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 : RAHMAN ATIQUR (SURNAME, FIRST NAME, MIDDLE NAME) Sex : M Serial No. :

Date of Birth : 22-10-1972 PP/CDC No.: C/0/2329 Nationality: BANGLADESHI

Rank: MASTER Vessel: MV OPAL LEADER Type: PCTC Route : WORLDWIDE

Home Address : FLAT 3B, HOUSE 15, ROAD 06, SECTOR 06, UTTARA, DHAKA, BANGLADESH

Company Name & Address: WALLEM SHIPMANAGEMENT LTD, HONG KONG

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 Yes	Candidate Declaration No	Examiner Record Yes	Examiner Record No	Is there any past/present history of any of the following?	Candidate Declaration Yes	Candidate Declaration No	Examiner Record Yes	Examiner Record No
Severe one-side headaches (Migrane)		✓		✓	Hernia / Hydrocoele / Appendicitis		✓		✓
Head Injury / Concussion / Loss of Memory		✓		✓	High/Low Blood Pressure / Heart Disease		✓		✓
Fits / Epilepsy / Dizziness / Fainting		✓		✓	Asthama / Bronchitis / Tuberculosis		✓		✓
Eye / Vision / Problems (Glasses etc)		✓		✓	Allergy / Skin Disease		✓		✓
Hearing Impairment		✓		✓	Infection / Contagious Disease		✓		✓
Ear / Nose / Throat Problem		✓		✓	Addiction to alchohol / 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 psycological 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 : 04 FEB 2024 A. Rahaman (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
162cm	73kg	120/80mmHg	78/min	20/min	HEALTHY

Compliant with MLC2006, STCW 2010 STANDARD A-1/9

Distant Vision (Snellen's Chart)	Uncorrected	Corrected
Right Eye	6/6	
Left Eye	6/6	

Colour Vision			
Ishihara's	Normal	Abnormal	
Others	Normal	Abnormal	

Field Of Vision	
Normal	
Abnormal	

Audiometry	Hz	500	1000	2000	3000	4000	5000	6000	8000
Right Ear	dB	20	20	20		Not Indicated			
Left Ear	dB	20	20	20					

*Hearing	Normal Voice	Whispered Voice
Right Ear	4 METER	2 METER
Left Ear	4 METER	2 METER

Compliant with MLC2006, STCW 2010 STANDARD A-1/9

Systemic Examination	Norm	Abnor	Notes		Norm	Abnor
Head & Neck	✓		FIT FOR SEA SERVICE AS MASTER AS PER MLC 2006 Enhanced GARD Medicals done	Respiratory System	✓	
Eyes	✓			Cardiovascular System	✓	
Ear / Nose / Throat	✓			Per 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
Haemoglobin	11.2	M:13-17 F:12-15 gm%	Colour	Straw
Total WBC Count	9,700	4000 - 10000 / cu.m	Specific Gravity	Nil
Neutr 62% Lymph 32% Eos 2% Ba 0% Mo 4%			pH	Nil
ESR	10	1 - 10 mm/hr	Albumin	Nil
SGOT	24	10 - 35 IU / L	Sugar	Nil
SGPT	30	10 - 60 IU / L	Bile Pigment	Nil
S. Cholesterol	180	130 - 220 mg / dl	Bile Salt	Nil
S. Triglycerides	100	upto 200 mg / dl	Occult Blood	Nil
Blood Sugar	6.3	upto 140 mg %	RBC Cells	Nil
Creatinine	1.0 @ 3mo	upto 1.5 mg / dl	Leucocytes	
GGTP	30	upto 55 IU / L	**Spirometry**	Normal
HbsAg	Negative		**Drug of Abuse**	Negative
HIV I & II	Negative		**TMT**	Normal
VDRL	Non Reactive		**ECG**	Normal
Others			**USG**	Normal
Blood Group	O (+ve)		**XRay (Chest PA)**	Normal

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

Result Of Medical Examination

On the basis of the history, clinical examination & diagnostic tests, I, hereby declare the above examinee has been found medically, **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: 04 FEB 2024

Date of Medical fitness: 04 FEB 2024

Validity of Medical Certificate: 03 FEB 2026

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IDENTITY of CANDIDATE CONFIRMED WITH

04.2024.5821

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: ☐

Examination for duty as:		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.
Master: (Y)/N: ____ Deck Officer: Y/N: ____ Eng Officer: Y/N: ____ Ratings: Y/N: ____ Cook: Y/N: ____ Other: Y/N: ____ Please specify ____		☑	☐	☐	☐

To be filled by Manning Centres

Name, Address with Contact details of Manning Centre:					
Vessel to be assigned:	MV OPAL LEADER	Routine & Emergency Duties (if known):		Position Offered/ Applied for:	MASTER
Type of vessel (Container, Tanker, Passenger etc):	RO-RO				
Trade area (e.g. Coastal, Tropical, Worldwide):	Cosastal ☐	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):		RAHMAN ATIQUR					
Home/ Permanent Address:	FLAT- 3B, HOUSE - 15, ROAD-06, SECTOR-06, UTTARA, DHAKA-1230, BANGLADESH						
Mailing Address:	— DO —						
Date of birth (day/month/year):	22 / 10 / 1972			Sex:	M		
Place of Birth:	City: BRAHMANBARIA Country: BANGLADESH	Nationality:	BANGLADESH	Rank:	MASTER		
Civil Status:	MARRIED						
Identity Docs/ Passport /Discharge Book No:	P/P B0006747(9) CDC C10/2329						

Examinee's Medical History

Is there any past / present history of any of the following	Examinee	Examiner	Is there any past / present history of any of the following	Examinee	Examiner's

04.2024.5821

WALLEM

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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)		✓

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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/ Asprin/ Fortwin etc.		✓
Corticosteroids, Anti-epileptic Drugs, Nasal Drops etc.		✓
Any Medicine/ Injections from your family Doctor		✓

To What Extent Do You Use: Alcohol: NO, Cigarettes: NO
Tobacco: NO, Drugs: NO

Are you taking any non-prescription or prescription medications?		✓

If yes, please list the medications taken and the purpose(s) and dosage(s). NO

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:

Any other major conditions?

Would you say that your health is: **Excellent** * **Good** * **Fair** *

I ATIQUR RAHMAN holding Passport/Seaman Book no. G0/2329 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._____(the approved medical practitioner carrying out the medical examinations).

Signature of Examinee:	A. Rahaman	Date(day/month/year):	04 FEB 2024

Height in cms: 162 cm		**Weight in Kg:** 72 Kg	
BMI: 27.8		**Temperatures:** 98°	
Chest:	**Insp:** 40	**Exp;** 40	

Blood Pressure	**Systolic** 120 (mmHg)	**Diastolic** 80 (mmHg)
Pulse Rate: 78 b/min **Rhythm:** Regular		**Respiratory rate** 18 b/min
Oral Health Normal		**General Condition** Good

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.

Radical Hospital Ltd.

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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	N5	N5	✓			

Visual fields		
	Normal	Defective
Right eye	✓	
Left eye	✓	

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 *		Ishihara *		CIE-43-2001 *	
Check if colour test is Normal:	Yellow	*	Red	*	Green	*	Blue	*	
Colour Vision:	Not tested	*	Normal	*	Doubtful	*	Defective	*	

Hearing:

Pure tone and audio metry (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	20		
Left ear	20	20	20	20		

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

Speech (Deck/Navigational 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	N/A		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 *				
	Performed * on (day/month/year):		Normal		Abnormal
Result : Normal.	04 FEB 2024				

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

Investigation:

Blood	Result	Normal
Haemoglobin "Hb"	11.2 g/dl	13 – 18 gm/ dl
Total WBC count	9700	4,000 - 11,000 / cu.mm
Neu 62 %, Lymp 32 %, Eos 02 %, Bas 01 %, Mo 03 %		
Blood Group & Rh factor (tested only once, need not be repeated)		
BI ESR	10	1 - 15 mm / hr
Platelets	189000	1.50-4.00 Lakh/ul
Fasting Lipid Profile		
S. Triglycerides	190	25-200 mg/dl
Cholesterol Serum	181	130-220 mg/dl
HDL Cholesterol Serum	42	35-65 mg/dl
LDL Cholesterol Serum	101	85-150 mg/dl
VLDL Cholesterol Serum	NAD	07-35 mg/ dl
Total / HDL Cholesterol	NAD	3.0-5.0
LDL/ HDL Cholesterol	NAD	2.5-3.5
Hepatitis B — Positive / Negative		
Hepatitis C — Positive / Negative		

Urine	Result
Colour	Nil
Specific Gravity	1
pH	4
Albumin	U
Sugar	U
Bile Pigment	U
Bile Salt	U
Occult Blood	U
RBC Cells	U
Leucocytes	U
Stool Test	**Result**
Bacterological	Nil
Parasitical	Nil
Others	U
HIV I & II	negative
VDRL	Non Reactive

Additional Tests	Result	Normal
(HbA1c)	5.6	4.0 % - 6.5 %
RBS/ FBS (Blood test	6.3	
Total Bilirubin	0.59	0.1 - 1.0 mg/dl
Direct Bilirubin	NAD	0.0 - 2.5 mg/dl
Indirect Bilirubin	NAD	0.0 - 0.75 mg/dl
SGPT	30	9 - 43 U / L
SGOT	26	0 - 40 IU/L
SGGT	40	0 - 49 IU/L
Blood Urea	NAD	10 - 50 mg/dl
S. Creatinine	1.03	0.8 - 1.4 mg/dl
BUN	30	5-23mg/dl
PSA	NAD	Less than 4.00 ng/ml
Malarial Parasite	NAD	
Uric Acid	5.3	2.4 - 7.5 mg/dl

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 if 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 ATIQUR RAHMAN was physically examined and he/~~she~~ is found to be FIT for sea service/ look-out duty for the period from _____ To _____ Place of medical examination RADICAL HOSPITAL LIMITED Uttara, Dhaka, Bangladesh Date of medical examination: 04 FEB 2024 Medical certificate validity date (day/month/year): 03 FEB 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.: _____

A. Rahaman

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-I/9 of STCW Code and my obligations.)

Date: 04 FEB 2024

Official Stamp & Signature with Govt. (DGS) Approval/ No.....of Medical Examiner

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.

Original: Master & Crewing Dept
cc: Seafarer

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

Radical Hospital Ltd. As Per-MLC-2006 DG Shipping Bangladesh Approved

	WALLEM SHIPMANAGEMENT(INDIA) PVT. LTD.	Form : MHRS 08 Prepared by : MR Approved by : MD Issued : Feb '08 Revised : Mar '17

REQUISITION FOR SEAFARER'S MEDICAL EXAMINATION

(Confidential Document)

From : _____

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

To : RADICAL HOSPITAL LIMITED
Uttara, Dhaka, Bangladesh
(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

DR. MIR MD. RAIHAN ★ RADICAL HOSPITALS LTD. ★ REG. NO. A-55144

_____ Date : 04 FEB 2024

(Name & Signature of Responsible Person from Manning Centre)

Examinee's Details :

Full Name : ATIQUR RAHMAN Address : FLAT 3B, HOUSE 15, ROAD 06, SECTOR 06, UTTARA, DHAKA 1230

Date of Birth : 22-10-1972 Rank : MASTER Name of vessel to be assigned : MV OPAL LEADER

Type of vessel : RO-RO (PCTC) Trade area : WORLDWIDE

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

CDC No C10/2329 Passport No. B0067479 Crew ID.(from Compas) : 1501

Position Offered/ Applied for : _____ Routine & Emergency Duties (if known) : _____

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."

A. Rahaman

Seafarer's Signature

Date : 04 FEB 2024

Radical Hospital Ltd. As Per-MLC-2006 Approved

Doctor's Signature

Date : 04 FEB 2024

DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
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DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.

Original: Doctor & Copy : Manning Centre

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

MEDICAL CERTIFICATE FOR FITNESS FOR SERVICE AT SEA

FIT FOR DUTY ON BOARD SHIP

Last/Family Name	First & Middle /Given Name	Position applied for
RAHMAN	ATIQUR	MASTER

Date of Birth	Sex	Nationality	ID (Passport/Discharge book) No.
22-10-72	M	BANGLADESHI	C/0/2329

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:- ~~Yes~~ No

Unaided hearing is satisfactory ~~Yes~~ No

(b) Visual acuity meets the required standards for his rank ~~Yes~~ No

Colour Vision meets the the required standard ~~Yes~~ No

that he is fit for look out duty ~~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), DFM, CCD (Birdem), PGT (Ophth)
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DG Shipp.ng Bangladesh Approved
General Physician
Radical Hospitals Limited.

Clinic Stamp

Radical Hospital Ltd. As Per-MLC-2006 DG Shipping Bangladesh Approved

Date: 04 FEB 2024

Valid Till: 03 FEB 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.

04 FEB 2024

Seafarers signature with Date:- A. Rahman

Delete whatever is not applicable

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: RAHMAN	GIVEN NAME (S): ATIQUR
DATE OF BIRTH: DAY 22 MONTH 10 YEAR 1972	PLACE OF BIRTH CITY: BRAHMANBARIA COUNTRY: BANGLADESH
SEX: MALE ☑ FEMALE ☐	
POSITION ON BOARD: MASTER ☑ DECK OFFICER ☐ ENGINEERING OFFICER ☐ RADIO OPERATOR ☐ RATING ☐	MAILING ADDRESS OF APPLICANT: FLAT-3B, HOUSE-15, ROAD-06, SECTOR-06, UTTARA, DHAKA-1230, BANGLADESH

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION			COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	☐ BOOK	
RIGHT EYE	6/6	—	☐ LANTERN	RIGHT EAR N/A
			YELLOW N/A RED N/A	
LEFT EYE	6/6	—	GREEN N/A BLUE N/A	LEFT EAR N/A

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 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 ☐
(the visual test it is required every six years)
Date of the last colour vision test: (Day/Month/Year) 04 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.

A. Rahaman	ATIQUR RAHMAN	04 FEB 2024
Signature of Applicant	Name of Applicant	Date

CIRCLE APPROPIATE CHOICE: (HE / SHE) IS FOUND TO BE (FIT / NOT FIT) FOR DUTY AS A (MASTER / DECK OFFCIER / 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. DFM

ADDRESS: RADICAL HOSPITAL LIMITED UTTARA, DHAKA

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: DG SHIPPING, BANGLADESH

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06 MAY 2014.

SIGNATURE OF PHYSICIAN: _____ STAMP OF PHYSICIAN: Radical Hospital Ltd. As Per-MLC-2006 DG Shipping Bangladesh Approved DATE: 04 FEB 2024

EXPIRY DATE OF CERTIFICATE: 03 FEB 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 (Birdem), FGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.

MEDICAL FITNESS CERTIFICATE

LAST NAME OF APPLICANT	FIRST NAME	MIDDLE INITIAL
RAHMAN	ATIQUR	

DATE OF BIRTH (MONTH / DAY / YEAR)	PLACE OF BIRTH (CITY / COUNTRY)
10 / 22 / 1972	BRAHMANBARIA

EXAMINATION FOR DUTY AS :

- MASTER ☑
- MATE ☐
- ENGINEER ☐
- RADIO OFF ☐
- SEAMAN ☐

MAILING ADDRESS OF APPLICANT

FLAT 3B, HOUSE 15, ROAD 06, SECTOR 06, UTTARA, DHAKA-1230, BANGLADESH

MEDICAL EXAMINATION

HEIGHT	WEIGHT	BLOOD PRESSURE	PULSE	RESPIRATION	GENERAL APPEARANCE
162cm	73kg	120/80 mmg	78/min	20/min	Good

VISION:

	RIGHT EYE	LEFT EYE
WITHOUT GLASSES	6/6	6/6
WITH GLASSES		

HEARING: RIGHT EAR: NAD LEFT EAR: NAD

COLOR TEST TYPE : BOOK ☑ LANTERN ☑ (Check if color test is normal) YELLOW: NAD RED: NAD GREEN: NAD BLUE: NAD

HEAD AND NECK: Normal

HEART (CARDIOVASCULAR): Normal

LUNGS: Normal

SPEECH :

Is speech unimpaired for normal voice communication ? Normal

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?

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO : ATIQUR RAHMAN

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

UTTARA DHAKA-1230

NAME OF PHYSICIAN'S LICENSING AUTHORITY: DG SHIPPING BANGLADESH.

DATE OF ISSUE OF PHYSICIAN'S LICENSE: 06 MAY 2014.

SIGNATURE OF PHYSICIAN

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

Radical Hospital Ltd. As Per-MLC-2006 DG Shipping Bangladesh Approved

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	: 0077	**Date :** 03-Feb-2024	**D.Date :**	03-Feb-2024
Patient's Name	: ATIQUR RAHMAN	**Age :** 51Y 3M 11D	**Gender:**	Male
Specimen	: Blood			
Doctor Name	: Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/2329			

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	**11.2** 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)	**10** mm/1st hr	Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	**9,700** /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	**62** %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	**32** %	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	**291** /cumm	50-450/cumm
Total RBC Count	**4.51** 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	**33** pg	27 - 32 pg
MCHC	**33.4** g/dL	29 - 34 g/dL
RDW	**12.0** %	11 - 16 %
PDW	**36** fL	35 - 56 fl
Total Platelete Count (PC)	**1,89,000** /cumm	150,000-450,000/cumm
MPV	**8.9** fL	7.0 - 11.0 fL
PCT	**0.10** %	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	DIA24020077	Received Date	03/02/2024
Patient's Name	ATIQUR RAHMAN		
Patient's Age	51Y 3M 11D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/2329
Sample	**BLOOD**		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	6.3 mmol/l	4.2 – 6.4 mmol/l
HbA1C	5.8%	<6.5 %
Serum Creatinine	1.03 mg/dl	0.3 - 1.3 mg/dl
Serum Uric Acid	5.3 mg/dl	3.4-7.0 mg/dl
GGT	40 U/L	Adult Males : <55
Serum (BUN)	30 mg/dl	7-23 mg/dl
Total Protein	6.2 g/dl	6.3-7.9 g/dl
Liver Function Test		
Serum Bilirubin (Total)	0.59 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	30.0 U/L	Up to 40 U/L
Serum AST (SGOT)	26.0 U/L	Up to 37 U/L
Serum Alkaline Phosphatase	171 U/L	Up to 270 U/L
Lipid profile		
Serum Cholesterol	181 mg/dl	up to 200 mg/dl
Serum HDL- Cholesterol	42 mg/dl	35-55 mg/dl
Serum Triglyceride	190 mg/dl	50 - 150 mg/dl
Serum LDL- Cholesterol	101 mg/dl	<130 mg/dl

Checked By

Medical Technologis
Radical Hospitals Ltd.

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

radical_hospitals@yahoo.com, www.radicalhospital.com

RADICAL HOSPITAL LIMITED

Bill No	DIA24020077	Received Date	03/02/2024
Patient's Name	ATIQUR RAHMAN		
Patient's Age	51Y 3M 11D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/2329
Sample	**BLOOD**		

SEROLOGICAL REPORT

Test Name	Result
HBs Ag (Method : (ICT)	Negative
HIV 1 & 2 (Method : (ICT)	Negative
VDRL	Non-reactive
Hepatitis A (IgG & IgM)	Negative
HCV (Method : (ICT)	Negative
Malarial Parasite (ICT)	Negative

BLOOD GROUPING RESULT	
ABO Blood Group	"O" (+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	DIA24020077	Received Date	03/02/2024
Patient's Name	ATIQUR RAHMAN		
Patient's Age	51Y 3M 11D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/2329
Sample	**URINE**		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	1-2/HPF
Sediment	Nil	Epithelial	2-3/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.

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Bill No	DIA24020077	Received Date	03/02/2024
Patient's Name	ATIQUR RAHMAN		
Patient's Age	51Y 3M 11D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/2329
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.

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East West Medical College and Hospital.

Bill No	DIA24020077	Received Date	03/02/2024
Patient's Name	ATIQUR RAHMAN		
Patient's Age	51Y 3M 11D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/2329
Sample	STOOL		

STOOL ANALYSIS

Physical Examination:

Color	: Brown
Consistency	: Soft
Worm	: Nil
Mucus	: Nil
Blood	: Nil

Chemical Examination:

Reaction	: Acid
Occult Blood Test (OBT)	: Not done
Reducing Substance (RS)	: Not done

Microscopic Examination:

Ova	: Not found	Mucus flakes	: Nil
Cyst	: Not found	Cyst of Giardia	: Not found
Protozoa (Trophozoite)	: Not found	Macrophage	: Not found
Larva	: Not found	Fat Globules	: (++)
Epithelial Cell	: 1-2	Vegetable Cell	:Nil
Pus Cell	: 0-1	Starch	: Nil
RBC	: Nil	Muscle fibre	: Nil

Checked By

Medical Technologis
Radical Hospitals Ltd.

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

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

Date: 03/02/2024

EYE EXAMINATION REPORT

NAME:	**ATIQUR RAHMAN**		
AGE:	**51 YRS**	**RANK: MASTER**	**CDC NO:C/O/2329**

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

Patient's Name	:	**ATIQUR RAHMAN**	ID NO	:	**24020077**
Age	:	**51 Yrs**	Date	:	**03/02/2024**
Sex	:	**Male**			
Referred by	:	**Dr. Mir Md. Raihan - MBBS (DU), DFM**			
Nature of Specimen	:				

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 Hygine : 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.	:	24020077	Receive:03/02/2024	Print: 03/02/2024
Patient's Name	:	**ATIQUR RAHMAN**		
Age	:	51 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

This report has been electronically signed.

radical_hospitals@yahoo.com, www.radicalhospital.com

RADICAL HOSPITAL LIMITED

AUDIOLOGICAL REPORT

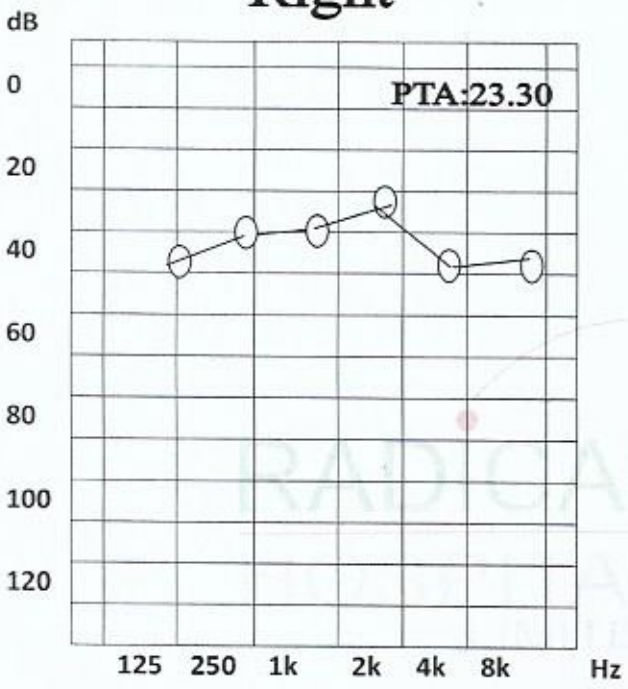
Patient Name : **ATIQUR RAHMAN** **03/02/2024**

Age : **51 Yrs**

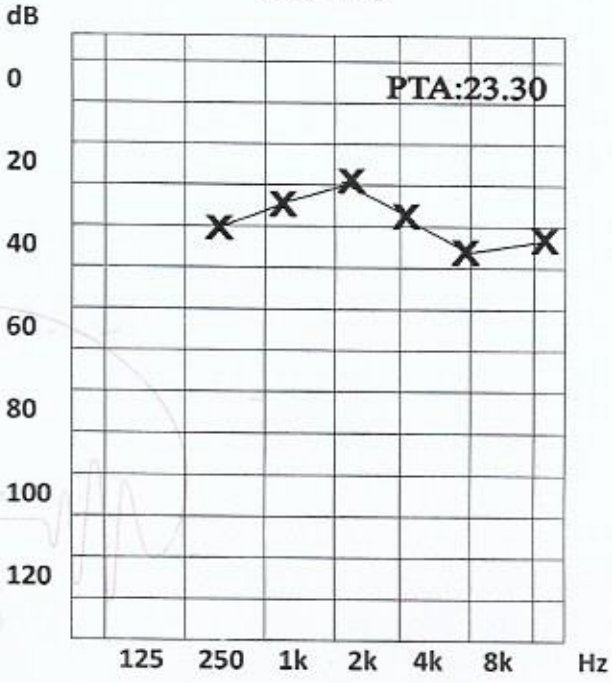
Address : RHL, UTTARA

Referred By : Dr. Mir Md. Raihan , MBBS,(DU), DFM

Right



Left



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		
	Right Ear	**Left Ear**
Air MaskingOX		
Bone Masking ΔΔ		

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.

RADICAL HOSPITAL LIMITED
radical_hospitals@yahoo.com, www.radicalhospital.com

Patient's Name	:	**ATIQUR RAHMAN**	ID NO	:	24020077
Age	:	**51 Yrs**	Date	:	03/02/2024
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 (opth)
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DG Shipping Bangladesh Approved
Malaysian Medical Council Approved
General Physician
Radical Hospitals Limited

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	:	24020077	Receive: Print: 03/02/2024		
Patient's Name	:	**ATIQUR RAHMAN**			
Age	:	51 YRS	*Sex*	:	M
Refd. by	:	**Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM**			

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate	:	82 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

ID: 124

03-02-2024 22:26:51

Female 51 Years

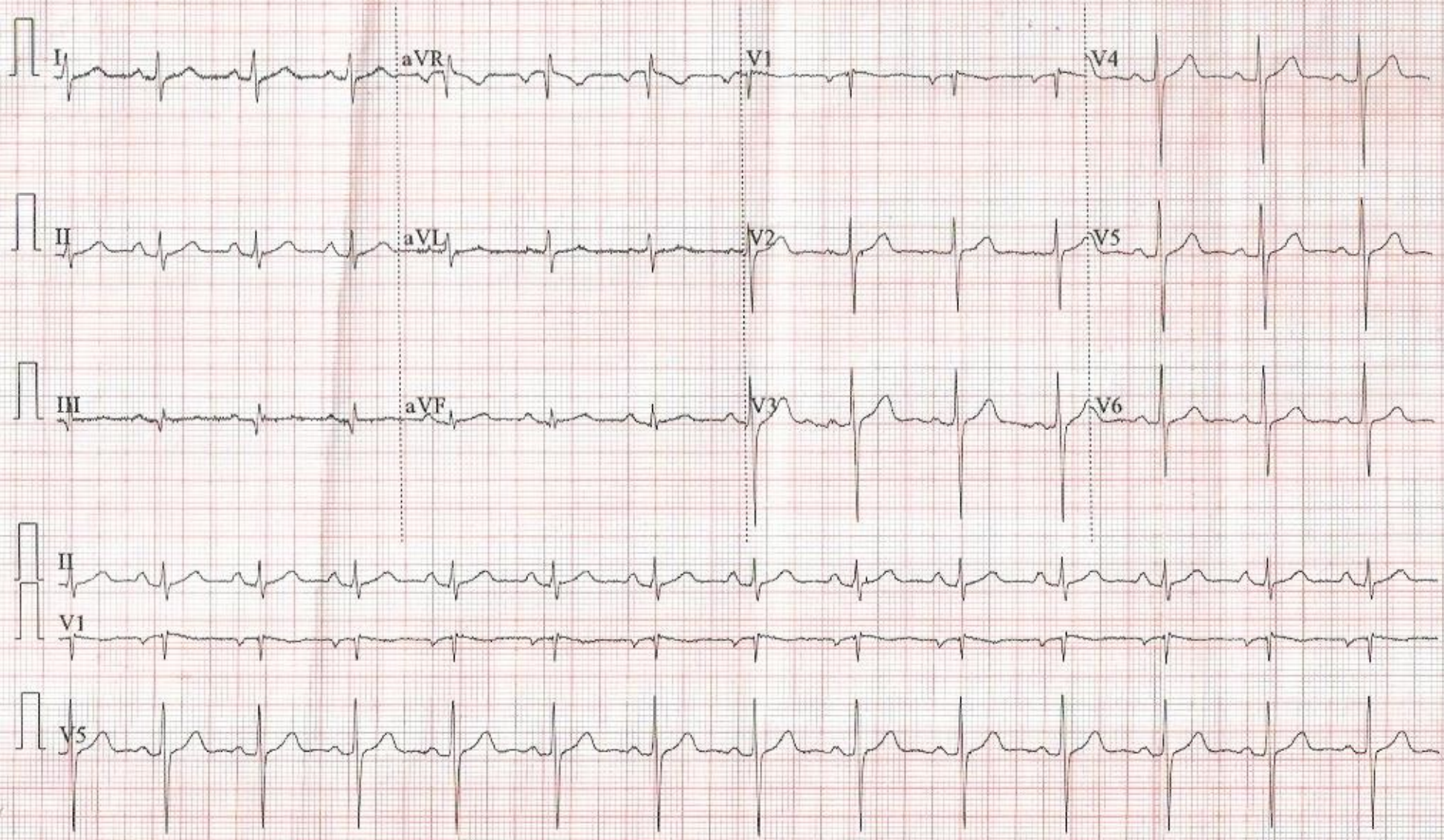
HR	: 82	bpm
P	: 104	ms
PR	: 164	ms
QRS	: 88	ms
QT/QTc	: 362/423	ms
P/QRS/T	: 51/37/42	°
RV5/SV1	: 0.978/0.410	mV

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 4*2.5s+3r ♥82 SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

20.383

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

Patient's Name	:	**ATIQUR RAHMAN**			
Age	:	**51 Yrs**	**Date**	:	**03/02/2024**
Sex	:	**Male**	**CDC NO:C/O/2329**		
Referred by	:	**Dr. Mir Md. Raihan - MBBS, (DU), DFM**			

Psychometric Test

Test Name	Remarks
1.APTITUDE TEST	
Numerical Reasoning test	Poor /Good /very good /excellent
Verbal Reasoning test	Poor /Good /very good /excellent
Inductive reasoning test	Poor /Good /very good /excellent
Diagrammatic Reasoning test	Poor /Good /very good /excellent
Logical Reasoning test.	Poor /Good /very good /excellent
Error checking test	Poor /Good /very good /excellent
2.Skill Test	Poor /Good /very good /excellent
3.Personality Test	INFJ / ENFJ / ISFJ / ENTP/ ESFJ /ESFP
4.Watson Glaser test(Critical Thinking Test)	
Arguments	Poor /Good /very good /excellent
Assumptions	Poor /Good /very good /excellent
Deductions	Poor /Good /very good /excellent
Interpreting Information's	Poor /Good /very good /excellent
Inferences	Poor /Good /very good /excellent
5.Situational Judgment Test.	Poor /Good /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 (opth)
Reg- A55144 BGD-016(MMC)
DG Shipping Bangladesh Approved
Malaysian Medical Council Approved
General Physician
Radical Hospitals Limited

Patient ID	24020077	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	03/02/2024
Patient Name	ATIQUR RAHMAN		
Age	51 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 mildly enlarged in size 14.3cm, 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. No echogenic structure is seen within lumen. CBD is not dilated.

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

SPLEEN :- Is normal in size (9.1 x 3.4)cm and uniform in echo-texture.

BOTH KIDNEYS :- Are normal in size RK-10.2 cm, LK-10.8cm 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 and volume is 14.5 cc, regular in shape.

Echogenicity is homogenous. No area of calcification is seen.

IMPRESSION: Fatty change in liver . Grade-1

3.2.24

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

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IBN SINA D. LAB & CONSULTATION CENTER, UTTARA

ISO 9001:2015 Certified

ECHO-CARDIOGRAPHY REPORT

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

I.D. No	:	U49786	Received date : 4 Feb 2024	Printed date: 4 Feb 2024 09:14PM
Name of Pt.	:	ATIQUR RAHMAN	Age : 51 y(s)	Sex: Male
Exam	:	ECHO 2D		
Ref. By	:	RADICAL HOSPITAL LTD		

PROCEDURES: 2D & M-MODE STUDY

M-MODE & 2D FINDINGS:

AO	:	27	mm	**LVIDd**	:	10	mm	**RVIDd**	:		mm	**MVA**	:	4.1	cm2
LA	:	34	mm	**LVIDs**	:	10	mm	**RVOT**	:		mm	**MV annulus**	:		mm
IVST	:	40	mm	**EF**	:	66	%	**PA**	:		mm	**AV ring**	:		mm
PWT	:	26	mm	**FS**	:	36	%	**TAPSE**	:	22	mm	**ACS**	:		mm

DESCRIPTION:
CHAMBERS:

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

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

VALVES : AV : Bicuspid. RCC & NCC are mildly thickened. Others 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.**

04.02.2024

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Prepared by: Nurjahan

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TREADMILL STRESS TEST

I.D. No	: U49786	Received date : 4 Feb 2024	Printed date: 4 Feb 2024 10:13PM	
Name of Pt.	: ATIQUR RAHMAN		Age : 51 y(s)	Sex: Male
Ref. By	: RADICAL HOSPITAL LTD			
Ref. By	: ETT			

Total Exercise Time	: 09:00 Min	**Max.HR attained**	: 144 Bpm.
% of max. pred. HR	: 85 %	**Max. Pred HR**	: 169 Bpm.
Maximum BP	: 140/85 mmhg.	**Max. work load attained**	: 10.10 METS
Indication	: Screening for IHD.		
Risk Factors	: Smoking		
Reason for Termina.	: Attainment of THR.		
Test Profile	: BRUCE		
Symptoms	: Nil.		

Summary Result ⇒ **NEGATIVE**

Comments:

- **ATIQUR RAHMAN** 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 provocable myocardial ischaemia.

04/02/2024

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