



HAQUE & SONS LTD.



Rummana Haque Tower, 1267/A, Goshaidanga, Agrabad C/A, Chattogram, Bangladesh.
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Accredited By : BMDC
Accreditation No. A-55144

PATIENT CONTROL NUMBER
H1474

MEDICAL EXAMINATION CERTIFICATE

SURNAME ORIN	FIRST NAME AND AHMED MOSTAQUE	MIDDLE NAME MORSHED
PLACE AND DATE OF BIRTH JASHORE 21-Jan-1995	PASSPORT NUMBER EE0812640	SEAMAN'S BOOK NUMBER C/O/9299
NATIONALITY : BANGLADESHI	SEX : ☒ Male ☐ Female	VESSEL TYPE : Chem/Oil Tanker TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : 11, GHOPE NOWAPARA ROAD, P.O. JASHORE MAIN POST OFFICE, P.S. KOTWALI, 7400, BANGLADESH.		CONTACT NUMBER : 01727-711688 (SELF)
		RANK : 4TH ENGINEER

Have you ever had any of the following conditions?

Condition	YES	NO	Condition	YES	NO
1 Eye/vision problem	☐	☒	18 Sleep problems	☐	☒
2 High blood pressure	☐	☒	19 Do you smoke?	☐	☒
3 Heart/vascular disease	☐	☒	20 Operation/surgery	☐	☒
4 Heart surgery	☐	☒	21 Epilepsy/seizures	☐	☒
5 Varicose veins	☐	☒	22 Dizziness/fainting	☐	☒
6 Asthma/bronchitis	☐	☒	23 Loss of consciousness	☐	☒
7 Blood disorder	☐	☒	24 Psychiatric problems	☐	☒
8 Diabetes	☐	☒	25 Depression	☐	☒
9 Thyroid problem	☐	☒	26 Attempted suicide	☐	☒
10 Digestive disorder	☐	☒	27 Loss of memory	☐	☒
11 Kidney problem	☐	☒	28 Balance problem	☐	☒
12 Skin problem	☐	☒	29 Severe headaches	☐	☒
13 Allergies	☐	☒	30 Ear/nose/throat problems	☐	☒
14 Infectious/contagious diseases	☐	☒	31 Restricted mobility	☐	☒
15 Hernia	☐	☒	32 Back problems	☐	☒
16 Genital disorders	☐	☒	33 Amputation	☐	☒
17 Pregnancy	☐	☒	34 Fractures/dislocations	☐	☒

If any of the above questions were answered "yes", please give details.

Additional questions

	YES	NO
35 Have you ever been signed off as sick or repatriated from a ship?	☐	☒
36 Have you ever been hospitalised?	☐	☒
37 Have you ever been declared unfit for sea duty?	☐	☒
38 Has your medical certificate ever been restricted or revoked?	☐	☒
39 Are you aware that you have any medical problems, diseases or illnesses?	☐	☒
40 Do you feel healthy and fit to perform the duties of your designated position/occupation?	☒	☐
41 Are you allergic to any medications?	☐	☒

Comments:

FIT FOR DUTY ON BOARD SHIP

42 Are you taking any non-prescription or prescription medications?	☐	☒
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If yes, please list the medications taken and the purpose(s) and dosage(s)

I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to Dr. Mir Md. Raihan (approved medical practitioner) I also certify that my history contained above is true and any false statement will disqualify me from my employment, benefits and claims.

Signature of Seafarer

MEDICAL EXAMINATION

Weight 70 kg	Height (cm) 175	Blood Pressure: Systolic 110 mm Diastolic 80 mm	PULSE: 78 bpm																					
<table><tr><td>Ear</td><td colspan="2">Hearing by Audiometry</td><td colspan="2">Audiometry</td><td colspan="2">Hearing by Whisper Test</td></tr><tr><td>Right</td><td>☐ Adequate ☐ Inadequate</td><td></td><td>500</td><td>1000</td><td>2000</td><td>3000</td></tr><tr><td>Left</td><td>☐ Adequate ☐ Inadequate</td><td></td><td></td><td></td><td></td><td></td></tr></table>				Ear	Hearing by Audiometry		Audiometry		Hearing by Whisper Test		Right	☐ Adequate ☐ Inadequate		500	1000	2000	3000	Left	☐ Adequate ☐ Inadequate					
Ear	Hearing by Audiometry		Audiometry		Hearing by Whisper Test																			
Right	☐ Adequate ☐ Inadequate		500	1000	2000	3000																		
Left	☐ Adequate ☐ Inadequate																							
Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☒ NO ☐																								

Visual acuity					Visual fields		
		Unaided		Aided		Visual fields	
		Right eye	Left eye	Right eye	Left eye	Normal	Defective
Distant		6/6	6/6			✓	
Near						✓	

Visual acuity meets the standard laid down in STCW Code Section A-1/9

Colour vision as per STCW CODE Section A-1/9: ☒ Normal ☐ Doubtful ☐ Defective

Date of last colour vision test: Date (day/month/year) 08 JAN 2024

	Normal	Abnormal		Normal	Abnormal
Head	☒	☐	Varicose veins	☒	☐
Sinuses, nose, throat	☒	☐	Vascular (inc. pedal pulses)	☒	☐
Mouth/teeth	☒	☐	Abdomen and viscera	☒	☐
Ears (general)	☒	☐	Hernia	☒	☐
Tympanic membrane	☒	☐	Anus (not rectal exam)	☒	☐
Eyes	☒	☐	G-U system	☒	☐
Ophthalmoscopy	☒	☐	Upper and lower extremities	☒	☐
Pupils	☒	☐	Spine (C/S, T/S and L/S)	☒	☐
Eye movement	☒	☐	Neurologic (full brief)	☒	☐
Lungs and chest	☒	☐	Psychiatric	☒	☐
Breast examination	☒	☐	General appearance	☒	☐
Heart	☒	☐	Skin	☒	☐

RESULTS OF ANCILLARY EXAMINATIONS											
Chest X-Ray	<i>not</i>	BIO CHEMICAL (LIVER FUNCTION TEST)			Marijuana	☐	Positive	☒	Negative		
ECG	<i>not</i>	BILIRUBIN	<i>0.54</i>		Alcohol Test	☐	Positive	☒	Negative		
BLOOD R/E		SGPT	<i>26</i>		URINE R/E	<i>not</i>					
DC(differential count)	<i>not</i>	SGOT	<i>81</i>		OTHERS						
HAEMOGLOBIN (HGB)	<i>14.2</i>	DRUG AND ALCOHOL TEST				HBsAg	☐	Reactive	☒	Nonreactive	
ESR (WESTERGREN)	<i>0.6</i>	Morphine	☐	Positive	☒	Negative	HIV / AIDS Test	☐	Reactive	☒	Nonreactive
WBC	<i>5.300</i>	Amphetamine	☐	Positive	☒	Negative	VDRL	☐	Reactive	☒	Nonreactive
BLOOD GLUCOSE LEVEL		Phencyclidine	☐	Positive	☒	Negative	Blood Type	<i>B</i>			
RANDOM	<i>5.3</i>	Barbiturates	☐	Positive	☒	Negative	Psychological Exam	<i>not</i>			
HBA1C	<i>5.0%</i>	Cocaine	☐	Positive	☒	Negative	Others(KUB Ultrasound)	<i>not</i>			

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


Signature of Seafarer

AHMED MOSTAQUE MORSHED ORIN
Name of Seafarer

08 JAN 2024
Date

Assessment of fitness for service at sea:
On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the examinee medically:

☒ Fit for lookout duties ☐ Not fit for lookout duties

	Deck service	Engine service	Catering service	Other services
Fit	☐	☒	☐	☐
Unfit	☐	☐	☐	☐

☒ Without restrictions ☐ With restrictions

Is the Seafarer free from any medical conditions likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?

Yes ☒	No ☐
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Describe restrictions (e.g., specific position, type of ship, trade area):

Action taken by medical examiner (e.g., referral):

Fitness Date: 08 JAN 2024	Valid Until: 07 JAN 2026
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**PHYSICAL EXAMINATION REPORT/CERTIFICATE
DEPUTY COMMISSIONER OF MARITIME AFFAIRS**

ANNEX 2

THE REPUBLIC OF LIBERIA

LAST NAME OF APPLICANT ORIN			FIRST NAME AHMED MOSTAQUE		MIDDLE INITIAL MORSHED
DATE OF BIRTH 1 MONTH 21 DAY 1995 YEAR			PLACE OF BIRTH JASHORE CITY BANGLADESH COUNTRY		SEX MALE ☒ FEMALE ☐
EXAMINATION FOR DUTY AS: MASTER ☐ RATING ☐ MATE ☐ MOU DECK ☐ ENGINEER ☒ MOU ENGINE ☐ RADIO OFF ☐ SUPERNUMERARY ☐			MAILING ADDRESS OF APPLICANT: 11, GHOPE NOWAPARA ROAD, P.O. JASHORE MAIN POST OFFICE, P.S. KOTWALI, 7400 DIST. JASHORE BANGLADESH.		
MEDICAL EXAMINATION (SEE PAGE 2) STATE DETAILS ON PAGE 2					
HEIGHT 170cm	WEIGHT 70kg	BLOOD PRESSURE 110/80 mmHg	PULSE 78b/m	RESPIRATION 19b/m	GENERAL APPEARANCE AW
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6 LEFT EYE 6/6			
DATE OF LAST COLOR VISION TEST (Month/Day/Year)			Testing Required every 6 years		
COLOR VISION MEETS STANDARDS IN STCW CODE, TABLE A-I/9?			YES ☒ NO ☐		
COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR TEST IS NORMAL			YELLOW ☐ RED ☐ GREEN ☐ BLUE ☐		
HEARING RT. EAR		LEFT EAR			
HEAD AND NECK		HEART (CARDIOVASCULAR)			
LUNGS		SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION?			
EXTREMITIES: UPPER		LOWER			
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 ON BOARD? IF YES, EXPLAIN IN DETAILS OF MEDICAL EXAMINATION ON PAGE 2					
SIGNATURE OF APPLICANT		DATE OF EXAM		EXPIRY DATE	
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN.					
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO AHMED MOSTAQUE MORSHED ORIN					
FIT FOR DUTY ON BOARD SHIP (NAME OF APPLICANT)					
(HE) (SHE) IS FOUND TO BE (FIT) (NOT FIT) FOR DUTY AS A: (MASTER, MATE, ENGINEER, RADIO OFFICER, RATING, MOU DECK, MOU ENGINE or SUPERNUMERARY)					
NAME AND DEGREE OF PHYSICIAN DR. MIR. MD. RAIHAN, MBBS (DU) DFM, CCD (BIRDEM) P.G.T. (OPHTH)					
ADDRESS RADICAL HOSPITALS LTD, 35, SHAH MAKHDUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230.					
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY DG SHIPPING BANGLADESH, REG. NO.A-55144 (B.M.D.C)					
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE 6-May-14					
SIGNATURE OF PHYSICIAN				DATE OF EXAMINATION: 08 JAN 2024	

This certificate is issued by authority of the Deputy Commissioner of Maritime Affairs, R.L. and in compliance with the requirements of the Maritime Labour Convention, 2006 for the Medical Examination of Seafarers.

The Medical Certificate shall be valid for no more than two (2) years from the date of the Examination for those over 18 years of age and for no more than one (1) year for those under 18 years of age.

RLM-I05M ANNEX 2

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.



Rev0 - 09/01/2023

MEDICAL REQUIREMENT

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifications shall be required to have a physical examination reported on this Medical Form completed by a certified physician. The completed medical form must accompany the application for officer certificate, application for seafarer's identity document, or application for certification of special qualifications. This physical examination must be carried out not more than 12 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. Such proof of examination must establish that the applicant is in satisfactory physical condition for the specific duty assignment undertaken and is generally in possession of all body faculties necessary in fulfilling the requirements of the seafaring profession. In addition, the following minimum requirements shall apply:

- (a) All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in the better ear at 15 feet and in the poorer ear at 5 feet.
- (b) Deck officer applicants must have (either with or without glasses) at least 20/20 vision in one eye and at least 20/40 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/160 in both eyes. Deck officer applicants must also have normal color perception and be capable of distinguishing the colors red, green, blue and yellow.
- (c) Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and at least 20/50 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/200 in both eyes. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.
- (d) An applicant's blood pressure must fall within an average range, taking age into consideration.
- (e) Applicants afflicted with any of the following diseases or conditions shall be disqualified: epilepsy, insanity, senility, alcoholism, tuberculosis, acute venereal disease or neurosyphilis, AIDS and/or the use of narcotics.
- (f) Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (g) Applicants for able seaman, bosun, GP-1, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigational officer's certificate.
- (h) Applicants for fireman/watertender, oiler/motorman, pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an engineer officer's certificate.

DETAILS OF MEDICAL EXAMINATION

(To be completed by examining physician)

1. COMPLETE PHYSICAL EXAMINATION INCLUDING HEARING TEST.

2. PATHOLOGICAL EXAMINATION : A) Complete Blood Count, B) Blood Sugar Estimation,

C) Serological Test(VDR) D) Hepatitis B Surface Antigen Test (HbsAg),

E) Urinlysis F) Drug Test G) Alcohol Test.

3. X - RAY EXR PA VIEW

4. E.C.G. TEST

5. EYE EXAMINATION FOR V/A & C/V

08 JAN 2024

RLM-I05M ANNEX 2

2



DR. MIR. MD. RAIHAN
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DG Shipp.ng Bangladesh Approved
General Physician
Radical Hospitals Limited

Rev0 - 09/01/2023

MEDICAL EXAMINATION REPORT/CERTIFICATE

MARITIME ADMINISTRATOR

CONFIDENTIAL DOCUMENT

REPUBLIC OF THE MARSHALL ISLANDS

SURNAME ORIN	GIVEN NAME(S) AHMED MOSTAQUE MORSHED
DATE OF BIRTH 1 21 1995 MONTH DAY YEAR	PLACE OF BIRTH JASHORE BANGLADESH CITY COUNTRY SEX ☒ MALE ☐ FEMALE
EXAMINATION FOR DUTY AS: MASTER ☐ DECK OFFICER ☐ ENGINEERING OFFICER ☒ RADIO OFFICER ☐ RATING ☐	MAILING ADDRESS OF APPLICANT: 11, GHOPE NOWAPARA ROAD, P.O. JASHORE MAIN POST OFFICE, P.S. KOTWALI-7400, DIST. JASHORE. BANGLADESH.

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

HEIGHT 170 cm	WEIGHT 70 kg	BLOOD PRESSURE 110/70 mmHg	PULSE 78 bpm	RESPIRATION 19 bpm	GENERAL APPEARANCE Good
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6 LEFT EYE 6/6		HEARING: RT EAR Normal LEFT EAR Normal	
COLOR TEST TYPE: BOOK ☐ LANTERN ☐ IS COLOR TEST NORMAL? ☒ Yes ☐ No (IF "NO" EXPLAIN ON PAGE 2)					
ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARD? Yes ☐ No ☒					
HEAD AND NECK Normal			HEART (CARDIOVASCULAR) Normal		
LUNGS Normal			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? Yes.		
EXTREMITIES: UPPER Normal LOWER Normal					
IS APPLICANT VACCINATED IN ACCORDANCE WITH WHO RECOMMENDATIONS? Yes ☒ No ☐					
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY WORKING ABOARD A VESSEL, OR TO RENDER HIM/HER UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? ☐ YES ☒ NO					
IF YES, PLEASE ENTER EXPLANATION IN THE SECTION AT THE BOTTOM OF ON PAGE 2					
IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICATIONS? YES ☐ NO ☒					

SIGNATURE OF APPLICANT

08 JAN 2024
DATE OF EXAMINATION

07 JAN 2026
EXPIRY DATE

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

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: **AHMED MOSTAQUE MORSHED ORIN**

FIT FOR DUTY ON BOARD SHIP

NAME OF APPLICANT

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

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

NAME AND DEGREE OF PHYSICIAN **DR. MIR. MD. RAIHAN, MBBS (DU) DFM. CCD (BIRDEM) P.G.T. (OPHIH)**

ADDRESS **RADICAL HOSPITALS LTD, 35, SHAH MAKHUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230.**

NAME OF PHYSICIAN'S CERTIFYING **DG SHIPPING BANGLADESH, REG. NO.A-55144 (B.M.D.C)**

DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE **6-May-2014**

SIGNATURE OF PHYSICIAN

08 JAN 2024

DATE

This certificate is issued by authority of the Maritime Administrator and in compliance with the requirements of the International Convention on Standards of Training,

Certification and Watchkeeping for Seafarers 1978, as amended, and the Maritime Labour Convention, 2006, as amended.

Rev. Mar/2022

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



MI-105M

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifications shall be required to have a medical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer's certificate, application for Seafarer's Identification and Record Book, or application for certification of special qualifications. This medical examination must be carried out within the 24 months immediately preceding application for an officer certificate, certification of special qualifications or a Seafarer's Identification and Record Book. The examination shall be conducted in accordance with RMI MG-7-47-1. Such proof of examination must establish that the applicant is in satisfactory physical and mental condition for the specific duty assignment undertaken and is generally in possession of all body faculties necessary in fulfilling the requirements of the seafaring profession.

In conducting the examination, the certified physician should, where appropriate, examine the seafarer's previous medical records (including vaccinations) and information on occupational history, noting any diseases, including alcohol or drug-related problems and/or injuries. In addition, the following minimum requirements shall apply:

- (a) Hearing
 - All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in better ear at 15 feet (4.57 m) and in poorer ear at 5 feet (1.52 m).
- (b) Eyesight
 - Deck officer applicants must have (either with or without glasses) at least 20/20 (1.00) vision in one eye and at least 20/40 (0.50) in the other. Applicants for deck officer and deck ratings who will serve on vessels of 500 gross tons or more must have normal color perception that complies with C.I.E. Standard I; those serving on vessels less than 500 gross tons must comply with C.I.E. Standards 1 or 2.
 - Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 (0.63) vision in one eye and at least 20/50 (0.40) in the other. Applicants for engineering officer or rating and for radio operator must comply with C.I.E. Standards 1, 2, or 3. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.
- (c) Dental
 - Seafarers must be free from infections of the mouth cavity or gums.
- (d) Blood Pressure
 - An applicant's blood pressure must fall within an average range, taking age into consideration.
- (e) Voice
 - Deck/Navigation officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (f) Vaccinations
 - All applicants should be vaccinated according to the recommendations provided in the WHO publication, International Travel and Health, Vaccination Requirements and Health Advice, and should be given advice by the certified physician on immunizations. If new vaccinations are given, these should be recorded.
- (g) Diseases or Conditions
 - Applicants afflicted with any of the following diseases or conditions shall be disqualified: epilepsy, insanity, senility, alcoholism, tuberculosis, acute venereal disease or neurosyphilis, AIDS, and/or the use of narcotics.
- (h) Physical Requirements
 - Applicants for able seafarer, bosun, GP-1, ordinary seafarer and junior ordinary seafarer must meet the physical requirements for a deck/navigation officer's certificate.
 - Applicants for fire/watertender, oiler/motor, pump technician, electrician, wiper, tanker rating and survival craft/rescue boat crewmember must meet the physical requirements for an engineer officer's certificate.

IMPORTANT NOTE:

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

An applicant who has been refused a medical certificate or has had a limitation imposed on his/her ability to work, shall be given the opportunity to have an additional examination by another medical practitioner or medical referee who is independent of the shipowner or of any organization of shipowners or seafarers.

Medical examination reports shall be marked as and remain confidential with the applicant having the right of a copy to his/her report. The medical examination report shall be used only for determining the fitness of the seafarer for work and enhancing health care.

DETAILS OF MEDICAL EXAMINATION

To be completed by examining physician; alternatively, the examining physician may attach an equivalent form.

(See RMI MG 7-47-1, §3.3).

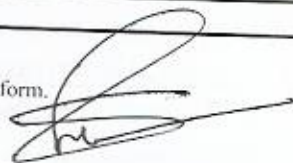
1. COMPLETE PHYSICAL EXAMINATION, INCLUDING HEARING TEST.

2. PATHOLOGICAL EXAMINATION A) Complete Blood Count, B) Blood Sugar Estimation C) Serological Test (VDRL)
D) Hepatitis B Surface Antigen Test (HbsAg), E) Urinysis F) Drug Test G) Alcohol Test.

3. X - RAY EXR PA VIEW

4. E.C.G. TEST

5. EYE EXAMINATION FOR V/A & C/V



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



08 JAN 2024

MI-105M

Id No : 0124 **Date** : 08-Jan-2024 **D.Date** : 08-Jan-2024
Patient's Name : AHMED MOSTAQUE MORSHED ORIN **Age** : 27Y 11M 11 **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/9299

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	14.2 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl.
ESR(Westergreen)	06 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	5,300 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	59 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	36 %	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	106 /cumm	50-450/cumm
Total RBC Count	4.58 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	38.2 %	M: 40-54%, F:37-47%
MCV	83.2 fL	76 - 94 fL
MCH	31.4 pg	27 - 32 pg
MCHC	37.7 g/dL	29 - 34 g/dL
RDW	12.5 %	11 - 16 %
PDW	15.8 fL	35 - 56 fL
Total Platelete Count (PC)	2,45,000 /cumm	150,000-450,000/cumm
MPV	7.9 fL	7.0 - 11.0 fL
PCT	0.175 %	0.1 - 0.2 %
Bleeding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %

Checked By: 
Medical Technologist

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

Bill No	DIA24010124	Received Date	08/01/2024
Patient's Name	AHMED MOSTAQUE MORSHED ORIN		
Patient's Age	27Y 11M 11	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO: C/O/9299
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.3 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.54 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	21.0 U/L	Up to 37 U/L
Serum ALT (SGPT)	26.0 U/L	Up to 40 U/L
HbA1C	5.0 %	4.2 - 6.7 %

REMARKS (IF ANY)

IN VIEW OF THE LIVER FUNCTION TEST RESULT, HIS BLOOD IS FREE FROM TOXIC EFFECT OF 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	DIA24010124	Received Date	08/01/2024
Patient's Name	AHMED MOSTAQUE MORSHED ORIN		
Patient's Age	27Y 11M 11	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO: C/O/9299
Sample	BLOOD		

SEROLOGICAL REPORT

Test Name

Result

HBsAg (Method : (ICT)	Negative
HIV 1 & 2 (Method : (ICT)	Negative
VDRL	Non-reactive
<u>BLOOD GROUPING Result</u>	
ABO Blood Group	"B" (+ve)
Rh(D)Factor	Positive

Checked By

Medical Technologist.
Radical Hospital Ltd.

Dr. Samaiya Khatun

MBBS, MD (Microbiology)

Associate Professor

Dept. of Microbiology

East West Medical College and Hospital.

Bill No	DIA24010124	Received Date	08/01/2024
Patient's Name	AHMED MOSTAQUE MORSHED ORIN		
Patient's Age	27Y 11M 11	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO: C/O/9299
Sample	URINE		

URINE ROUTINE EXAMINATIONPHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

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


Medical Technologist.
Radical Hospital Ltd.

Dr. Sumaiya Khatun

MBBS, MD (Microbiology)

Associate Professor

Dept. of Microbiology

East West Medical College and Hospital.

Bill No	DIA24010124	Received Date	08/01/2024
Patient's Name	AHMED MOSTAQUE MORSHED ORIN		
Patient's Age	27Y 11M 11	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO: C/O/9299
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

Test Name	Result
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Drug Level of Urine

Cocaine	Negative
Morphine	Negative
Marijuana	Negative
Barbiturates	Negative
Amphetamines	Negative
Phencyclidine	Negative
Alcohol	Negative
Benzodiazepines	Negative
Methadone	Negative
Propoxyphene	Negative

Checked By

Medical Technologist.
Radical Hospital Ltd.

Dr. Supriya Khatun

MBBS, MD (Microbiology)

Associate Professor

Dept. of Microbiology

East West Medical College and Hospital.

REF: MT. TRADEWIND ENERGY

DATE: 08/01/2024

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

EYE EXAMINATION REPORT

NAME: AHMED MOSTAQUE MORSHED ORIN

RANK: 4TH ENG

CDC NO: C/O/9299

VISUAL ACUITY:

RIGHT

LEFT

6/6

6/6

UNAIDED

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

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:

HR : 89 bpm

P : 108 ms

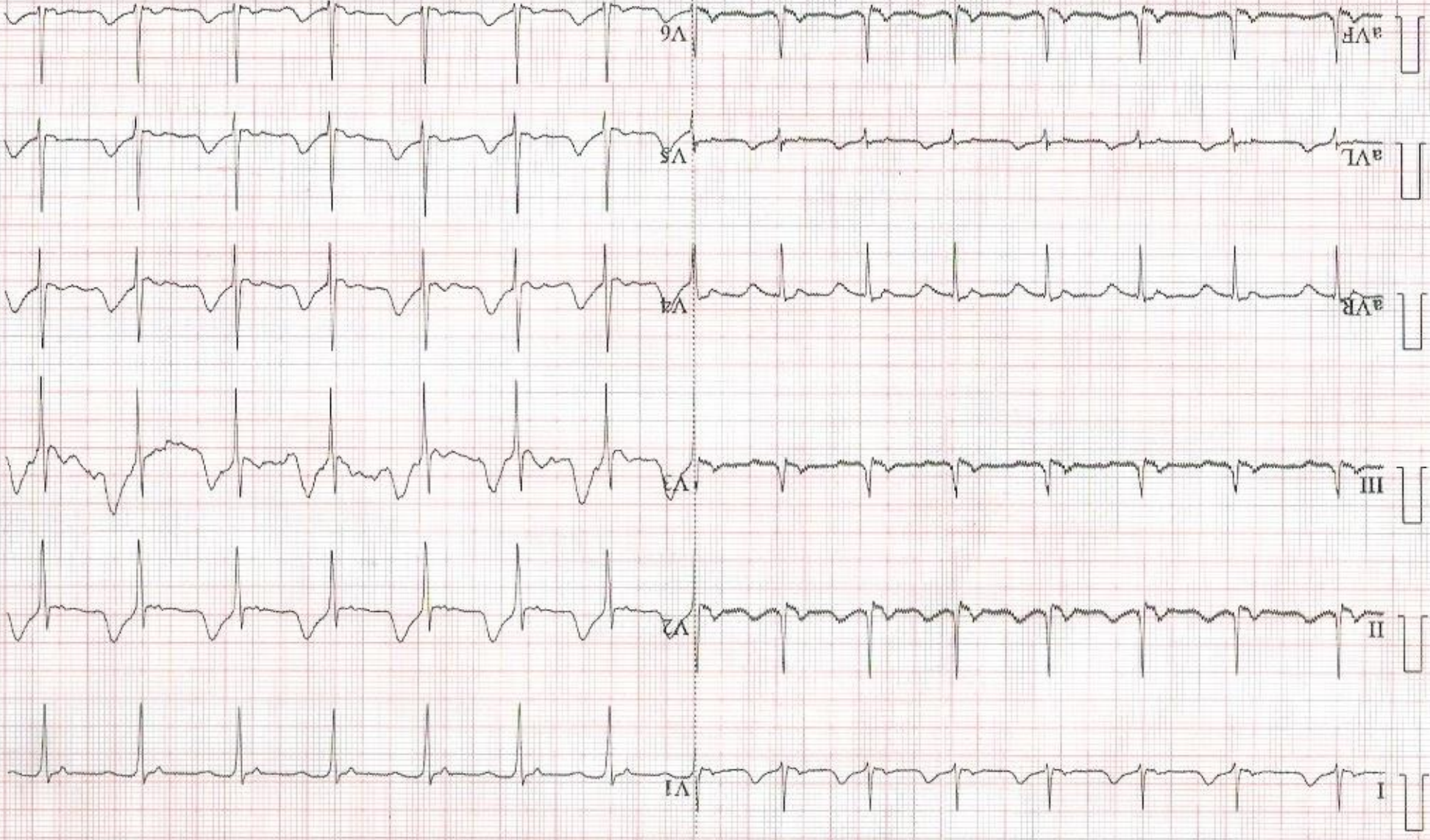
PR : 148 ms

QRS : 86 ms

QT/QTc : 338/412 ms

P/QRS/T : 69/57/31 °

RV5/SVI : 1.453/1.223 mV



**DEPARTMENT OF RADIOLOGY & IMAGING**

ID. No. : 24010124 Receive: 08/01/2024 Print: 08/01/2024
Patient's Name : **AHMED MOSTAQUE MORSHED ORIN**
Age : 29 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.

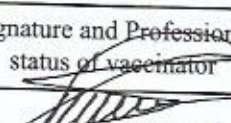
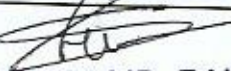
Comments : Normal chest skiagram.

Prof. Dr. Md. Mojibor Rahman
MBBS, DMRD (Radiology & Imaging)
Head of the Department (Radiology & Imaging)
Sylhet Women's Medical College Hospital

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that } Date of birth 21.01.1995 Sex MALE
whose signature follows }

R has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
02 JAN 2023	 DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.	
2 08 JAN 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.	

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Continued overleaf Suite our erso