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 : AHMAD TAZ UDDIN (SURNAME / FIRST NAME / MIDDLE NAME) Sex : MALE Serial No. :

Date of Birth : 21.02.1986 PP/CDC No.: 4014751 Nationality: BANGLADESHI

Rank: C/E Vessel: GALVESTON HIGHWAY Type: PCC Route :

Home Address : 25/D/TOHA PALACE, FLAT-7D&D, SUKRABAD, DHAKA-1207, BANGLADESH

Company Name & Address: WALLEM SHIPMANAGEMENT LTD

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 : 24.02.2024 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
165 cm	78 Kg.	130/90 mmHg	78/m	19 b/m	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	Normal	Abnormal
	Others	Normal	Abnormal

Field Of Vision	Audiometry	Hz	500	1000	2000	3000	4000	5000	6000	8000
Normal	Right Ear	dB	20	20	20		Not Indicated			
Abnormal	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
Head & Neck	✓	
Eyes	✓	
Ear / Nose / Throat	✓	
Teeth / Oral Cavity	✓	
Musculo-Skeletal System	✓	
Nervous System	✓	
Reflexes	✓	
Skin	✓	

Notes

FIT FOR SEA SERVICE
AS
AS PER MLC 2006
Enhanced GARD Medicals done

	Norm	Abnor
Respiratory System	✓	
Cardiovascular System	✓	
Per Abdomen	✓	
Genito-urinary System	✓	
Others	✓	
Hernia / Hydrocoele	✓	
Varicose Veins	✓	
Fissure / Fistula / Piles	✓	

Investigations :

Blood	Result	Normal
Heamoglobin	15.2	M:13-17 F:12-15 gm%
Total WBC Count	7100	4000 - 10000 / cu.m
Neu 64% Lymp 31% Eos 02% Ba 0% Mo 03%		
ESR	08	1 - 10 mm/hr
SGOT	22	0 - 35 IU / L
SGPT	27	10 - 60 IU / L
S. Cholesterol	162	130 - 220 mg / dl
S. Triglycerides	136	upto 200 mg / dl
Blood Sugar	5.6	upto 140 mg %
Creatinine	0.79	upto 1.5 mg / dl
GGTP	38	upto 55 IU / L
HbsAg	Negative	
HIV 1 & II	Negative	
VDRL	Non Reactive	
Others		
Blood Group	"O" RH(+)	

Urine	Result
Colour	Straw
Specific Gravity	
pH	
Albumin	Nil
Segar	Nil
Bile Pigment	
Bile Salt	
Occult Blood	
RBC Cells	Nil
Leucocytes	
Spirometry	Normal
Drug of Abuse	Negative
TMT	Negative
ECG	Normal
USG	Normal
XRay (Chest PA)	Normal

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: 24 FEB 2024
Date of Medical fitness: 24 FEB 2024
Validity of Medical Certificate: 23 FEB 2026

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

DR. MIR. MD. RAIHAN
MBBS (DU), [illegible] PGT (Ophth)
BMDC A-55144, MMC-BGD-016
General Physician
Radical Hospitals Limited.

IDENTITY of CANDIDATE CONFIRMED WITH
04.2024.5995

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: AHMAD	GIVEN NAME (S): TAZ UDDIN
DATE OF BIRTH: DAY 21 MONTH 02 YEAR 1986	PLACE OF BIRTH CITY DHAKA COUNTRY BANGLADESH; SEX MALE ☑ FEMALE ☐
POSITION ON BOARD: MASTER ☐ DECK OFFICER ☐ ENGINEERING OFFICER ☑ RADIO OPERATOR ☐ RATING ☐	MAILING ADDRESS OF APPLICANT:

DECLARATION OF THE AUTHORIZED PHYSICIAN

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

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) 24 FEB 2024

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

Able for watchkeeping? YES ☑ NO ☐

Is applicant taking any non-prescription or prescription medications? YES ☐ NO ☑

Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarers unfit for such service or to endanger the health of other persons on board? YES ☑ NO ☐

Hereby I declare that I am in knowledge of the contents of the Physical Examination.

Signature of Applicant	Name of Applicant	Date
	TAZ UDDIN AHMAD	24.02.2024

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

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: DG SHIPPING BANGLADESH

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 05 MAY 2024

SIGNATURE OF PHYSICIAN: | STAMP OF PHYSICIAN: Radical Hospital Ltd. As Per-MLC-2006 DG Shipping Bangladesh Approved | DATE: 24 FEB 2024

EXPIRY DATE OF CERTIFICATE: 23 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), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipp.ng Bangladesh Approved
General Physician
Radical Hospitals Limited

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 : Universal Shipping Services
Room No. 13, 6th Floor,
3/D Kawran Bazar Road,
Kabyaks SuperMarket,
Dhaka 1215
Tel: Phone: +8801611656253
(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

(Name & Signature of Responsible Person from Manning Centre) Date: 24 FEB 2024

Examinee's Details :

Full Name : TAZ UDDIN AHMAD Address : 25/D, TOMA PALACE, FLAT-7D, 9/A, SUKRABAD, DHAKA-1207. BANGLADESH.

Date of Birth : 21.02.1986 Rank : C/E Name of vessel to be assigned : MV. GALVESTON HIGHWAY

Type of vessel : PCC Trade area : WORLDWIDE

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

CDC No. : C/0/4751 Passport No. : A01292400 Crew ID.(from Compas) : 24894

Position Offered/ Applied for : C/E Routine & Emergency Duties (if known) : UNLIMITED

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."

Seafarer's Signature
Date : 24.02.2024 24 FEB 2024

Radical Hospital Ltd. As Per-MLC-2006

Doctor's Signature
Date : 24 FEB 2024

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

Original: Doctor & Copy : Manning Centre
Remark: The document to be uploaded into CMS under Medical/Seaman Fab.

04.2024.5995

FPS 41D
Revised : Feb'10

MEDICAL FITNESS CERTIFICATE

LAST NAME OF APPLICANT	FIRST NAME	MIDDLE INITIAL
AHMAD	TAZ UDDIN	

DATE OF BIRTH	PLACE OF BIRTH
02 MONTH | 21 DAY | 1986 YEAR	DHAKA CITY BANGLADESH COUNTRY

EXAMINATION FOR DUTY AS :

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

MAILING ADDRESS OF APPLICANT

MEDICAL EXAMINATION

HEIGHT	WEIGHT	BLOOD PRESSURE	PULSE	RESPIRATION	GENERAL APPEARANCE
165cm	78KG	120/80 mmHg	78 b/m	19 b/m	Ok

VISION:

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

HEARING: RIGHT EAR Nrm LEFT EAR Nrm

COLOR TEST TYPE : BOOK ☐ LANTERN ☑ Check if color test is normal — YELLOW Nrm RED Nrm GREEN Nrm BLUE Nrm

HEAD AND NECK: Nrmy

HEART (CARDIOVASCULAR):

LUNGS: Nrmy

SPEECH :

Is speech unimpaired for normal voice communication ?

EXTREMITIES: UPPER Nrmy LOWER Nrmy

Is applicant suffering from any disease likely to be aggravated by, or to render him unfit for, service at sea or likely to endanger the health of other persons onboard?

No.

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

AND (HE) / SHE IS FOUND TO BE FIT FOR SEA SERVICE FROM

NAME AND DEGREE OF PHYSICIAN: DR. MIR. MD. RAIHAN. MBBS. DFM. CCD
(PLEASE PRINT)

ADDRESS: RADICAL HOSPITAL LIMITED. UTTARA

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 1945 (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

MEDICAL CERTIFICATE FOR FITNESS FOR SERVICE AT SEA

FIT FOR DUTY ON BOARD SHIP

Last/Family Name	First & Middle /Given Name	Position applied for
AHMAD	TAZ UDDIN	CHIEF ENGINEER

Date of Birth	Sex	Nationality	ID (Passport/Discharge book) No.
21.02.1986	M	BANGLADESHI	A01292400

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)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited

Clinic Stamp

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

Date: 24 FEB 2024

Valid Till: 23 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.

Seafarers signature with Date:- 24.02.2024

Delete whatever is not applicable

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: Y Ratings: Y/N: ____ Cook: Y/N: ____ Other: Y/N: ____ Please specify ____		☑	☐	☐	☐

DR. MIR M... RAD... HOS... LTD ★ REG. NO. A-55...

To be filled by Manning Centres

Name, Address with Contact details of Manning Centre:	Universal Shipping Services Room No. 13, 6th Floor, 3/D Kawran Bazar Road, Kabyaks SuperMarket, Dhaka 1215 Tele Phone: +8809611656255

Vessel to be assigned:	GALVESTON HIGHWAY	Routine & Emergency Duties (if known):	UNLIMITED	Position Offered/ Applied for:	C/E
Type of vessel (Container, Tanker, Passenger etc):	PCC				
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):	AHMAD TAZ UDDIN						
Home/ Permanent Address:	25/D, TOMA PALACE, FLAT- 7D, 8D, SUKRABAD, DHAKA-1207. BANGLADESH						
Mailing Address:	DO						
Date of birth (day/month/year):	21	/	02	/	1986	Sex:	"MALE"
Place of Birth: City: DHAKA Country: BANGLADESH		Nationality:	BANGLADESHI			Rank:	C/E.
Civil Status:	MARRIED						
Identity Docs/ Passport /Discharge Book No:	A01292400						

Radical Hospital Ltd. As Per MLC 2006

Examinee's Medical History

Is there any past / present history of any of the following	Examinee	Examiner's	Is there any past / present history of any of the following	Examinee	Examiner's
04.2024.5995					

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: 2 of 7

	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), Chickenpox		✓
Liver diseases (Hepatitis A,B,C,D & E, Amoebic Abscess)		✓

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: OCCASIONALLY 1-2 PER WEEK
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). N/A

Date and contact details for previous medical examination (if known):
JUNE 2023

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).
NO

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 TAZ UDDIN AHMAD holding Passport/Seaman Book no. C10/4751 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. MR M.P. RAMAN (the approved medical practitioner carrying out the medical examinations).

Signature of Examinee:		Date(day/month/year):	24.02.2024

Height in cms: 165		**Weight in Kg:** 78	
BMI: 28		**Temperatures:** 98°F	
Chest:	**Insp:** 43	**Exp;** 91	

Blood Pressure	**Systolic** 130 (mmHg)	**Diastolic** 80 (mmHg)	
Pulse Rate: Rhythm:	78 b/m	**Respiratory rate**	19 b/m
Oral Health		**General Condition**	

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.

Radical Hospital Ltd. As Per MLC 2006

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.

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			
Left ear	20	20	20			

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

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	✓		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	✓			✓	

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Chest X-ray (PA)	Not performed *			
	Performed * on (day/month/year): 24 FEB 2024	Normal		Abnormal
Result : Normal Chest X-ray				

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)

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

Test:	Result:

Investigation:

Blood	Result	Normal
Haemoglobin "Hb"	15.3 g/dl	13 – 18 gm/ dl
Total WBC count	8100	4,000 - 11,000 / cu.mm
Neu 64 %, Lymp 32 %, Eos 02 %, Bos 0 %, Mo 03 %		
Blood Group & Rh factor (tested only once, need not be repeated)		
BI ESR	06	1 - 15 mm / hr
Platelets	310000	1.50-4.00 Lakh/ul
Fasting Lipid Profile		
S. Triglycerides	146	25-200 mg/dl
Cholesterol Serum	163	130-220 mg/dl
HDL Cholesterol Serum	44	35-65 mg/dl
LDL Cholesterol Serum	89	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	Straw
Specific Gravity	1.01
pH	7
Albumin	Nil
Sugar	Nil
Bile Pigment	
Bile Salt	
Occult Blood	
RBC Cells	Nil
Leucocytes	
Stool Test	**Result**
Bacterological	N. F
Parasitical	N. F
Others	
HIV I &II	Negative
VDRL	Non Reactive

Additional Tests	Result	Normal
(HbA1c)	5.2	4.0 % - 6.5 %
RBS/ FBS (Blood test	5.5	
Total Bilirubin	0.56	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	26	9 - 43 U / L
SGOT	24	0 - 40 IU/L
SGGT	38	0 - 49 IU/L
Blood Urea	NAD	10 - 50 mg/dl
S. Creatinine	0.70	0.8 - 1.4 mg/dl
BUN	18	5-23mg/dl
PSA	NAD	Less than 4.00 ng/ml
Malarial Parasite	NAD	
Uric Acid	4.1	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	N/D	TMT	N/D	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 Per MLC 2006

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

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: 6 of 7

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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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: 7 of 7

This is to certify IAZ UDDIN AHMAD 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 _____ Date of medical examination: 24 FEB 2024 Medical certificate validity date (day/month/year): 23 FEB 2026 Name of Examiner (Please Print): DR MD. RAIHAN.

(Validity should not be more than 2 years)

MBBS, DFM Degree: _____ Address: _____

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

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

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

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: 24.02.2024

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

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

Id No	: 0617	**Date :** 24-Feb-2024	**D.Date :** 24-Feb-2024
Patient's Name :	TAZ UDDIN AHMAD	**Age :** 38Y 00M 0D	**Gender:** Male
Specimen	: Blood		
Doctor Name	: Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/4751		

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	**15.3** 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)	**8,100** /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	**162** /cumm	50-450/cumm
Total RBC Count	**5.0** 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	**30** pg	27 - 32 pg
MCHC	**30** g/dL	29 - 34 g/dL
RDW	**13** %	11 - 16 %
PDW	**36** fL	35 - 56 fl
Total Platelete Count (PC)	**3,10,000** /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.

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24020617	Received Date	24/02/2024
Patient's Name	TAZ UDDIN AHMAD		
Patient's Age	38Y 00M 0D	Patient's Sex	Male
Ref. by -	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 4751
Sample	**BLOOD**		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.5 mmol/L	4.2 – 6.4 mmol/L
Serum Creatinine	0.79 mg/dl	0.3 - 1.3 mg/dl
Serum (BUN)	18 mg/dl	7- 23 mg/dl
Uric Acid	4.1 mg/dl	3.8 - 8.0 mg/dl
HbA1C	5.2 %	4.0- 6.0 %
GGT	38 U/L	Adult Male : <55
Total Protein	7.1 g/dl	6.3-7.9 g/dl
Serum Bilirubin (Total)	0.56 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	26.0 U/L	Up to 40 U/L
Serum AST (SGOT)	24.0 U/L	Up to 37 U/L
Serum Alkaline Phosphate	153 U/L	98 - 279 U/L

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	DIA24020617	Received Date	24/02/2024
Patient's Name	TAZ UDDIN AHMAD		
Patient's Age	38Y 00M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 4751
Sample	**BLOOD**		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Lipid profile		
Serum Cholesterol	163 mg/dl	up to 200 mg/dl
Serum HDL- Cholesterol	44 mg/dl	>35 mg/dl
Serum Triglvceride	146 mg/dl	up to 220 mg/dl
Serum LDL- Cholesterol	89 mg/dl	<130 mg/dl

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.

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Bill No	DIA24020617	Received Date	24/02/2024
Patient's Name	TAZ UDDIN AHMAD		
Patient's Age	38Y 00M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 4751
Sample	**BLOOD**		

SEROLOGICAL REPORT

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

BLOOD GROUPING RESULT	
ABO Blood Group	"O" (+ve)
Rh (D)Factor	Positive

Checked By

Medical Technologist.
Radical Hospital Ltd.

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Bill No	DIA24020617	Received Date	24/02/2024
Patient's Name	TAZ UDDIN AHMAD		
Patient's Age	38Y 00M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 4751
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	0-1/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

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East West Medical College and Hospital.

Bill No	DIA24020617	Received Date	24/02/2024
Patient's Name	TAZ UDDIN AHMAD		
Patient's Age	38Y 00M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 4751
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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RADICAL HOSPITAL LIMITED

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AUDIOLOGICAL REPORT

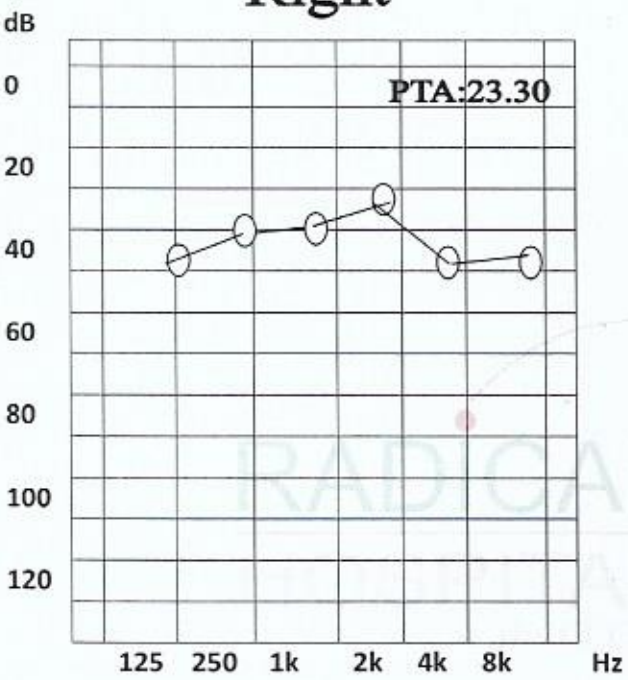
Patient Name : **TAZ UDDIN AHMAD** **24/02/2024**

Age : **38 Yrs**

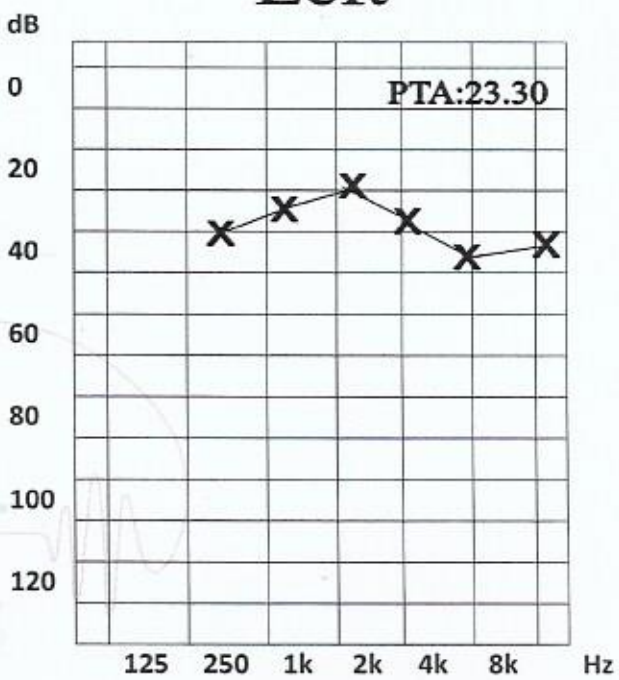
Address : RHL, UTTARA

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.

Patient's Name	:	**TAZ UDDIN AHMAD**	ID NO	:	24020617
Age	:	**38 Yrs**	Date	:	24/02/2024
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)
Reg- A55144 BGD-016(MMC)
DG Shipping Bangladesh Approved
Malaysian Medical Council Approved
General Physician
Radical Hospitals Limited

Patient's Name	:	**TAZ UDDIN AHMAD**			
Age	:	**38 Yrs**	**Date**	:	**24/02/2024**
Sex	:	**Male**	**CDC NO:C/O/4751**		
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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	:	24020617	Receive: Print: 24/02/2024		
Patient's Name	:	**TAZ UDDIN AHMAD**			
Age	:	38 YRS	*Sex*	:	M
Refd. by	:	**Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM**			

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate	:	70 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

HOUSE # 52, GARIB-E-NEWAZ, SECTOR-13, UTTARA, DHAKA-1230
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IBN SINA
Pioneer in Health Care

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	: U78628	Received date : 24 Feb 2024	Printed date: 24 Feb 2024 06:57PM	
Name of Pt.	: TAZ UDDIN AHMED		Age : 38 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**	: 45	mm	**RVIDd**	:	mm	**MVA**	:		cm2
LA	: 27	mm	**LVIDs**	: 29	mm	**RVOT**	:	mm	**MV annulus**	:		mm
IVST	: 09	mm	**EF**	: 64	%	**PA**	:	mm	**AV ring**	:		mm
PWT	: 09	mm	**FS**	: 35	%	**TAPSE**	: 22	mm	**ACS**	:	18	mm

DESCRIPTION:

CHAMBERS:

LA : Normal. **LV** : Normal.

RA : Normal. **RV** : Normal.

RWMA : Absent.

VALVES : All valves are normal in morphology.

IAS : Intact. **IVS** : Intact.

PERICARDIUM : Normal

EFFUSION : Absent.

THROMBUS/VEGETATION/OTHER MASS: Not seen.

IMPRESSION:

1. **No Regional wall motion abnormality.**
2. **Good LV systolic function.**

DR. A. F. KHABIR UDDIN AHMED
MBBS, MD (Cardiology).
Fellow: WHO (India), HPSP (Thailand),
Trained in Interventional Cardiology
Cardiac & Medicine Specialist
Associate Professor (Cardiology)
Shaheed Tajuddin Ahmad Medical Collage & Hospital, Gazipur.

Prepared by: Kohinur Akter

Date: 24/02/2024

EYE EXAMINATION REPORT

NAME:	**TAZ UDDIN AHMAD**		
AGE:	**38 YRS**	**RANK: CH.ENG**	**CDC NO:C/O/4751**

VISUAL ACUITY: RIGHT LEFT

UNAIDED 6/6 6/6.

AIDED

COLOUR VISION: NORMAL / BLIND

OPINION : UNFIT / FIT FOR EMPLOYMENT ON BOARD

Dr. Mir Md. Raihan
MBBS, PGT (Ophthalmology)
Assistant Registrar (EX)
East west Medical College & Hospital

ID: 24020574

24-02-2024 17:50:17

Mazoblin Bhoma

Male 38 Years

HR	: 70	bpm
P	: 90	ms
PR	: 152	ms
QRS	: 92	ms
QT/QTc	: 388/419	ms
P/QRS/T	: 29/100/46	°
RV5/SV1	: 0.613/0.701	mV

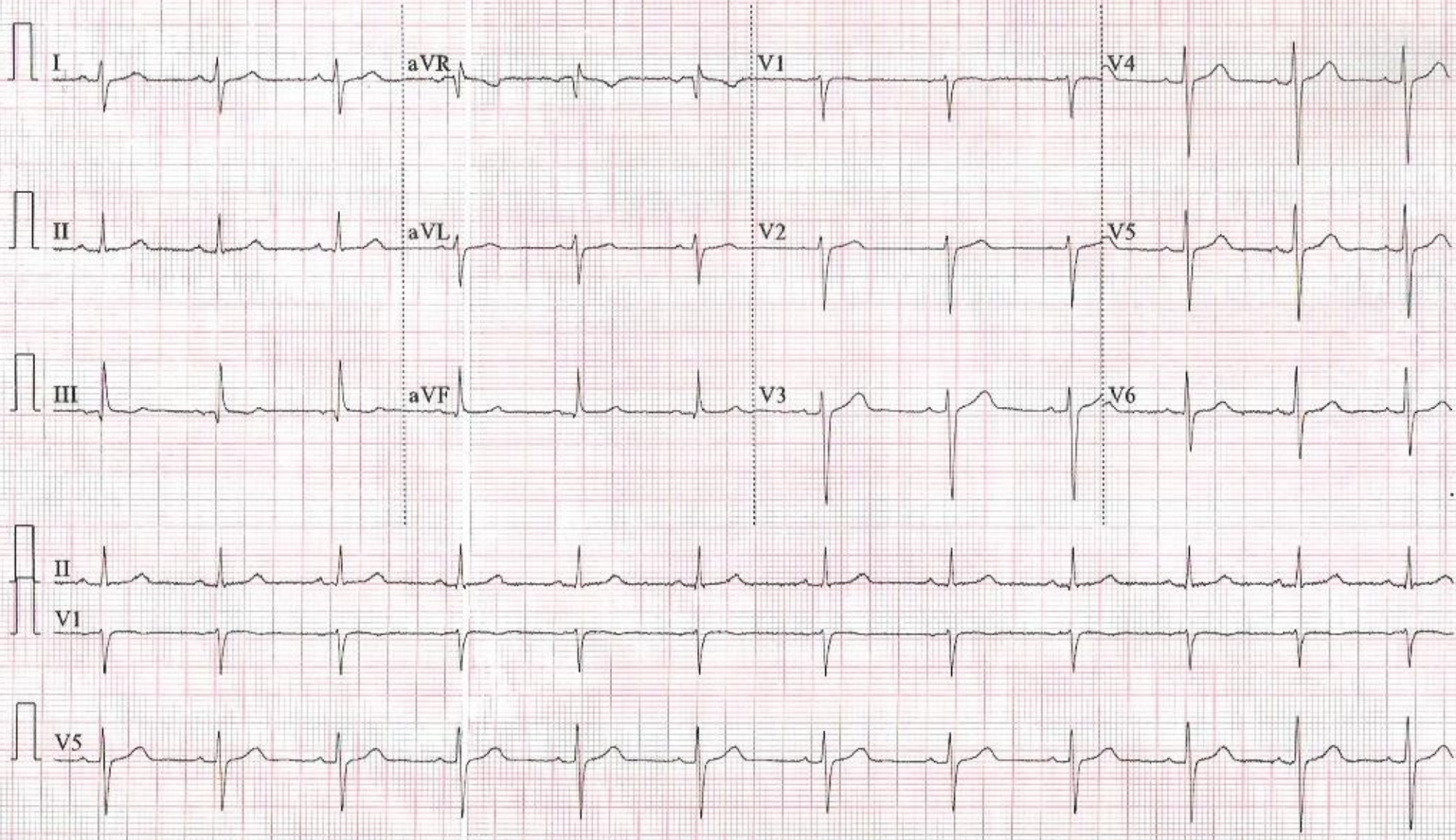
Diagnosis Information:

Sinus rhythm

Rightward axis

Borderline ECG

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 4*2.5s+3r ♥70 SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

Patient's Name	:	**TAZ UDDIN AHMAD**	ID NO	:	**24020617**
Age	:	**38 Yrs**	Date	:	**24/02/2024**
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.	:	24020617	Receive:24/02/2024	Print: 24/02/2024
Patient's Name	:	**TAZ UDDIN AHMAD**		
Age	:	38 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.

HOUSE # 52, GARIB-E-NEWAZ, SECTOR-13, UTTARA, DHAKA-1230
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IBN SINA
Pioneer in Health Care

IBN SINA D. LAB & CONSULTATION CENTER, UTTARA

ISO 9001:2015 Certified

TREADMILL STRESS TEST

I.D. No	: U78628	Received date : 24 Feb 2024	Printed date: 24 Feb 2024 10:13PM	
Name of Pt.	: TAZ UDDIN AHMAD		Age : 38 y(s)	Sex: Male
Ref. By	: RADICAL HOSPITAL LTD			
Ref. By	: ETT			

Total Exercise Time	: 09:34 Min	**Max.HR attained**	:	133	Bpm.
% of max. pred. HR	: 73 %	**Max. Pred HR**	:	182	Bpm.
Maximum BP	: 140/90 mmhg.	**Max. work load attained**	:	11.90	METS
Indication	: Screening for IHD.				
Risk Factors	: Smoking.				
Reason for Termina.	: Fatigue.				
Test Profile	: BRUCE				
Symptoms	: Fatigue.				

Summary Result ⇒ **NEGATIVE**

Comments:

- **TAZ UDDIN AHMAD** performed stress test in Bruce protocol for the evaluation of IHD (angina pectoris).
- Exercise capacity was good.
- **Inotropic response was normal but THR was not achieved.**
- **Stress test was terminated because of fatigue.**
- 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.

24/02/2024

Dr. Md. Aminur Razzaque
MBBS. MD (Cardiology) NICVD,
Assistant Professor (Cardiology), NICVD
Advance training on Echocardiography JROP (India)
Consultant, IBN SINA D.Lab & Consultation center, Uttara.

Prepared by: Nurjahan

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

Patient ID	24020617	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	24/02/2024
Patient Name	TAZ UDDIN AHMAD		
Age	38 YRS	Sex	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM.		

THANK YOU FOR THE COURTESY OF THIS REFERRAL

LIVER :- Is normal in size 12.5 cm, regular in shape and normal position. The echogenicity of the parenchyma is normal . 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 (9.8x 4.1)cm and uniform in echo-texture.

BOTH KIDNEYS :- Are normal in size RK-10.3 cm, LK-10.6 cm 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: Is normal in size volume is 10.0 cc , regular in shape. Echogenicity is homogenous. No area of calcification is seen.

IMPRESSION: Normal study.

24.02.24

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

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINEST CHOLERA

CERTIFICATE INTERNATIONUAX DE VACCINATION OU DE REVACCINATION CONTRE LA CHOLERA

This is to certify that TAZ UDDIN AHMAD date of birth 21/02/1986 Sex MALE.
JE Soussigne (e) certifie que no (e) le sexe

Whose signature follows
dont la signature suit

has on the Date indicated been vaccinated or revaccinated against Cholera
a ctc vaccine (e) ar revaccine (e) contre le Cholera a la date indiquee.

Date	Signature and professional Status of Vaccinator Signature et qualite professionelle Vaccinateur	Approved Stamp Cechet d'authentification	
1 26 JUN 2022	Dr. Mohammad Saifuddin (Sabuj) MBBS (CU), PGT (Medicine), CCD (BIRDEM) BMDC Reg. No: A-41434 Approved Medical Physician DG Shipping Bangladesh New Popular Medical Services, Dhaka	New Popular Medical Services · DG Health Licence No: 1424 ·	ORAL CHOLERA "DUKORAL" Valid Upto 2 Years
2 24 FEB 2024	DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Opthh) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited	CENTER FOR VACCINATION · 35, Shah Makhdum Avenue Uttara, Dhaka · BANGLADESH	ORAL CHOLERA "DUKORAL" Valid Upto 2 yrs

The validity of this certificate shall extend for a period of Two Years, beginning six days after the first injection of vaccine or in the event of a revaccination within such period of six months, on the date of that revaccination.

Notwithstanding the above provision in the case of a pilgrim, this certificate shall indicate that two injections have been given at an interval of seven days and its validity shall commence from the date of the second injection.

The approved stamp mentioned above must be in a from prescribed by the health adminstration of the territory in which the vaccination is perfomed.

Any amendment of this certificate or erasure or failure to complete any part, of it, may render in invalid. La validity dece certificate couvre une period de six mois commencent six Jours a pres is premiere injection du vaccin ou, dans le cas d'une revaccination au cours de cette period de six mois jour de cette revaccination.

Nonobstant les despositions ci-dessus dans le cas d'un pelerin le present certificate doitlaire mention de duex injections partiquees a sept jours d intervalle et sa validire commence le jour de la seconde injection.

De cachet d authentification doit etre canforme au modele present perl administration sanitaite du territoire ou la vaccination est effectuee.

Toute correction ou rature sur le certificate ou l o. mission d' une quelconque des mentions qu il comporte pe u.t cffecter sa validite.

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINEST YELLOW FEVER

CERTIFICATE INTERNATIONUAX DE VACCINATION OU DE REVACCINATION CONTRE LA FIEVRE JAUNE

TAZ UDDIN AHMAD

This is to certify that / JE Soussigne (e) certifie que } ✓ date of birth / no (e) le } 21/02/1986 Sex / sexe } MALE

Whose signature follows / dont la signature suit }

has on the Date indicated been vaccinated or revaccinated against yellow fever
a e' tc' vaccine (e) ou revaccine' (e) contre le fievre jaune a la date indiquee.

Date	Signature and professional Status of Vaccinator Signature et titre du vaccinateur	Manufacturer and batch no of vaccine Fabricant du vaccin et nunne' ro du lot	Official stamp of vaccinating centre Cachet officiel du centre de vaccination
26 JUN 2022 1	Dr. Mohammad Saifuddin (Sabuj) MBBS (CU), PGT (Medicine), CCD (BIRDEM) BMDC Reg No: A-41434 Approved Medical Physician DG Shipping Bangladesh New Popular Medical Services, Dhaka	YELLOW FEVER VACCINE L.No. L-4361 DAKAR	New Popular Medical Services DG Health Licence No.
2			

This certificate is valid only if the vaccine used has been approved by the world Health Organization and vaccinating centre has been disignated 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 the date of vaccination or, in the event of a revaccination within such period of ten years, from the date of that l'evaccinatio.

This certificate must be signed by a medical practitioner in his own hand; his official stamp is not an accepted substitute for the signature.

Any amendment of this certificate, or crasure, or failure to complete any part of it, may render it invalid.

Ce certificate n' est valable que si le vaccin employe' a e' tc" a approve" par l' Organisation Mondiale de la Sante" et sile centre de vaccination e' te' habilite parl' adminstration sanitairc du territoire dans lequel ce cenite est siture'

La validite de ce certificat couvre une pe' riode de dix ans commencant dix joursapres la date de la vaccinatio ou. dans le cas dunce revaccinatio au cours de cette pe' riode de dix ans, le jour de cette revaccination.

Ce certificate do it etre signc' par un me' decin dc sa propre main. son cachet official ne pouvant ctre conside' rc' comme Icnant licu de signature.

Toute correction ou rature sur le certificate ou l'omission d'une quelconique des mentions qu' il comporle peut affecter sa validite.