



HAQUE & SONS LTD.

Tel: +880-2-333316214-6, Fax: +880-2-333310530



Accredited By : BMDC Accreditation No. A 55144

> PATIENT CONTROL NUMBER H528

MEDICAL EXAMINATION CERTIFICATE

	E	FIRST NA		G-WYDG-WIDE		MIDDLE NAME		
	AHSAN			MMAD			MARJANUL	
Zel Will	ND DATE OF BIRTH	PASSPOR	RT NUMBER			SEAMAN'S BO		
	IAKA 3-May-1987			21951			CO4625	
	ALITY: BANGLADESHI SEX:	Male	☐ Female	VESSEL TY			ADING AREA: W	
	ENT HOME ADDRESS:				CONTA	ACT NUMBER :	0088 0164	14361569
IGLAD	28, ROAD # 08, SECTOR # 13, UT DESH	IAKA WEST	, UTTAKA-12	230, DHAKA,	RANK	*	CHIEF O	FFICER
lave y	ou ever had any of the following cor	nditions?						
	Condition	YES	NO I	Condition	on.		YES	NO.
1	Eye/vision problem		8	18 Sleep pr				
2	High blood pressure		Ø	19 Do you s				
3	Heart/vascular disease		4	20 Operation		v		0
4	Heart surgery	0	ū l	21 Epilepsy			ā	
5	Varicose veins		o'	22 Dizzines				8
6	Asthma/bronchitis		G/	23 Loss of			a	2
7	Blood disorder			24 Psychiat			V 6	0
8	Diabetes		B	25 Depress			6/3	100
9	Thyroid problem			26 Attempte			11/0	100
10	Digestive disorder		ď	27 Loss of		1	1 LA	10
11	Kidney problem	o	œ'	28 Balance		(11)	1158	0
12	Skin problem		ō l	29 Severe I			110 0	3
13	Allergies	О	0/			problems		3
14	Infectious/contagious diseases		O/	31 Restricte	the terms of			B
15	Hernia		B.	32 Back pro				O/
16	Genital disorders		DÍ -	33 Amputat	7 7			3
17	Pregnancy		NA	34 Fracture		etions	0	
	of the above questions were answer onal questions Have you ever been stoned off as	(5)	11/2				YES	NO E
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Distant Registery Let eye Registery Registery Let eye Let eye Let eye Registery Registery Let eye Registery Re										Norma	al	Defective
Value and analy meets the standard laid down in STCW Code Segian A-1/9	Dietant			Right eye		Left eye		Dight o	10		_	
Defective Defe		0/6	106			30/3/19/20					7	
Date of last colour vision test: Date (day/month/year) 23 FEB 2024 Normal Abnormal		meets the str	andard laid down	in STCW Co.	de Ser	ction A-1/				-		
Head Varioses veins Varioses veins	Colour vision	as per STCV	V CODE Section	A-1/9;	D No	rmal		Doubtfu	ıl	□ Def	ective	
Hearia Varicose veins Varicose veins Wascular (inc. pedal pulses) Wascular (inc. pe			a	Normal Abr	arma							record areas
Sinuses, nose, throat MouthNeeth MouthNe	Head		3				coso voi	26			NO	
Mouth/leeth Ears (general) Hernia Abdomen and viscera Hernia For Anus (not rectal exam) Hernia Positive Ophalmoscopy Dupber and lower extremities Upper upper and lower extremities Upper	5.505	e throat			100			5.550.5	vileos)			
Ears (general)		c, tinoat										
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Opthalmoscopy Pupils Sprine (C75, T75 and US)		ambrane		•				ctal exan	n)			
Pupils Eye movement Lungs and chest Breast examination Heart Skin SULTS OF ANCILLARY EXAMINATIONS Chest X-Ray BIO CHEMICAL (LIVER FUNCTION TEST) Margiuma Li Positive Negative ECG BILIRUBIN Alcohol Test Positive Negative Negative BLOOD RE SGOT HAEMOGLOBIN (HGB) DRUG AND ALCOHOL TEST HABAG LORD RE LOOD GLUCOSE LEVEL Phenyscildine BLOOD GLUCOSE LEVEL Phenyscildine BLOOD GLUCOSE LEVEL Phenyscildine BLOOD GLUCOSE LEVEL Phenyscildine BLOOD GLUCOSE LEVEL Phenyscildine Drostitive Negative Positive Negative Drostitive	N. P. S.	V200 00		2000					0010420000			750. V7
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Skin			150			1000000						a/() 0
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Chest X-Ray									/	3/1	11	
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ESR (WESTERGREN) Morphine			2120 SC	T : T : 1		9		11	1	C	THERS	1
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MBC Manphetamine Positive Negative Monreacti Monreacti Monreacti BLOOD GLUCOSE LEVEL Phepsycididire Positive Negative Blood Type ABH(VE)	ESR (WESTE	ERGREN)	9-6. M	orphine	10				HIV / AIDS T	est		
BLOOD GLUCOSÉ LEVEL Phepsyclidine Prositive Negative Blood Type AB+(VE) RANDOM Barbhurates Positive Positive Psychological Exam Positive Psychological Exam Positive Positive Others(RUB Ultrasound) REDUTED I declare that I am. in Knowledge of the contents of the Physical examinations: WINDER MARAMAD MARJANUL AHSAN Name of Seafarer Date Sessment of fitness for service at sea: The basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the aminee medically: Fit for lookout duties Not fit for lookout duties Deck service Engine service Catering service Other services Without restrictions With restrictions With restrictions With restrictions AB+(VE) Positive Psychological Exam Psychological Exam Positive Others(Rubanum) Positive Psychological Exam Positive Others(Rubanum) Positive Psychological Exam Psychological Exam Psychological Exam Positive Others(Rubanum) Psychological Exam		- e			and the last of th							
RANDOM Barbiturates Positive Negative Psychological Exam HBA1C Cocaine Positive Negative Othersixua Ulrasound) Treby I declare that I am in knowledge of the contents of the Physical examinations: WHAMMAD MARJANUL AHSAN Name of Seafarer Date The basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the aminee medically: Fit for lookout duties Not fit for lookout duties Deck service Engine service Catering service Other services fit Without restrictions With restrictions With restrictions With restrictions 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 danger the health of other persons on board? Yes No Scribe restrictions (e.g., specific position, type of ship, trade area): Stone the seafarer free from any medical examiner (e.g., referral):		D GLUCOSE										
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MUHAMMAD MARJANUL AHSAN Name of Seafarer Name of Seafarer Date Issessment of fitness for service at sea: In the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the aminee medically: Fit for lookout duties Deck service Engine service Catering service Other services With restrictions With restrictions With restrictions With restrictions 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 danger the health of other persons on board? Yes No Scribe restrictions (e.g., specific position, type of ship, trade area): tion taken by medical examiner (e.g., referral):	reby I declare	that I am in ƙ	nowledge of the	contents of the	e Phys	sical exam	ninations	e e	120			2 2 EED 2021
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danger the health of other persons on board? Yes No Scribe restrictions (e.g., specific position, type of ship, trade area): tion taken by medical examiner (e.g., referral):												
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In Accordance with Medical Examination Reparates 10h MMIGRIST (No. 78) and STCW 1978/1996 as Amended, MLC 2006
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.
Revision Date: 24 Revision: 5.1 Revision Date: 24th July 2022

MEDICAL CERTIF	ICATE FOR I	PERSONNEL SERVICE	ON BOARD			
SURNAME: AHSAN	GIVE	GIVEN NAME (S): MUHAMMAD MARJANUL				
DATE OF BIRTH:	PLACE	OF BIRTH	SEX			
DAY 3 MONTH 5 YEAR 198	87 CITY	DHAKA COUNTRY	BANGLADESH MALE FEMALE			
POSITION ON BOARD:	MAILIN	G ADDRESS OF APPLICAN				
MASTER DECK OFFICER ENGINEERING OFFICER RADIO OPERATOR RATING		E # 28, ROAD # 08, SECTOR A-1230, DHAKA, BANGLAD				
DECLARATION OF THE AUTHORIZED PHYSICIAN						
VISION		COLOR TEST TYPE	HEARING			
WITHOUT GLASSES V	VITH GLASSES	Воок	*			
RIGHT EYE	_	LANTERN YELLOW MM RED MM	RIGHT EAR +W			
LEFT EYE 64	30 <u></u>	GREEN MAY BLUENDY	LEFT EAR (M)			
Confirmation that identification documents were chec	ked at the point of	examination: YES NO	i			
Hearing meets the standards in STCW Code, Section	1 A-1/9? YES	NO NOT APLICABI	LE			
Unaided hearing satisfactory? VES NO	AMAZINI YA CI YAMAZI					
Visual acuity meets standards in STCW Code, Section	on A-1/9? YE&	NO 🗆				
Colour vision meets standards in STCW Code, Section		NO []				
(the visual test it is required every six years)		Ш				
Date of the last colour vision test: (Day/Month/Year)	23 FE	B / 2024				
Are glasses or contact lenses necessary to meet the			-			
Able for watchkeeping? YES NO		The Desired				
Is applicant taking any non-prescription or prescription	n medications? YE	s Not				
Is the seafarer free from any medical condition likely tendanger the health of other persons on board? YES	to be aggravated b		seafarers unfit for such service or to			
Hereby I declare that I am in knowledge of the conter	nts of the Physical	Examination.				
S	9					
Jwl MUHAN	MMAD MARJAN	UL AHSAN	2 3 FEB 2024			
Signature of Applicant	Name of Applica	nt	Date			
CIRCLE APPROPIATE CHOICE: (HE / SHE) IS ENGINEERING OFFICER / RADIO OPERATOR	FOUND TO BE	(FM / NOT FIT) FOR DUTY	AS A (MASTER / DECK OFFCIER /			
FI	T FOR DUTY	ON BOARD SHIP				
NAME AND DEGREE OF PHYSICIAN: DR. MIR ME	D. RAIHAN; M.B.	.B.S.(D.U.), REG. NO. A-5514	14			
ADDRESS: REDICAL HOSPITALS LIMITED, 35, SHAH MA	KHDUM AVENUE, S	ECTOR-12, UTTARA, DHAKA-1230,	BANGLADESH.			
NAME OF PHYSICIAN'S CERTIFICATING AUTHOR	TY: DG SHIPPIN	IG BANGLADESH				
DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06	05-2014					
SIGNATURE OF PHYSICIAN:	STAMP	OF PHYSICIAN: As Per Ma	2 3 FEB 2024			
EXPIRY DATE OF CERTIFICATE:	2 2 FE	18				
	100000000000000000000000000000000000000	compliance with the requirement				
		ed and the Maritime Labour Cor				
DR. MIR. MD. RAIH	AN					

MBBS (DU), DFM, CCD (Birdem), PGT (Uphth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician

MEDICAL CERTIFICATE	FOR PERSONNEL SERVICE ON BOARD
SURNAME: AHSAN	GIVEN NAME (S): MUHAMMAD MARJANUL
DATE OF BIRTH;	PLACE OF BIRTH SEX
DAY 3 MONTH 5 YEAR 1987	CITY DHAKA COUNTRY BANGLADESH MALE FEMALE
POSITION ON BOARD:	MAILING ADDRESS OF APPLICANT:
MASTER DECK OFFICER ENGINEERING OFFICER RADIO OPERATOR RATING	HOUSE # 28, ROAD # 08, SECTOR # 13, UTTARA WEST, UTTARA-1230, DHAKA, BANGLADESH
DECLARATION OF THE AUTHORIZED PHYSICIAN	
VISION	COLOR TEST TYPE HEARING
WITHOUT GLASSES WITH GLA	ASSES BOOK
RIGHT EYE —	LANTERN RIGHT EAR _ WY
LEFT EYE GC	GREEN BLUE (M) LEFT EAR (M)
Confirmation that identification documents were checked at the	e point of examination: YES NO
Hearing meets the standards in STCW Code, Section A-1/9?	YES NO NOT APLICABLE
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
	3 FEB 2024
Date of the last colour vision test: (Day/Month/Year)	J FED 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 medica	tions? YES NOT
	ravated by service at sea or to render the seafarers unfit for such service or to
Hereby I declare that I am in knowledge of the contents of the	Physical Examination.

twl MUHAMMAD M	MARJANUL AHSAN 2 3 FEB 2024
Signature of Applicant Name	of Applicant Date
CIRCLE APPROPIATE CHOICE: (HE / SHE) IS FOUND	O TO BE (FIT +NOT FIT) FOR DUTY AS A (MASTER / DECK OFFCIER / ING) (WITHOUT ANY / WITH THE FOLLOWING) RESTRICTIONS:
FIT FOR DU	JTY ON BOARD SHIP
NAME AND DEGREE OF PHYSICIAN: DR. MIR MD. RAIHA	AN: M.B.B.S.(D.U.), REG. NO. A-55144
ADDRESS: REDICAL HOSPITALS LIMITED, 35, SHAH MAKHDUM A	
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: DG	
DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06-05-2014	
SIGNATURE OF BLAVEICIANI.	STAMP OF PHYSICIAN: 2 3 FEB 2024
SIGNATURE OF PHYSICIAN:	
	2 FEB 2026
1. a r 144 a a a a	ssued in compliance with the requirements as amended and the Maritime Labour Convention, 2006.
DR. MIR. MD. RAIHAN	

MSBS (DU) DFM, CCD (Birdem), PG1 (Opinin) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician



other

radical_hospitals@yahoo.com, www.radicalhospital.com

Id No : 0606 Date : 23-Feb-2024 D.Date : 23-Feb-2024

Patient's Name: MUHAMMAD MARJANUL AHSAN Age: 36Y 9M 19D Gender: Male

Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/4625

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	12.2 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.
ESR(Westergreen)	06 mm/1st hr	Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	7,600 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		Sergradus (de la esta Mentre a marca est el cidade estado e a bosa.
Neutrophils	65 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	30 %	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	152 /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)	2,25,000 /cumm	150,000-450,000/cumm
MPV	8.0 fL	7.0 - 11.0 fL
PCT	0.1 %	0.1 - 0.%
Bledding 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	DIA24020606	Received [)ate	23/02/2	2024
Patient's Name	MUHAMMAD MARJANUL AHSAN			LOIGERE	.024
Patient's Age	36Y 9M 19D	Pa	tient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEN	M),PGT(Eye),DFM	CI	DC NO	C/O/ 4625
Sample	BLOOD				0.0/4023

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.6 mmol/L	4.2 – 6.4 mmol/L
Serum Bilirubin (Total)	0.58 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	22.0 U/L	Up to 37 U/L
HbA1C	5.2 %	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	DIA24020606	Received Da	te 23/02/2	2024
Patient's Name	MUHAMMAD MARJANUL AHSAN		LOIOZII	2024
Patient's Age	36Y 9M 19D	Patie	ent's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDER		CDC NO	C/O/ 4625
Sample	BLOOD		ODO NO	C/O/ 4023

SEROLOGICAL REPORT

Test Name

Result

HBsAg (Method : (ICT)	Negative	
HIV 1 & 2 (Method : (ICT)	Negative	
VDRL	Non-reactive	

Checked By

Medical Technologist. Radical Hospital Ltd. Dr. Sumaiya Khatun MBBS, MD (Microbiology) Associate Professor

Dept. of Microbiology
East West Medical College and Hospital.



DIA24020606	Received D	ate 23/02	/2024
MUHAMMAD MARJANUL AHSAN			HERE 200
36Y 9M 19D	Par	tient's Sex	Male
Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDE	M),PGT(Eye),DFM	CDC NO	C/O/ 4625
URINE		1.11	
	MUHAMMAD MARJANUL AHSAN 36Y 9M 19D Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDER	MUHAMMAD MARJANUL AHSAN 36Y 9M 19D Part Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	MUHAMMAD MARJANUL AHSAN 36Y 9M 19D Patient's Sex Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF		
Color	Straw	RBC	Nil	27
Appearance	Clear	Pus Cells	0-2/HPF	
Sediment	Nil	Epithelial	0-1/HPF	

CHEMICAL EXAMINATION CASTS / LPF

Reaction	Acidic	RBC	Nil
Albumin	Nil	WBC	Nil
Sugar	Nil	Epithelial	Nil
Ex.Phosphate	Nil	Granular	Nil
	1 1/ 15-	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.



Test Name



Bill No	DIA24020606	Received Date 23/02		2/2024	
Patient's Name	MUHAMMAD MARJANUL AHSAN		20/0	72024	
Patient's Age	36Y 9M 19D	Patient's Sex		Male	
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),	100	CDC NC	0.000.000.000	
Sample	URINE		000110	C/O/ 4023	

DRUG ABUSE TEST

METHOD: Immunochromato graphic Assay (Rapid one Step Test)

Result

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

RADICAL HOSPITAL

radical_hospitals@yahoo.com, www.radicalhospital.com

REF: MV. SEA TREASURE

DATE: 23/02/2024

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

EYE EXAMINATION REPORT

NAME: MUHAMMAD MARJANUL AHSAN RANK: CH.OFF CDC NO: C/O/4625

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

6/1

600

AIDED

COLOUR VISION:

NORMAL / BLIND

OPINION

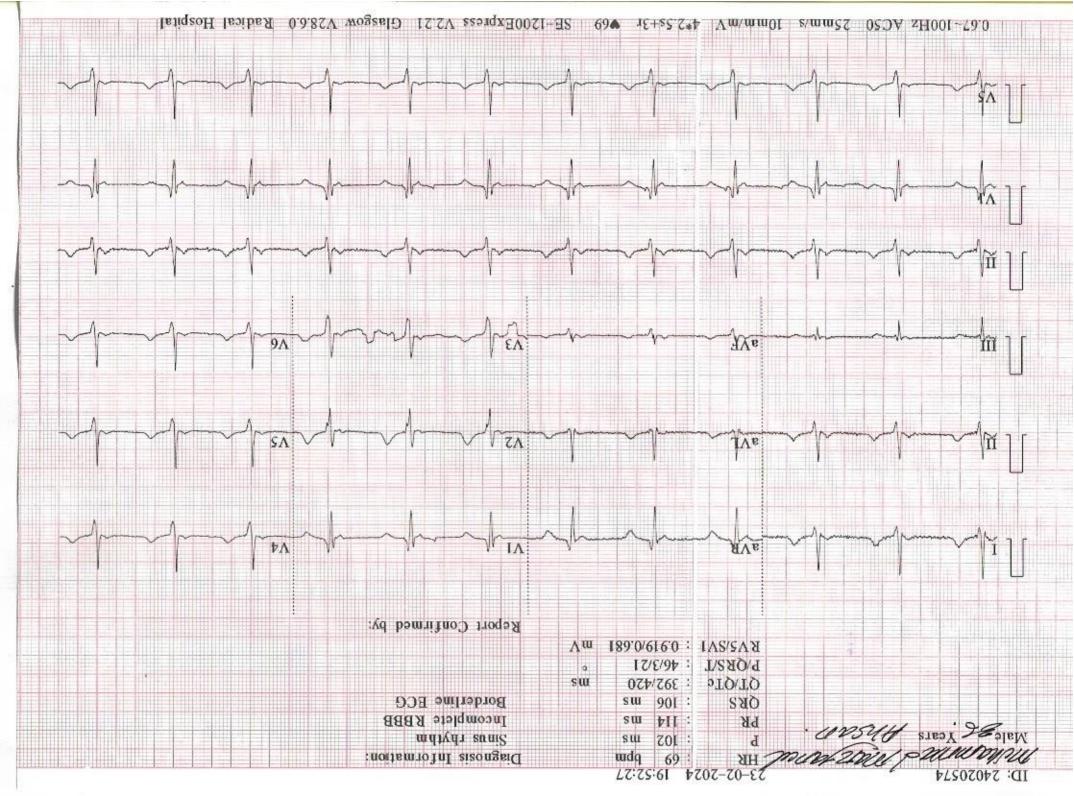
UNFIT / FIT FOR EMPLOYMENT ON BOARD

Dr. Mir Md. Raihan

MBBS, PGT (Ophthalmology)

Assistant Registrar (EX)

East west Medical College & Hospital





DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24020606 Receive:23/02/2024 Print: 23/02/2024

Patient's Name : MUHAMMAD MARJANUL AHSAN

Age : 36 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 ields are clear.

Bony thorax : Reveals no abnormality.

Comments : Normal chest skiagram.

Prof. Dr. Md. Mojibor Rahman

MBBS. DMRD (Radiology & Imaging)

Head of the Department (Radiology & Imaging) Sylhet Women's Medical College Hospital

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that whose signature follows

certify that gnature follows Date of birth 03-MAY-1987 Sex MALE

MUHAMMAD MARJANUL AHSAN

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator		
Sep.	General HityStCiau	SS, Shah Makhdum Avenus Utters, Ohaba	
03	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	35, Shah Makhdum Avenus Whara, Dhaka	
3		3	4
4		man de la laction de la company	end abundancing
5		5	6
6			
7		7	8
8			10

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that whose signature follows

Date of birth 03-MAY-1987 Sex MALE

has on the date indicated been vaccinated or revaccinated against yellow-fever

Date Signature and Professional status of vaccination centre

Status of vaccination centre

DR. MIR. MD. RAIHAN
MSBS (DU) DFM, CCD (Birdem), PGT (Ophth)
MSBS (DU) DFM, CCD (Birdem), PGT (DFM)
MSBS (DU) DFM, CCD (Birde

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 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, of failure to complete any part of it may render it invalid.