirmed by:



Date: 06/04/2024

EYE EXAMINATION REPORT

NAME:	ABDUL GAFFER		
AGE:	48 YRS	RANK: ADD MASTER	CDC NO:C/O/2763

VISUAL ACUITY: RIGHT LEFT

UNAIDED

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

Patient's Name	:	ABDUL GAFFER	ID NO	:	24040154
Age	:	48 Yrs	Date	:	06/04/2024
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

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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 2404154 Receive: 06/04/2024 Print: 06/04/2024
Patient's Name : **ABDUL GAFFER**
Age : 48 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

ECHO-CARDIOGRAPHY REPORT

2-D & M-MODE, DOPPLER & COLOUR FLOW IMAGING



I.D. No	: U132999	Received date	: 6 Apr 2024	Printed date	: 6 Apr 2024 08:57PM
Name of Pt.	: ABDUL GAFFER	Age	: 48 y(s)	Sex	: Male
Exam	: ECHO 2D				
Ref. By	: SELF				

PROCEDURES: 2D & M-MODE STUDY

M-MODE & 2D FINDINGS:

AO	: 30	mm	LVIDd	: 44	mm	RVIDd	:	mm	MVA	:	cm ²
LA	: 33	mm	LVIDs	: 28	mm	RVOT	:	mm	MV annulus	:	mm
IVST	: 09	mm	EF	: 66	%	PA	:	mm	AV ring	:	mm
PWT	: 09	mm	FS	: 36	%	TAPSE	: 19	mm	ACS	: 17	mm

DESCRIPTION:

CHAMBERS:

LA : Normal **LV** : Normal in chamber dimension, morphology and motion.

RA : Normal **RV** : Normal in chamber dimension, morphology and motion.

VALVES : All valves are normal.

IAS : Intact **IVS** : Intact

GREAT VESSEL : Great arteries are normal in size and relationship.

PERICARDIUM : No effusion seen.

THROMBUS/VEGETATION/OTHER MASS: Not seen.

IMPRESSION:

1. No regional wall motion abnormality.
2. Good LV & RV systolic function.



06/04/2024

Dr. Md. Aminur Razzaque

MBBS. MD (Cardiology) NICVD,

Assistant Professor (Cardiology), NICVD

Advance training on Echocardiography JROP (India)

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IBN SINA DIAGNOSTIC & CONSULTATION CENTER, UTTARA

TREADMILL STRESS TEST

ISO 9001:2015 Certified



I.D. No	: U132999	Received date	: 6 Apr 2024	Printed date	: 6 Apr 2024 09:35PM
Name of Pt.	: ABDUL GAFFER	Age	: 48 y(s)	Sex	: Male
Ref. By	: SELF				
Ref. By	: ETT				

Total Exercise Time	: 09:00 Min	Max.HR attained	: 157 Bpm.
% of max. pred. HR	: 91 %	Max. Pred HR	: 172 Bpm.
Maximum BP	: 140/90 mmhg.	Max. work load attained	: 10.10 METS
Indication	: Screening for IHD.		
Risk Factors	: Nil		
Reason for Termina.	: Attainment of THR.		
Test Profile	: BRUCE		
Symptoms	: Nil		

Summary Result ⇒ **NEGATIVE**

Comments:

- ☐ **ABDUL GAFFER** performed stress test in Bruce protocol for the evaluation of IHD (angina pectoris).
- ☐ Exercise capacity was good.
- ☐ Inotropic and chronotropic responses were normal.
- ☐ Stress test was terminated because of attainment of THR.
- ☐ ECG at rest shows no abnormality.
- ☐ ECG during exercise & recovery shows no significant ST depression.

Conclusion : Stress test is **NEGATIVE** for ECG evidence of provokable myocardial ischaemia.

06/04/2024

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