



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 55144

PATIENT CONTROL NUMBER:
H2355

MEDICAL EXAMINATION CERTIFICATE

SURNAME RASEL	FIRST NAME MD	MIDDLE NAME RASHA BIN
PLACE AND DATE OF BIRTH NARSINGDI 10-Jun-1997	PASSPORT NUMBER A13803992	SI-AMAN'S BOOK NUMBER CO10409
NATIONALITY: BANGLADESHI SEX: ☒ Male ☐ Female	VESSEL TYPE: CHEM. TANKER	TRADING AREA: WORLD WIDE
PERMANENT HOME ADDRESS: VILL-GHORADIA, POR. NARSHINGDI COLLEGE, PS. NARSINGDI SADAR DIST-NARSHINGDI, BANGLADESH.	CONTACT NUMBER: 01624-550129 (SELF),	RANK: APP OFFICER SCHOLAR

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.

Rasha

Signature of Seafarer

MEDICAL EXAMINATION

Weight 73 kg	Height (cm) 168	BM 25.8	Blood Pressure: Systolic 120 mm Diastolic 80 mm	PULSE: 78 bpm
Ear	Hearing by Audiometry	Audiometry		
Right	☐ Adequate ☐ Inadequate	500	1000	2000
Left	☐ Adequate ☐ Inadequate	3000		
		Hearing by Whisper Test		
		☐ 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) **23 FEB 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	☒	BIO CHEMICAL (LIVER FUNCTION TEST)	Marijuana	☐ Positive ☒ Negative	
ECG	☒	BILIRUBIN	Alcohol Test	☐ Positive ☒ Negative	
BLOOD R/E	☒	SGPT	URINE: R/E	☒	
DC (differential count)	☒	SGOI	OTHERS		
HAEMOGLOBIN (HGB)	15.1	DRUG AND ALCOHOL TEST		HBsAg	
ESR (WESTERNGREN)	08	Morphine	☐ Positive ☒ Negative	HIV / AIDS Test	
WBC	9.600	Amphetamine	☐ Positive ☒ Negative	VDRL	
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive ☒ Negative	Blood Type	
RANDOM	5.3	Barbiturates	☐ Positive ☒ Negative	Psychological Exam	
HBA1C	5.27	Cocaine	☐ Positive ☒ Negative	Others (KUB Ultrasound)	

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

Rasha **23 FEB 2024**

Signature of Seafarer MD RASHA BIN RASEL Date

Name of Seafarer

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: **23 FEB 2024** Valid Until: **22 FEB 2026**

DR. MD. RAHAN

Name and Signature of the Medical Examiner

BDSG-A 53 (Rev. 16-04-2016)

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: RASEL		GIVEN NAME (S): MD RASHA BIN	
DATE OF BIRTH: DAY 10 MONTH 6 YEAR 1997		PLACE OF BIRTH CITY NARSINGDI COUNTRY BANGLADESH	SEX MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER ☐ DECK OFFICER ☒ ENGINEERING OFFICER ☐ RADIO OPERATOR ☐ RATING ☐		MAILING ADDRESS OF APPLICANT: VILL-GHURADIA, P.O. NARSINGDI COLLEGE, P.S. NARSINGDI SADAR DIST-NARSHINGDI, BANGLADESH. BANGLADESH.	

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION		COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	
RIGHT EYE	6/6	—	RIGHT EAR my
LEFT EYE	6/6	—	LEFT EAR my

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) **23 FEB 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.

Rasha

MD RASHA BIN RASEL

23 Feb-2024

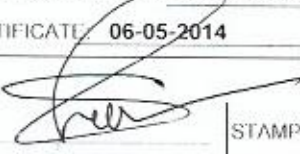
Signature of Applicant

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 MAKHUM 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: 	STAMP OF PHYSICIAN: 
EXPIRY DATE OF CERTIFICATE: 22 FEB 2026	DATE: 23 FEB 2024

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) DPM CCD (Bircem) PGT (Ophth)

BMDC A-55144, MMC-BGD-018

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: RASEL		GIVEN NAME (S): MD RASHA BIN	
DATE OF BIRTH: DAY 10 MONTH 6 YEAR 1997		PLACE OF BIRTH CITY NARSINGDI COUNTRY BANGLADESH	SEX MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER ☐ DECK OFFICER ☒ ENGINEERING OFFICER ☐ RADIO OPERATOR ☐ RATING ☐		MAILING ADDRESS OF APPLICANT: VILL-GHORADIA, FOR. NARSINGDI COLLEGE, P.O. NARSINGDI SADAR DIST-NARSHINGDI, BANGLADESH. BANGLADESH.	

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION		COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	
RIGHT EYE	6/6	—	RIGHT EAR W
LEFT EYE	6/6	—	LEFT EAR W

COLOR TEST TYPE:
☒ BOOK ☒ LANTERN
 YELLOW **W** RED **W**
 GREEN **W** BLUE **W**

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) **23 FEB 2024**

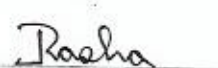
Are glasses or contact lenses necessary to meet the required vision standards? YES ☐ NO ☒

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.

 Signature of Applicant	MD RASHA BIN RASEL Name of Applicant	23-Feb-2024 Date
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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:

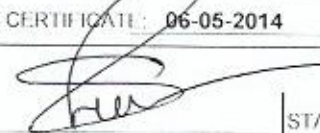
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NAME OF PHYSICIAN'S CERTIFYING AUTHORITY: **DG SHIPPING BANGLADESH**

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

SIGNATURE OF PHYSICIAN: 	STAMP OF PHYSICIAN: 	DATE: 23 FEB 2024
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DR. MIR MD. RAIHAN
 MBBS (DU), DPM, CCD (Birdem), PGD (Ophth)
 BMDC A-55144, MMC-BGD-016
 DG Shipping Bangladesh Approved
 General Physician
 Radical Hospitals Limited



HAQUE & SONS LTD.



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

Name	MD RASHA BIN RASEL	Date	23-Feb-2024
Age	26	Sex	MALE
Passport No	A13803992	CDC No	CO10409
Sample	BLOOD	Rank	APP OFFICER SCHOLAR

BIOCHEMISTRY REPORT COMPARE

Vessel Name:	GINGA CHEETAH	GINGA BOBCAT	
	After Sign-Off	Before Sign-On	Reference Range
Date of Report	25.11.2020	23.02.2024	-
Serum Bilirubin	0.58	0.6	0.2 - 1.1 mg/dl
Serum S.G.O.T/A.S.T	24	28	Up to 37 U/L
Serum S.G.P.T.	30	34	Up to 42 U/L

DOCTOR'S REMARKS:

No Restrictions



Doctor Seal & Signature

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

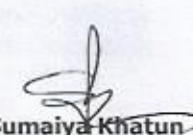
Id No : 598 **Date** : 23-Feb-2024 **D.Date** : 23-Feb-2024
Patient's Name : MD RASHA BIN RASEL **Age** : 26Y 8M 13D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/10409

Haematology Report

(Relevant estimations were carried out by Mythic-One Auto Haematology Analyzer & checked manually)

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	15.1 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl. Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
ESR(Westergreen)	08 mm/1st hr	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Total WBC Count(TC)	9600 /cumm	
Differential WBC Count (DC)		
Neutrophils	64 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	30 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	03 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	03 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	288 /cumm	50-450/cumm
Total RBC Count	4.9 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	42 %	M: 40-54%, F:37-47%
MCV	77 fL	76 - 94 fL
MCH	31 pg	27 - 32 pg
MCHC	30 g/dL	29 - 34 g/dL
RDW	12 %	11 - 16 %
PDW	36 fL	35 - 56 fL
Total Platelete Count (PC)	230000 /cumm	150,000-450,000/cumm
MPV	8.0 fL	7.0 - 11.0 fL
PCT	0.1 %	0.1 - 0.4 %
Bleeding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %


Checked By
 Medical Technologist


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

Bill No	DIA24020598	Received Date	23/02/2024
Patient's Name	MD RASHA BIN RASEL		
Patient's Age	26Y 8M 13D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/10409
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.3 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.6 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	28.0 U/L	Up to 37 U/L
Serum ALT (SGPT)	34.0 U/L	Up to 40 U/L
HbA1C	5.2 %	4.2 - 6.7 %

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	DIA24020598	Received Date	23/02/2024
Patient's Name	MD RASHA BIN RASEL		
Patient's Age	26Y 8M 13D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/10409
Sample	BLOOD		

SEROLOGICAL REPORT

<u>Test Name</u>	<u>Result</u>
HBsAg (Method : (ICT)	Negative
HIV 1 & 2 (Method : (ICT)	Negative
VDRL	Non-reactive
<u>BLOOD GROUPING RESULT</u>	
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	DIA24020598	Received Date	23/02/2024
Patient's Name	MD RASHA BIN RASEL		
Patient's Age	26Y 8M 13D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/10409
Sample	URINE		

URINE ROUTINE EXAMINATION**PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION**

Quantity	Sufficient	CELLS / HPF	
Color	Straw	RBC	Nil
Appearance	Clear	Pus Cells	1-3/HPF
Sediment	Nil	Epithelial	0-2/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	DIA24020598	Received Date	23/02/2024
Patient's Name	MD RASHA BIN RASEL		
Patient's Age	26Y 8M 13D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/10409
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromato graphic Assay (Rapid one Step Test)

Test Name	Result
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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.

REF: MT. GINGA BOBCAT

DATE: 23/02/2024

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

EYE EXAMINATION REPORT

NAME: MD RASHA BIN RASEL

RANK: APP OFF

CDC NO: C/O/10409

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: 24020574

23-02-2024 12:37:56

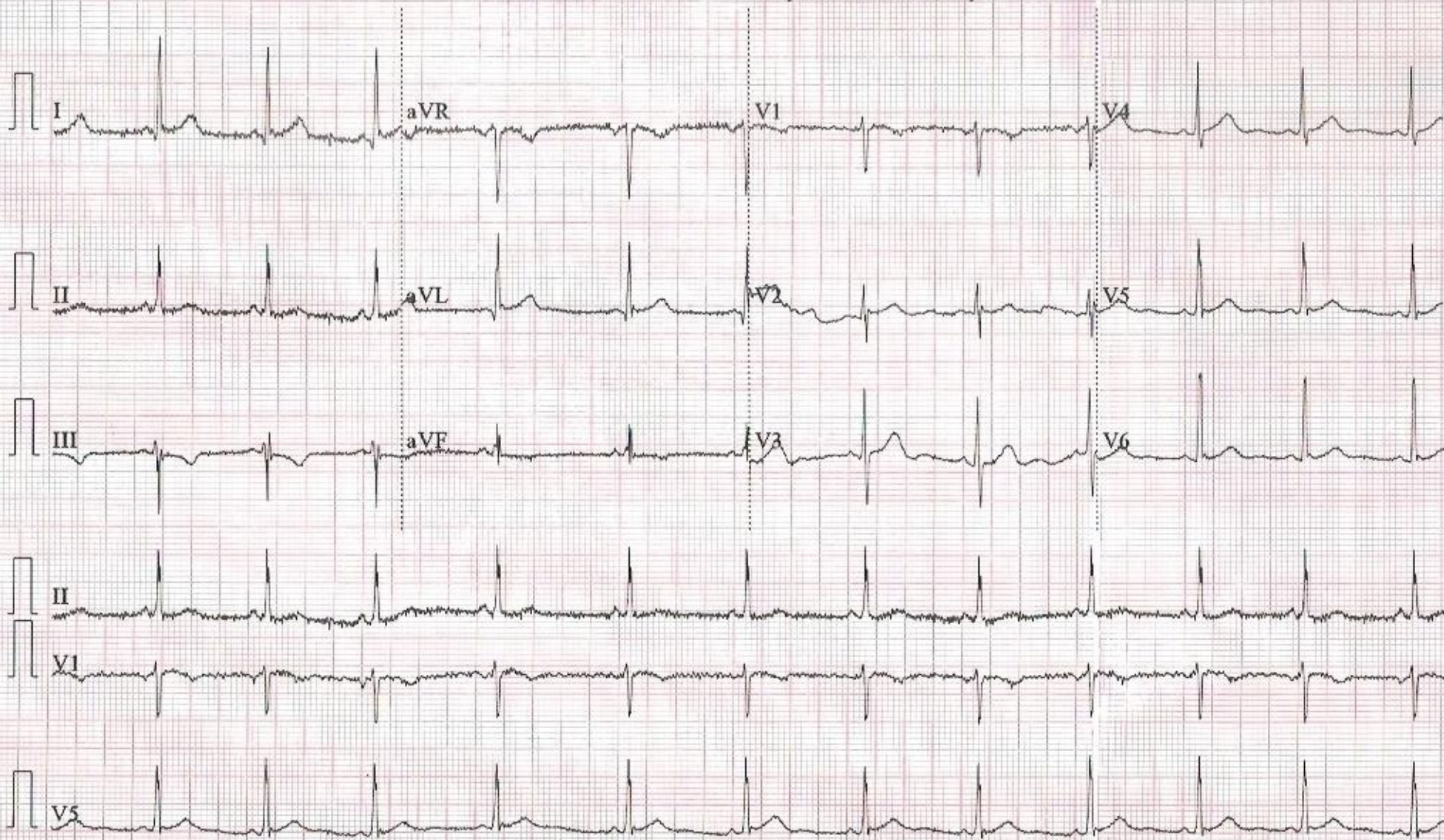
Male 26 Years *Rose*

HR : 73 bpm
P : 88 ms
PR : 100 ms
QRS : 94 ms
QT/QTc : 374/413 ms
P/QRS/T : 42/10/-13 °
RV5/SV1 : 1.269/0.767 mV

Diagnosis Information:

Sinus rhythm
Short PR interval
Inferior T wave abnormality is nonspecific
Borderline ECG

Report Confirmed by:



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24020598 Receive: 23/02/2024 Print: 23/02/2024
Patient's Name : MD RASHA BIN RASEL
Age : 26 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

a Patient ID	24020598	Voucher No	
Test Name	USG OF KUB	Delivery Date	23/02/2024
Patient Name	MD RASHA BIN RASEL		
Age	26 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 8.6cm, regular in shape and position. The cortical echogenicity are normal with clear cortico-medullary differentiation. The cortical thicknesses normal. The renal sinus shows normal echogenicity and thickness.
P-C systems are not dilated.

LT KIDNEY :- Is normal in size 9.7 cm, regular in shape and position. The cortical echogenicity are normal with clear cortico-medullary differentiation. The cortical thicknesses 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 normal .No intravesicle lesion is seen.

PROSTATE: Normal in size and volume is 11.3cc, regular in shape. Echogenicity is homogenous.
 No area of calcification is seen.

COMMENT : Normal study.

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

RADICAL HOSPITAL LTD**HOUSE # 35, SECTOR -12, SHAH MAKHDUM AVENUE,UTTARA,DHAKA.****ULTRASOUND REPORT**

Patient Name:

MD RASHIA BIN RASEL 26

Study ID:

20240223190531

Patient ID:

598

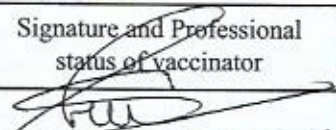
Patient Birthday



INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that } Date of birth 10/06/1997 Sex MALE
whose signature follows }

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
23 FEB 2004	 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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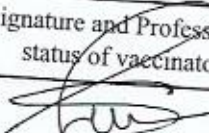
Continued overleaf Suite our erso

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that
whose signature follows

Date of birth 10/06/1997 Sex MALE

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
23 FEB 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.		
2			
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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 of 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, or failure to complete any part of it may render it invalid.