



HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaidanga, Agrabad C/A, Chattogram, Bangladesh.
Tel : +880 31 716214-6, Fax : +880 31 710530



Accredited By : BMDC
Accreditation No. A 55144

PATIENT CONTROL NUMBER:
HSL-003816

MEDICAL EXAMINATION CERTIFICATE

SURNAME HIMAL		FIRST NAME MOHAMMAD SHAHRIAR	MIDDLE NAME AHMED KHAN
PLACE AND DATE OF BIRTH PABNA 5-Apr-2000		PASSPORT NUMBER A04236541	SEAMAN'S BOOK NUMBER CO11733
NATIONALITY : BANGLADESHI SEX : ☒ Male ☐ Female		VESSEL TYPE : CHEM. TANKER	TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : VILL-MAJPARA, PO-KHIDIRPUR, PS-ATGHARIA, PABNA		CONTACT NUMBER : +8801771577150 (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

35 Have you ever been signed off as sick or repatriated from a ship?	YES	NO
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.

Shahriar

Signature of Seafarer

MEDICAL EXAMINATION

Weight 62 kg	Height (cm) 175	BM 20.8	Blood Pressure: Systolic 120 mm Diastolic 80 mm	PULSE: 78 bpm																												
<table border="1"> <thead> <tr> <th colspan="2">Hearing by Audiometry</th> <th colspan="4">Audiometry</th> <th colspan="2">Hearing by Whisper Test</th> </tr> <tr> <th></th> <th></th> <th>500</th> <th>1000</th> <th>2000</th> <th>3000</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Right</td> <td>☐ Adequate ☐ Inadequate</td> <td colspan="4" rowspan="2">N/A</td> <td>☐ Adequate</td> <td>☐ Inadequate</td> </tr> <tr> <td>Left</td> <td>☐ Adequate ☐ Inadequate</td> <td>☒ Adequate</td> <td>☐ Inadequate</td> </tr> </tbody> </table>					Hearing by Audiometry		Audiometry				Hearing by Whisper Test				500	1000	2000	3000			Right	☐ Adequate ☐ Inadequate	N/A				☐ Adequate	☐ Inadequate	Left	☐ Adequate ☐ Inadequate	☒ Adequate	☐ Inadequate
Hearing by Audiometry		Audiometry				Hearing by Whisper Test																										
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Left	☐ Adequate ☐ Inadequate					☒ Adequate	☐ Inadequate																									
Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☒ NO ☐																																

	Visual acuity				Visual fields	
	Unaided		Aided		Normal	Defective
	Right eye	Left eye	Right eye	Left eye		
Distant	6/1	6/1			☒	☐
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☐ Doubtful☐ DefectiveDate of last colour vision test: Date (day/month/year) 09 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	<u>NOT</u>	BIO CHEMICAL (LIVER FUNCTION TEST)	Marijuana	☐ Positive ☒ Negative
ECG	<u>NOT</u>	BILIRUBIN	Alcohol Test	☐ Positive ☒ Negative
BLOOD R/E	<u>NOT</u>	SGPT	URINE R/E	<u>NOT</u>
DC (differential count)	<u>NOT</u>	SGOT	OTHERS	
HAEMOGLOBIN (HGB)	<u>15.5</u>	DRUG AND ALCOHOL TEST		HBsAg
ESR (WESTERGREN)	<u>05</u>	Morphine	☐ Positive ☒ Negative	HIV / AIDS Test
WBC	<u>6.700</u>	Amphetamine	☐ Positive ☒ Negative	VDRL
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive ☒ Negative	Blood Type
RANDOM	<u>5.2</u>	Barbiturates	☐ Positive ☒ Negative	Psychological Exam
HBA1C	<u>5.07</u>	Cocaine	☐ Positive ☒ Negative	Others (KUB Ultrasound)

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

Signature of Seafarer ShahriarMOHAMMAD SHAHRIAR AHMED KHAN HIMAL
Name of Seafarer09 FEB 2024
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:

09 FEB 2024

Valid Until:

08 FEB 2026

DR. MIRZA RAIHAN

MBBS (DU), DPM, CCD (Biom), PGI (Opth)

MD (Surgery), DNB (Surgery) (No. 78) and STCW 1978/1996 as Amended, MLC 2006

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited.

MEDICAL EXAMINATION REPORT/CERTIFICATE
MARITIME ADMINISTRATOR
CONFIDENTIAL DOCUMENT
REPUBLIC OF THE MARSHALL ISLANDS

SURNAME HIMAL	GIVEN NAME(S) MOHAMMAD SHAHRIAR AHMED KHAN	
DATE OF BIRTH 4 MONTH 5 DAY 2000 YEAR	PLACE OF BIRTH PABNA CITY	SEX ☒ MALE ☐ FEMALE
MAILING ADDRESS OF APPLICANT: VILL-MAJPARA, PO-KHIDIRPUR, PS-ATGHARIA, PABNA BANGLADESH		
EXAMINATION FOR DUTY AS: MASTER ☐ DECK OFFICER ☒ ENGINEERING OFFICER ☐ RADIO OFFICER ☐ RATING ☐		

MEDICAL EXAMINATION (SEE REVERSE SIDE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE

HEIGHT 175cm	WEIGHT 64kg	BLOOD PRESSURE 125/80 mm	PULSE 78 bpm	RESPIRATION 19 /m	GENERAL APPEARANCE Good
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6 LEFT EYE 6/6		HEARING: RT. EAR my LEFT EAR my	
COLOR TEST TYPE: BOOK ☐ LANTERN ☐ IS COLOR TEST NORMAL? ☐ Yes ☐ No (IF "NO" EXPLAIN ON PAGE 2)					
ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARD? Yc ☐ No ☒					
HEAD AND NECK Normal			HEART (CARDIOVASCULAR) Normal		
LUNGS Normal			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION Yes		
EXTREMITIES: UPPER Normal LOWER Normal					
IS APPLICANT VACCINATED IN ACCORDANCE WITH WHO RECOMMENDATIONS? Yes ☒ No ☐					
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY WORKING ABOARD A VESSEL, OR TO RENDER HIM/HER UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? YES ☐ NO ☒					
IF YES, PLEASE ENTER EXPLANATION IN THE SECTION AT THE BOTTOM OF ON PAGE 2					
IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICATIONS? YES ☐ NO ☒					

Slabrian

SIGNATURE OF APPLICANT

09 FEB 2024

DATE OF EXAMINATION

08 FEB 2026

EXPIRY DATE

THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: **MOHAMMAD SHAHRIAR AHMED KHAN HIMAL**

FIT FOR DUTY ON BOARD SHIP

NAME OF APPLICANT

THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE DISEASE (OR VIRUSES FOR COOKS): YES ☒ NO ☐

SEAFARER IS FOUND TO BE: ☐ FIT / ☐ NOT FIT FOR DUTY AS A ☐ MASTER ☒ DECK OFFICER ☐ ENGINEERING OFFICER / ☐ RADIO OFFICER / ☐ RATING / ☐ CHIEF COOK / ☐ COOK ☒ WITHOUT ANY RESTRICTIONS / ☐ WITH THE FOLLOWING RESTRICTIONS:

NAME AND DEGREE OF PHYSICIAN	DR. MIR MD. RAIHAN; M.B.B.S.(D.U.), REG. NO. A-55144
ADDRESS	RADICAL HOSPITALS LIMITED 35, SHAH MAKHDUM AVENUE, SECTOR-12 UTTARA, DHAKA-1230, BANGLADESH
NAME OF PHYSICIAN'S CERTIFYING	DG SHIPPING BANGLADESH
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE	6-May-2014
SIGNATURE OF PHYSICIAN	09 FEB 2024
	DATE

This certificate is issued by authority of the Maritime Administrator and in compliance with the requirements of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers 1978, as amended, and the Maritime Labour Convention, 2006, as amended

Rev. Mar/2022

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

MEDICAL REQUIREMENTS



MI-105M

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifications shall be required to have a medical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer's certificate, application for Seafarer's Identification and Record Book, or application for certification of special qualifications. This medical examination must be carried out within the 24 months immediately preceding application for an officer certificate, certification of special qualifications or a Seafarer's Identification and Record Book. The examination shall be conducted in accordance with RMI MG-7-47-1. 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 seafarer's 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 whispered voice in better ear at 15 feet (4.57 m) and in poorer ear at 5 feet (1.52 m).
- (b) Eyesight
 - Deck officer applicants must have (either with or without glasses) at least 20/20 (1.00) vision in one eye and at least 20/40 (0.50) in the other. Applicants for deck officer and deck ratings who will serve on vessels of 500 gross tons or more must have normal color perception that complies with C.I.E. Standard 1; those serving on vessels less than 500 gross tons must comply with C.I.E. Standards 1 or 2.
 - Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 (0.63) vision in one eye and at least 20/50 (0.40) in the other. Applicants for engineering officer or rating and for radio operator must comply with C.I.E. Standards 1, 2, or 3. 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/Navigation officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (f) Vaccinations
 - All applicants should be vaccinated according to the recommendations provided in the WHO publication, International Travel and Health, Vaccination Requirements and Health Advice, and should be given advice by the certified physician on immunizations. If new vaccinations are given, these should 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 use of narcotics.
- (h) Physical Requirements
 - Applicants for able seafarer, bosun, GP-1, ordinary seafarer and junior ordinary seafarer must meet the physical requirements for a deck/navigation officer's certificate.
 - Applicants for fire/watertender, oiler/motor, pump technician, electrician, wiper, tanker rating and survival craft/rescue boat crewmember must meet the physical requirements for an engineer officer's certificate.

IMPORTANT NOTE:

A copy of the MI-105M must accompany the application. The applicant must retain the original of the MI-105M as evidence of physical qualification while serving on board a vessel.

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 right 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 an equivalent form.
(See RMI MG 7-47-1, §3.3).

1. COMPLETE PHYSICAL EXAMINATION, INCLUDING HEARING TEST.
2. PATHOLOGICAL EXAMINATION A) Complete Blood Count. B) Blood Sugar Estimation C) Serological Test (VDRL)
D) Hepatitis B Surface Antigen Test (HbsAg), E) Urinalysis F) Drug Test G) Alcohol Test
3. X - RAY EXR PA VIEW
4. E.C.G. TEST
5. EYE EXAMINATION FOR V/A & C/V



DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birm), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
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Agrabad C/A, Chattogram, Bangladesh.
Tel: +88 02333316214-6



Name	MOHAMMAD SHAHRIAR AHMED KHAN HIMAL	Date	9-Feb-2024
Age	23	Sex	MALE
Passport No	A04236541	CDC No	CO11733
Sample	BLOOD	Rank	APP OFFICER SCHOLAR

BIOCHEMISTRY REPORT COMPARE

Vessel Name:	FURANO GALAXY	ZAO GALAXY	
	After Sign-Off	Before Sign-On	Reference Range
Date of Report	12.12.2023	09.12.2024	-
Serum Bilirubin	0.58	0.50	0.2 - 1.1 mg/dl
Serum S.G.O.T/A.S.T	22	17	Up to 37 U/L
Serum S.G.P.T.	26	22	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 Shippang Bangladesh Approved

General Physician

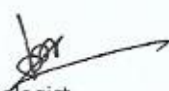
Radical Hospitals Limited

Id No : 0239 **Date** : 09-Feb-2024 **D.Date** : 09-Feb-2024
Patient's Name : MOHAMMAD SHAHRIAR AHMED KHAN HIMAL **Age** : 23Y 10M 4D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/11733

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	15.5 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl.
ESR(Westergreen)	05 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	6700 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	64 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	31 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	03 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	134 /cumm	50-450/cumm
Total RBC Count	5.1 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	41 %	M: 40-54%, F:37-47%
MCV	78 fL	76 - 94 fL
MCH	29 pg	27 - 32 pg
MCHC	33 g/dL	29 - 34 g/dL
RDW	12 %	11 - 16 %
PDW	36 fL	35 - 56 fL
Total Platelete Count (PC)	320000 /cumm	150,000-450,000/cumm
MPV	8.0 fL	7.0 - 11.0 fL
PCT	0.1 %	0.1 - 0.2 %
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	DIA24020239	Received Date	09/02/2024
Patient's Name	MOHAMMAD SHAHRIAR AHMED KHAN HIMAL		
Patient's Age	23Y 10M 4D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11733
Sample	BLOOD		

BIOCHEMISTRY REPORT

<u>Test Name</u>	<u>Result</u>	<u>Reference Range</u>
Random Blood Sugar (RBS)	5.2 mmol/L	4.2 – 6.4 mmol/L
Serum Bilirubin (Total)	0.50 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	17.0 U/L	Up to 37 U/L
Serum ALT (SGPT)	22.0 U/L	Up to 40 U/L
HbA1C	5.0 %	4.2 - 6.7 %

REMARKS (IF ANY)

IN VIEW OF THE LIVER FUNCTION TEST RESULT, HIS BLOOD IS FREE FROM TOXIC EFFECT OF CHEMICAL.

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	DIA24020239	Received Date	09/02/2024
Patient's Name	MOHAMMAD SHAHRIAR AHMED KHAN HIMAL		
Patient's Age	23Y 10M 4D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11733
Sample	BLOOD		

SEROLOGICAL REPORT

Test Name

Result

HBsAg (Method : (ICT)	Negative
HIV 1 & 2 (Method : (ICT)	Negative
VDRL	Non-reactive
<u>BLOOD GROUPING RESULT</u>	
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	DIA24020239	Received Date	09/02/2024
Patient's Name	MOHAMMAD SHAHRIAR AHMED KHAN HIMAL		
Patient's Age	23Y 10M 4D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11733
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	Straw	RBC	Nil
Appearance	Clear	Pus Cells	0-2/HPF
Sediment	Nil	Epithelial	1-3/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	DIA24020239	Received Date	09/02/2024
Patient's Name	MOHAMMAD SHAHRIAR AHMED KHAN HIMAL		
Patient's Age	23Y 10M 4D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11733
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.

REF: MT. ZAO GALAXY

DATE: 09/02/2024

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

EYE EXAMINATION REPORT

 NAME: MOHAMMAD SHAHRIAR AHMED KHAN
 HIMAL

RANK: APP OFF

CDC NO: C/O/11733

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

6/6

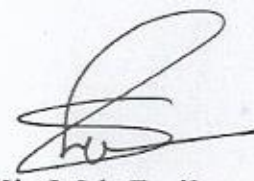
6/6

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: 125

09-02-2024 12:47:07

Mubammad Shahbaz Akbar

Male 23 Years 6'10" 160 lbs

HR

: 94 bpm

Diagnosis Information:

Sinus rhythm

rSr'(V1) - probable normal variant

Normal ECG

P

: 126 ms

PR

: 156 ms

QRS

: 96 ms

QT/QTc

: 358/448 ms

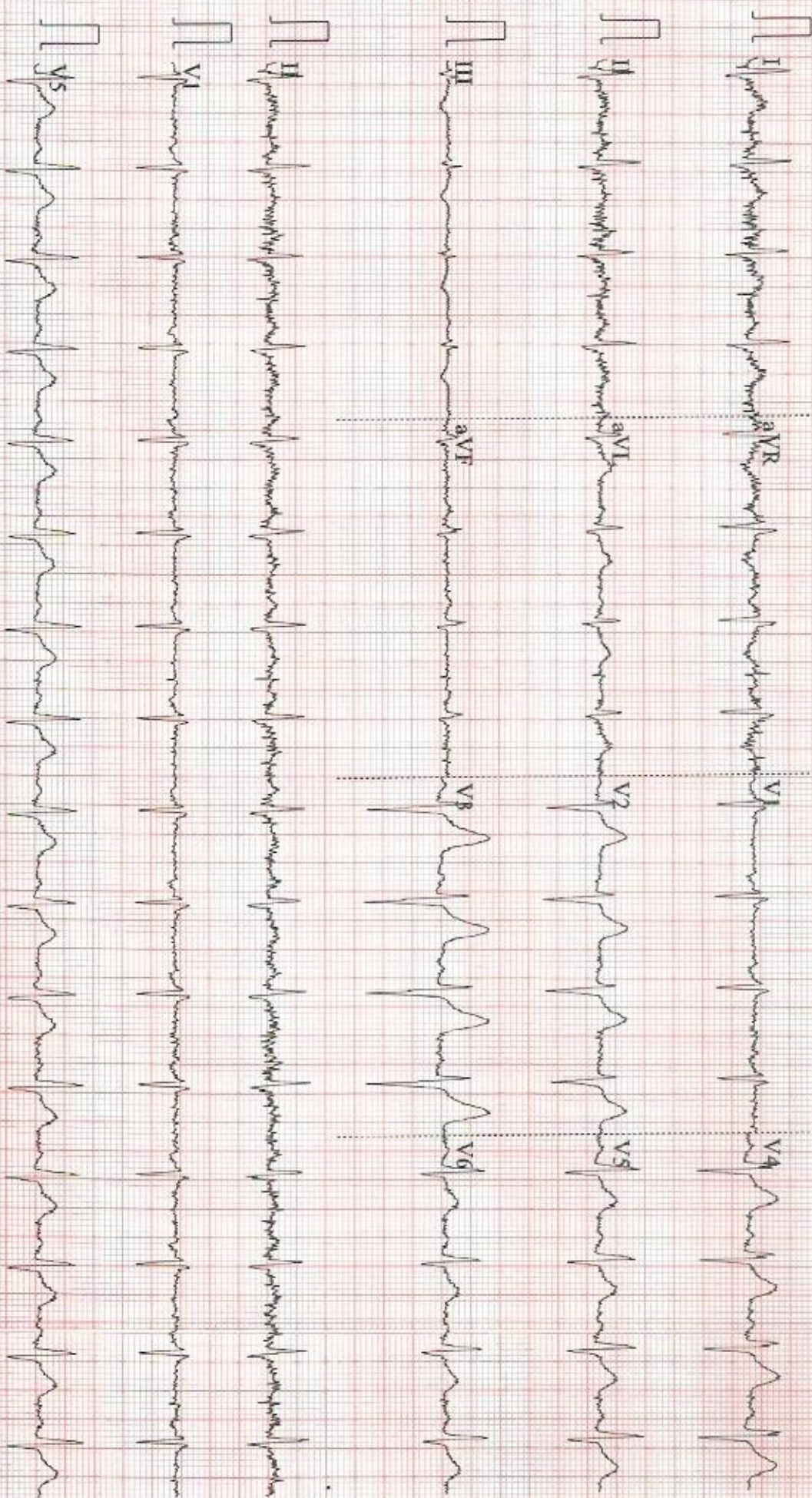
P/QRS/T

: 38/48/4 °

RV5/SV1

: 0.738/0.647 mV

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 4*2.5s+3r 94

SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24020239 Receive: 09/02/2024 Print: 09/02/2024
Patient's Name : **MOHAMMAD SHAHRIAR AHMED KHAN HIMAL**
Age : 23 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

Patient ID	24020239	Voucher No	
Test Name	USG OF KUB	Delivery Date	09/02/2024
Patient Name	MOHAMMAD SHAHRIAR AHMED KHAN HIMAL		
Age	23 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 – 9.8 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 7.8 cc, regular in shape. Echogenicity is homogenous. No area of calcification is seen.

COMMENT: Suggestive of Normal study.

AA 9.2.24
Dr. Asma Ahmed
MBBS,CMU,DMU
PGT(Gynae & obs)
Advanced Training on TVS
Consultant Sonologist

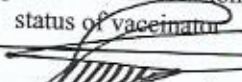
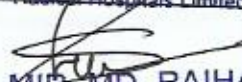
INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

MOHAMMAD SHAHRIAR RAHMAN
KHAN HAMEL

This is to certify that
whose signature follows

Date of birth 05-04-2000 Sex MALE

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
01 JUN 2023	 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	
09 FEB 2024	 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.	

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