

# HAQUE & SONS LTD.



Accredited By : BMDC Accreditation No. A 55144

PATIENT CONTROL NUMBER.

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#### M

EDICAL EXAMINATION CERTIFICATE	HOIZ
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ACE AND	DATE OF BIRTH	PASSPOR	RT NUMBER			SEAMAN'S BO		
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15 H	ernia		9	32 Back pro	blems	)		19
16 G	enital disorders		Til .	33 Amputat	ion			9,
17 P	regnancy	On.	MARY	34 Fracture	s/dislocat	tions		19
38 H	ave you ever been declared unfit as your medical certificate ever t re you aware that you have any r	een restricte nedical prob	ed or revoked lems, disease	s or illnesses?	ition (o o o	unation?	0 0	893
	o you feel healthy and fit to p		luties of your	designated pos	ition/occi	upation?	~	-
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42 A	re you taking any non-prescriptio					- 4		1
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o Dr. Mir I	Md. Raihan (approved medical p	ractioner) La	also certify the	t my history cor	ntained al	s, neath institution	nis and public auth any falsa etatamant	uill
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### PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

#### THE REPUBLIC OF LIBERIA

LAST NAME OF APPLICANT		FIRST NAME		MIDDLE INITIAL
SALEH		MD MUSFIQUE	EL	HAQUE
DATE OF BIRTH		PLACE OF BIRTH		SEX
1 1	1988	KHULNA	BANGLADESH	
MONTH DAY	YEAR	CITY	COUNTRY	MALE T FEMALE T
EXAMINATION FOR DUTY AS	S:		MAILING ADDRESS OF APPL	
MASTER	RATING		191/1, TUTPARA, MAIN ROA	AD, KHULNA SADAR.
MATE	MOU DECK	Ti.	KHULNA SADAR-9100, KHU	
ENGINEER .	MOU ENGIN	е 🗀		
RADIO OFF	SUPERNUMI	RARY		
MEDICAL EXAMINATION			S ON PAGE 2	
HEIGHT WEIGHT	BLOOD IN		PULSE RESPIRATION	GENERAL APPEARANCE
179m 7813		or my	783/mi 193/mi	Can Charles
VISION: RIC	HT EYE	LEFT EYE		
WITHOUT GLASSES	5/6	, 4	_	
WITH GLASSES	l ·	/	TTU 0001	
DATE OF LAST COLOR VISION	N TEST (Mont	h/Day/Year) 04.	JAN 2024 Testing Requi	red every 6 years
COLOR VISION MEETS STANI	DARDS IN ST	CW CODE, TABLE A	1-1/97 YES	NO [
COLOR TEST TYPE, BOOK 1 LAN	TERN CHECK	IF COLOR TEST IS NO	ORMAL YELLOW	RED GREEN BEHE
HEARING RT. EAR	M	<b>N</b>	LEFT YEAR	m
HEAD AND NECK	1/		EART (CARDIOVASCULAR)	
	Non	0.000	$\sim$	orm 1
LUNGS	Non		PEECH (DECK/NAVIGATIONAL ( SPEECH UNIMPAIRED FOR NO	RMAL VOICE COMMUNICATIONS
EXTREMITIES:	- 35 N	Λ 1		1.
UPPER	-	Janna	LOWER	Norm
IS APPLICANT SUFFERING FR OR LIKELY TO ENDANGER TO EXAMINATION ON PAGE 2.	OM ANY DIS HE HEALTH C	EASE LIKELY TO B OF OTHER PERSONS	E AGGRAVATED BY, OR TO RES S ON BOARD? IF YES, EXPLAIN I	NDER HIM UNFIT FOR SERVICE AT SEA N DETAILS OF MEDICAL
Fred		-	0 4 JAN 2024	0 3 JAN 2026
SIGNATURE OF AP	PLICANT		DATE OF EXAM	EXPIRY DATE
THIS SIGNATU	JRE SHOULD	BE AFFIXED IN TH	E PRESENCE OF THE EXAMININ	IG PHYSICIAN.
THIS IS TO CERTIFY THAT A F	PHYSICAL EX	AMINATION WAS	GIVEN TO: MD MU	SFIQUEL HAQUE SALEH
		OR DUTY ON B		APPLICANT)
(HE) (SHE) IS FOUND TO BE (F				DIO OFFICER, RATING, MOU DECK.
	RARY).	TORDOTT NON. (	MASTER, MATE, ENGAREER, KA	DIO OFFICER, RATING, MOU DECK,
MOU ENGINE or SUPERNUME				
MOU ENGINE or SUPERNUME	20120000000	DR. MIR MD. R	RAIHAN; M.B.B.S.(D.U.),	
MOU ENGINE OF SUPERNUME. NAME AND DEGREE OF PH	HYSICIAN	T-000000000000000000000000000000000000	MORE STORMAN AND PROPERTY OF STORMS	TTARA, DHAKA-1230, BANGLADESH.
MOU ENGINE or SUPERNUME NAME AND DEGREE OF PH ADDRESS REDICAL HOSE	HYSICIAN PITALS LIMI	TED, 35, SHAH MAK	CHDUM AVENUE, SECTOR-12, UT	
MOU ENGINE or SUPERNUME NAME AND DEGREE OF PH ADDRESS REDICAL HOSE	IYSICIAN PITALS LIMI RTIFICATIN	TED, 35, SHAH MAK	CHDUM AVENUE, SECTOR-12, UT	TARA, DHAKA-1230, BANGLADESH. , B.M.D.C, DHAKA, BANGLADESH.
MOU ENGINE OF SUPERNUME  NAME AND DEGREE OF PE  ADDRESS REDICAL HOSE  NAME OF PHYSICIAN'S CE	HYSICIAN PITALS LIMI RTIFICATIN LIAN'S CERT	TED, 35, SHAH MAK	CHDUM AVENUE, SECTOR-12, UT EGISTRATION NO.: A-55144	, B.M.D.C, DHAKA, BANGLADESH

The Medical Certificate shall be valid for no more than two (2) years from the date of the Ex-amination for those over 18 years of age and 

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.

#### 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 certificated 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 scafarer'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;

- 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.
- 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.
- Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and (c) 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.
- 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.
- Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- 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.
- Applicants for fireman/watertender, oiler/motorman, pumpman, electrician, wiper, tankerman and survival (h) 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)

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

C) Serological Test(VDR) D) Hepatitis B Sarface Antegen Test (HbsAg).

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

3. X - RAY EXR PA VIEW

WIN MIN ED

4. E.C.G. TEST

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

MIR. MD. RAIHAN

MBBS (DU), DFM, CCD (Birdem), PGT (Op BMDC A-55144, MMC-BGD-016

Shipping Bangladesh Approved General Physician

Radical Hospitals Limited

0 4 JAN 2024

RLM-I05M ANNEX 2



### PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

SALEH  DATE OF BIRTH  1 1 1988 KHU  MONTH DAY YEAR CITY  EXAMINATION FOR DUTY AS:  MASTER RATING  MATE MOU DECK  ENGINEER MOU ENGINE  RADIO OFF SUPERNUMERARY  MEDICAL EXAMINATION (SEE PAGE 2) STATE  HEIGHT WEIGHT BLOOD PRESSUR  VISION: RIGHT EYE  WITHOUT GLASSES  WITH GLASSES  DATE OF LAST COLOR VISION TEST (Month/Day/Y)  COLOR VISION MEETS STANDARDS IN STCW COLOR  COLOR TEST TYPE: BOOK " LANTERN" CHECK IF COLOR  HEARING RT. EAR WOMEN  LUNGS	TE DETAILS OF RE PULS LEFT EYE  Cear) 04 JAN  DE, TABLE A-197  OR TEST IS NORM.	2024 Testing Required AL YELLOW LEFT YEAR	PLICANT: DAD, KHULNA SADAR,	RANCE BILLE
DATE OF BIRTH  1 1 1988 KHU  MONTH DAY YEAR CITY  EXAMINATION FOR DUTY AS:  MASTER RATING  MATE MOU DECK  ENGINEER MOU ENGINE  RADIO OFF SUPERNUMERARY  MEDICAL EXAMINATION (SEE PAGE 2) STATE  HEIGHT WEIGHT BLOOD PRESSUR  VISION: RIGHT EYE  WITHOUT GLASSES  WITH GLASSES  DATE OF LAST COLOR VISION TEST (Month/Day/Y  COLOR VISION MEETS STANDARDS IN STCW COLOR  COLOR TEST TYPE: BOOK "LANTERN" CHECK IF COLOR  HEARING  RT. EAR  WEIGHT WEIGHT CHECK IF COLOR  HEARING  RT. EAR  WEIGHT CHECK IF COLOR  HEARING  RT. EAR  LUNGS	TE DETAILS OF LEFT EYE  Cear) D4 JAN  OR TEST IS NORM.	COUNTRY  MAILING ADDRESS OF AP  91/1, TUTPARA, MAIN RO CHULNA SADAR-9100, KE  N PAGE 2  RESPIRATION  193/  Testing Req YES  AL YELLOW  LEFT YEAR	SEX  MALE FE  PLICANT: DAD, KHULNA SADAR, RULNA  GENERAL APPEAR  GENERAL APPEAR  MITTER SERVICE STATE	RANCE
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MEDICAL EXAMINATION (SEE PAGE 2) STATE HEIGHT WEIGHT BLOOD PRESSUR 12 WISION: RIGHT EYE WITHOUT GLASSES WITH GLASSES DATE OF LAST COLOR VISION TEST (Month/Day/Y COLOR VISION MEETS STANDARDS IN STCW COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR HEARING RT. EAR 100 MEAD AND NECK 100 MEAN 100 MEETS TANDARDS IN STCW COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR HEARING RT. EAR 100 MEAN 100 MEETS TANDARDS IN STCW COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR HEARING RT. EAR 100 MEETS TANDARDS IN STCW COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARDS IN STCW COLOR HEAD AND NECK 100 MEETS TANDARD	LEFT EYE  Cear) 0 4 JAN  DE, TABLE A-1/97  OR TEST IS NORM.	2024 Testing Required AL YELLOW LEFT YEAR	uired every 6 years	
HEIGHT WEIGHT BLOOD PRESSUR  PRICE OF LASSES WITH GLASSES DATE OF LAST COLOR VISION TEST (Month/Day/Y COLOR VISION MEETS STANDARDS IN STCW COLOR TEST TYPE: BOOK - LANTERN - CHECK IF COLOR HEARING RT. EAR HEAD AND NECK  JUNGS	LEFT EYE  Cear) 04 JAN  DE, TABLE A-197  OR TEST IS NORM.	2024 Testing Required AL YELLOW LEFT YEAR	uired every 6 years	
HEIGHT WEIGHT BLOOD PRESSUR  JOHN WITHOUT GLASSES WITH GLASSES DATE OF LAST COLOR VISION TEST (Month/Day/Y COLOR VISION MEETS STANDARDS IN STCW COL COLOR TEST TYPE: BOOK - LANTERN - CHECK IF COLOR HEARING RT. EAR HEAD AND NECK  LUNGS	LEFT EYE  Cear) 04 JAN  DE, TABLE A-197  OR TEST IS NORM.	2024 Testing Required AL YELLOW LEFT YEAR	uired every 6 years	
WITHOUT GLASSES WITH GLASSES DATE OF LAST COLOR VISION TEST (Month/Day/Y COLOR VISION MEETS STANDARDS IN STCW COL COLOR TEST TYPE: BOOK * LANTERN * CHECK IF COLOR HEARING RT. EAR HEAD AND NECK LUNGS	LEFT EYE  Cear) 0 4 JAN  DE, TABLE A-1/97  OR TEST IS NORM.	2024 Testing Required Part YELLOW LEFT YEAR	uired every 6 years	
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WITH GLASSES  DATE OF LAST COLOR VISION TEST (Month/Day/Y COLOR VISION MEETS STANDARDS IN STCW COL COLOR TEST TYPE: BOOK - LANTERN - CHECK IF COLOR HEARING RT. EAR HEAD AND NECK  JUNGS	OCAT) 0 4 JAN DE, TABLE A-1/97 OR TEST IS NORM. HEAR	YES AL YELLOW LEFT YEAR	NO 🗌	ВІШЕ
DATE OF LAST COLOR VISION TEST (Month/Day/Y COLOR VISION MEETS STANDARDS IN STCW COLOR COLOR TEST TYPE: BOOK * LANTERN * CHECK IF COLOR HEARING RT. EAR HEAD AND NECK JUNGS	OCAT) 0 4 JAN DE, TABLE A-1/97 OR TEST IS NORM. HEAR	YES AL YELLOW LEFT YEAR	NO 🗌	BILLE
COLOR VISION MEETS STANDARDS IN STCW COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR TEARING RT. EAR	DE, TABLE A-1/97 OR TEST IS NORM. HEAR	YES AL YELLOW LEFT YEAR	NO 🗌	ВІШЕ
TOLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR HEARING RT. EAR HEAD AND NECK JUNGS	OR TEST IS NORM.	AL YELLOW T		ВІТЕ
HEARING RT. EAR  HEAD AND NECK  JUNGS	HEAR	LEFT YEAR	RED GREEN	ВІДЕ
RT. EAR			<u>~</u>	
JUNGS JONN				
UNGS Janny		T (CARDIOVASCULAR)		
Jonny			Normy	
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S APPLICANT SUFFERING FROM ANY DISEASE L OR LIKELY TO ENDANGER THE HEALTH OF OTHE EXAMINATION ON PAGE 2.	IKELY TO BE AC ER PERSONS ON	GRAVATED BY, OR TO R BOARD? IF YES, EXPLAIN	ENDER HIM UNFIT FOR SERV IN DETAILS OF MEDICAL	VIĆE AT SEA
200		0 4 JAN 2024	0 3 JAN 202	26
SIGNATURE OF APPLICANT	D/	ATE OF EXAM	EXPIRY DATE	Е
THIS SIGNATURE SHOULD BE AFI	FIXED IN THE PR	ESENCE OF THE EXAMIN	ING PHYSICIAN.	
HIS IS TO CERTIFY THAT A PHYSICAL EXAMINA			USFIQUEL HAQUE SALEH	
FIT FOR	DUTY ON B	OARD SHIP (NAMESO	F APPLICANT)	
HE) (SHE) IS FOUND TO BE (FIT) (NOT FIT) FOR D MOU ENGINE OF SUPERNUMERARY).	UTY AS A: (MAS	TER, MATE, ENGINEER, R	ADIO OFFICER, RATING, MO	DU DECK,
NAME AND DEGREE OF PHYSICIAN DR. 1	MIR MD. RAIH	IAN; M.B.B.S.(D.U.).	We see the	
ADDRESS REDICAL HOSPITALS LIMITED, 35,			UTTARA, DHAKA-1230, BANG	GLADESH.
AME OF PHYSICIAN'S CERTIFICATING AUT	THORITY REGI	STRATION NO.: A-5514	4, B.M.D.C, DHAKA, BAN	NGLADESI
DATE OF ISSUE OF PHYSICIAN'S CERTIFICA	$\sim$	40-1	20500-22	
SIGNATURE OF PHYSICIAN	5	DATE OF EXAM	MINATION: 04 JA	N 2024
This certificate is issued by authority of the Deputy	Commissioner	of Maritime Affaire D.L.		00-000000

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.

#### 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 certificated 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.
- 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.
- Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and (c) 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.
- PATHOLOGICAL EXAMINATION: A) Complete Blood Count., B) Blood Sugar Estimation,

C) Serological Test(VDR) D) Hepatitis B Sarface Antegen Test (HbsAg).

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

3. X - RAY EXR PA VIEW

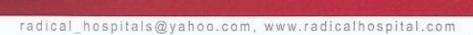
4. E.C.G. TEST

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

RLM-105M ANNEX 2



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.





Id No D.Date: 04-Jan-2024 : 0069 Date: 04-Jan-2024

Patient's Name: MD MUSFIQUEL HAQUE SALEH Age: 36Y 0M 3D Gender: Male

Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/5596

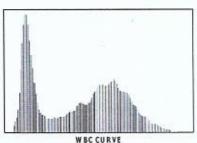
#### Haematology Report

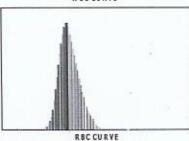
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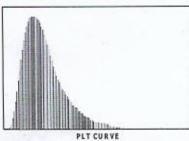
Parameter Name	Results	Reference Range
Hemoglobin (Hb) ESR(Westergreen)	15.4 gm/dl 08 mm/1st hr	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl. Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	8,100 /cumm	Adult: 4000 - 11000/cumm.
	3/2001	Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		0,000 20,000, canini
Neutrophils	<b>65</b> %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	30 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	03 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	243 /cumm	50-450/cumm
Total RBC Count	4.94 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	41.5 %	M: 40-54%, F:37-47%
MCV	84.0 fL	76 - 94 fL
MCH	<b>31.2</b> pg	27 - 32 pg
MCHC	37.1 g/dL	29 - 34 g/dL
RDW	12.6 %	11 - 16 %
PDW	<b>15.4</b> fL	35 - 56 fl
Total Platelete Count (PC)	3,58,000 /cumm	150,000-450,000/cumm
MPV	7.7 fL	7.0 - 11.0 fL

0.276 %

%







Medical Pechnologist

PCT

Bledding Time(BT)

Cloting Time(CT)

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

0.1 - 0.%

10 - 18 %

0.1-0.2 %



radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24010069	Receive	d Date	04/01/2	2024
Patient's Name	MD MUSFIQUEL HAQUE SALEH				22140 (329-1)
Patient's Age	36Y 0M 3D		Patient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIR	RDEM),PGT(Eye),DFM	И С	DC NO	C/O/5596
Sample	BLOOD	0			
Sample	BLOOD				

# BIOCHEMISTRY REPORT

Result	Reference Range
5.1 mmol/l	4.2 – 6.4 mmol/l
0.5 mg/dl	0.2 - 1.1 mg/dl
22.0 U/L	Up to 37 U/L
5.0 %	4.2 - 6.7 %
	5.1 mmol/l 0.5 mg/dl 22.0 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.



radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24010069	Received Dat	te 04/01/2	2024
Patient's Name	MD MUSFIQUEL HAQUE SALEH		100	75
Patient's Age	36Y 0M 3D	Patie	ent's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(	(Eye),DFM	CDC NO	C/O/5596
Sample	BLOOD			

### SEROLOGICAL REPORT

Test Name

Result

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

Checked By

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



radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24010069	Received	Date	04/01/2	2024
Patient's Name	MD MUSFIQUEL HAQUE SALEH	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date	04/01/2	2024
Patient's Age	36Y 0M 3D	Р	atient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PG7		76.	DC NO	C/O/5596
Sample	URINE	(-)-)		DC NO	C/O/3396

### URINE ROUTINE EXAMINATION

# PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

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

OPINION



- radical\_hospitals@yahoo.com, www.radicalhospital.com

REF: MV. DEJIMA DATE: 04/01/2024

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

# EYE EXAMINATION REPORT

NAME: MD MUSHFIQUEL HAQUE SALEH

RANK: 1A/ENG

CDC NO: C/O/5596

VISUAL ACUITY: RIGHT

UNAIDED

AIDED

COLOUR VISION: NORMAL/BLIND

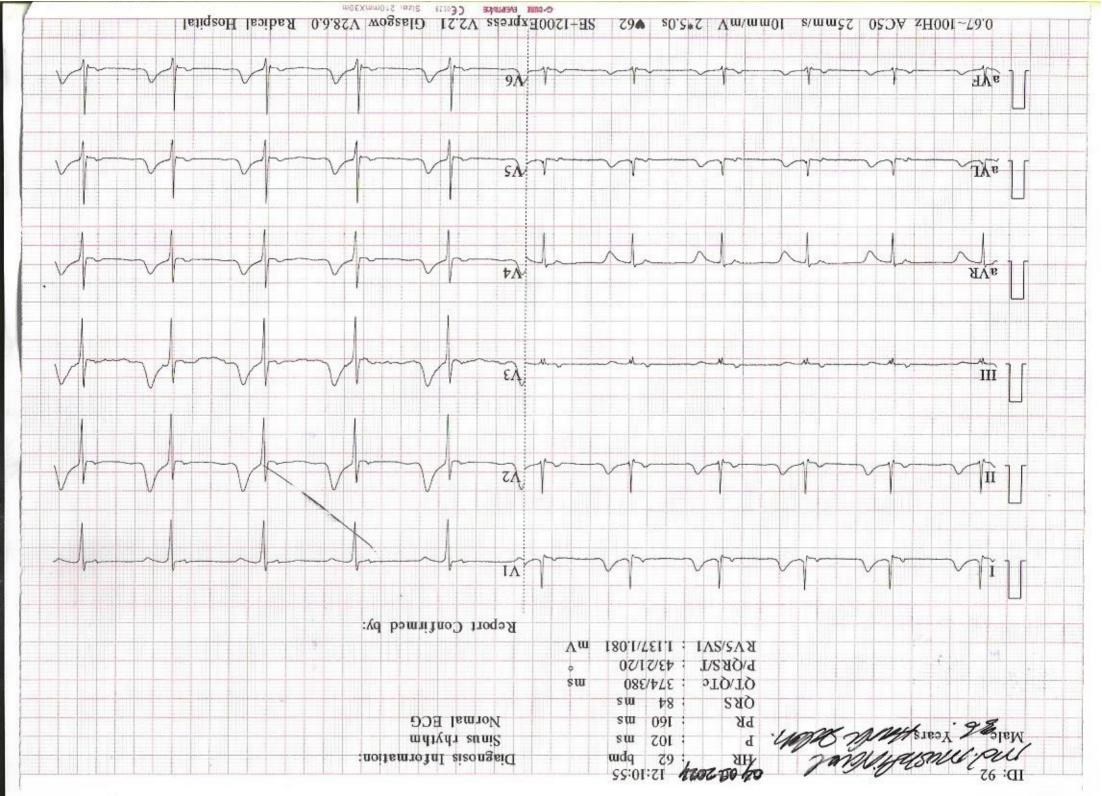
UNFIT / FIT FOR EMPLOYMENT ON BOARD

Dr. Mir Md. Raihan

MBBS, PGT (Ophthalmology)

Assistant Registrar (EX)

East west Medical College & Hospital







#### DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.

24010069

Receive:04/01/2024

Print: 04/01/2024

Patient's Name

MD MUSHFIQUEL HAQUE SALEH

Age

36 YRS

Sex

M

Refd. by

Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

### X-RAY OF CHEST (DIGITAL)

Diaphragm

Both hemidiaphragm are normal in position.

C-P angles are clear.

Heart

: Normal in T.D.

Lung

: 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 whose signature follows

Date of birth 01- JAN-1988 Sex MALE

MD. MUSFI SEN HABUE SALEH (C/0/5596)

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp		
O'M'S	BMDC A-55144, MMC-BGD-016	35, Shah Makhdum Avenus Uttera, Dhaka	KINDN *	
2 44	Radical Hospitals Limited.  DR. MIR. WID. RAIHAN M88S (DU), DFM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shimping Bampisdesh Approved General iso Kaoical Hospitals Limited.	S5, Shah Maddum S Avenue Utless, Official &		
3	DR. MIR. MD. RAIHAI	35, Sheh Wakhdum Ayenus (Usaru, Ohaka	4	
4 JR	MBBS (DU), DFM, CCD (Birdem), PGT (Oper BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approve General Physician Radical Hospitals Limited.	(	The supplemental state of the supplemental s	
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7		7	8	
8				
		Continued ov	verleaf Suite our erso	

#### INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that whose signature follows Date of birth 01-JAN-1988 Sex MALE

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

Date	Signature and Professional status of vaccinator	Origin and batch no, of vaccine	Official stamp of vaccination centre
THE THE PERSON OF THE PERSON O	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.	L NO DAYAR OF THE PROPERTY OF	35, Shah Makhdum Avenue Uttara, Dhaka
2			
3	DR MR NID, RAIHAN see min orn consistent solin red pentic App. pp. Seempled sampledes) Accrowded to seem the property of the seemple of pancies of pancies.	Service Servic	3 4

This certificate is valid on only if the vaccine used has been approved by the World Health Organization and if the vaccinating centre has been designated by the health administration for the territory in which that centre is situated.

The validity of this certificate shall extend for a period of ten years, beginning ten days after date vaccination or in the extent of a revaccination within such period of ten years, from the date of that revaccination. OF THE SEE MALE

Any amendment of this certificate, or erasure, of failure to complete any part of it may render it