



HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaidanga, Agrabad C/A, Chattogram, Bangladesh.

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

Accredited By : BMD
Accreditation No. A55144

PATIENT CONTROL NUMBER:
creditation No. A551

MEDICAL EXAMINATION CERTIFICATE

SURNAME MAHMUD	FIRST NAME AND SYED	MIDDLE NAME ASIF
PLACE AND DATE OF BIRTH SHERPUR 19-Aug-1993	PASSPORT NUMBER A13137080	SEAMAN'S BOOK NUMBER CO8653
NATIONALITY : BANGLADESHI	SEX : ☒ Male ☐ Female	VESSEL TYPE :
PERMANENT HOME ADDRESS : VILL-THANA ROAD, PO-SHERPUR TOWN PS-SHERPUR SADAR, DIST-SHERPUR		CONTACT NUMBER : +8801670521966 (SELF)
		RANK : 3RD ASST 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?	☐	☒

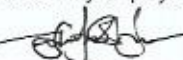
Comments:

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 practioner) 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 76 kg	Height (cm) 172	Blood Pressure: Systolic 120 mm Diastolic 80 mm	PULSE: 78 b/min
Ear	Hearing by Audiometry	Audiometry	Hearing by Whisper Test
Right	☐ Adequate ☐ Inadequate	500 1000 2000 3000	☐ Adequate ☐ Inadequate
Left	☐ Adequate ☐ Inadequate	N/A	☐ Adequate ☐ Inadequate
Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☐ NO ☐			

	Visual acuity			
	Unaided		Aided	
	Right eye	Left eye	Right eye	Left eye
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☒ YES / NO☐ Doubtful☐ Defective

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

04 JAN 2024

	Visual fields	
	Normal	Defective
	Right eye	Left eye
Right eye	☒	
Left eye	☒	

	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>N/A</i>	BIO CHEMICAL (LIVER FUNCTION TEST)				Marijuana	☐ Positive	☐ Negative
ECG	<i>N/A</i>	BILIRUBIN	<i>0.5</i>		Alcohol Test	☐ Positive	☐ Negative	
BLOOD R/E		SGPT	<i>27</i>		URINE R/E	<i>N/A</i>		
DC(differential count)	<i>N/A</i>	SGOT	<i>20</i>		OTHERS			
HAEMOGLOBIN (HGB)	<i>15.6</i>	DRUG AND ALCOHOL TEST				HBsAg	☐ Reactive	☐ Nonreactive
ESR (WESTERGREN)	<i>05</i>	Morphine	☐ Positive	☐ Negative	HIV / AIDS Test	☐ Reactive	☐ Nonreactive	
WBC	<i>5.40</i>	Amphetamine	☐ Positive	☐ Negative	VDRL	☐ Reactive	☐ Nonreactive	
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive	☐ Negative	Blood Type	<i>O4+</i>		
RANDOM	<i>5.3</i>	Barbiturates	☐ Positive	☐ Negative	Psychological Exam	<i>N/A</i>		
HBA1C	<i>4.87</i>	Cocaine	☐ Positive	☐ Negative	Others(KUB Ultrasound)	<i>N/A</i>		

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

Signature of Seafarer

SYED ASIF MAHMUD

Name of Seafarer

04 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 ☐

Describe restrictions (e.g., specific position, type of ship, trade area):

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

Fitness Date:

04 JAN 2024

Valid Until:

03 JAN 2026

DR. MIR MO. RAHMAN

Name and Signature of Medical Examiner

MBB (BB), DPM, CCO (Bd), PG (Opth)

BMDG (Bd) and MMC (Bd) 16

DG Shipping Bangladesh Approved

General Physician

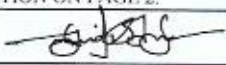
Radical Hospitals Limited.

In Accordance with Medical Examination (Seafarers) Regulations, 1996 and STCW 1978/1996 as Amended, MLC 2006

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

ANNEX 2

THE REPUBLIC OF LIBERIA

LAST NAME OF APPLICANT MAHMUD			FIRST NAME SYED		MIDDLE INITIAL ASIF
DATE OF BIRTH 8 19 1993 MONTH DAY YEAR			PLACE OF BIRTH SHERPUR BANGLADESH CITY COUNTRY		SEX MALE ☒ FEMALE ☐
EXAMINATION FOR DUTY AS: MASTER ☐ RATING ☐ MATE ☐ MOU DECK ☐ ENGINEER ☒ MOU ENGINE ☐ RADIO OFF ☐ SUPERNUMERARY ☐			MAILING ADDRESS OF APPLICANT: VILL-THANA ROAD, PO-SHERPUR TOWN PS-SHERPUR SADAR, DIST-SHERPUR BANGLADESH.		
MEDICAL EXAMINATION (SEE PAGE 2) STATE DETAILS ON PAGE 2					
HEIGHT 172cm	WEIGHT 75kg	BLOOD PRESSURE 120/80 mm	PULSE 78b/min	RESPIRATION 19 bpm	GENERAL APPEARANCE Good
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6 LEFT EYE 6/6			
DATE OF LAST COLOR VISION TEST (Month/Day/Year) 04 JAN 2024 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 Normal		LEFT EAR Normal			
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 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 04 JAN 2024		EXPIRY DATE 03 JAN 2026	
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN.					
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: SYED ASIF MAHMUD (NAME OF APPLICANT)					
NAME AND DEGREE OF PHYSICIAN DR. MIR MD, RAIHAN ; M.B.B.S (D.U), REG.NO.A-55144					
ADDRESS REDICAL HOSPITALS LIMITED. 35, SHAH MAKHDUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230,					
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY DG SHIPPING, BANGLADESH					
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE 06-05-2014					
SIGNATURE OF PHYSICIAN 		DATE OF EXAMINATION: 04 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-J05M 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 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.
- (b) 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.
- (c) An applicant's blood pressure must fall within an average range, taking age into consideration.
- (d) 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.
- (e) Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (f) 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.
- (g) 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.
- (h)

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) Urinylis 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


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Radical Hospital Ltd. 1/2023

RLM-I05M ANNEX 2



04 JAN 2024

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DEPUTY COMMISSIONER OF MARITIME AFFAIRS**

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HEARING RT. EAR nm LEFT EAR nm					
HEAD AND NECK Donny			HEART (CARDIOVASCULAR) Donny		
LUNGS Donny			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? Yes		
EXTREMITIES: UPPER Donny LOWER Donny					
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RLM-105M ANNEX 2

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Rev0 - 09/01/2023

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Rev'd - 09/01/2023

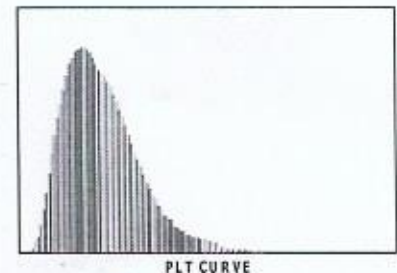
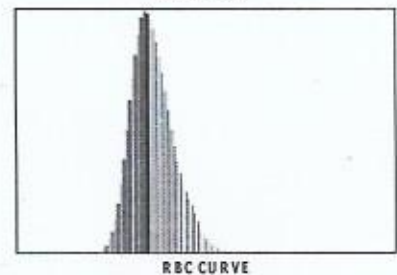
04 JAN 2024

Id No : 0070 **Date** : 04-Jan-2024 **D.Date** : 04-Jan-2024
Patient's Name : SYED ASIF MAHMUD **Age** : 30Y 4M 15D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/8653

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	15.6 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. Male:0-10, F:0-20 mm/1st hr.
ESR(Westergreen)	05 mm/1st hr	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Total WBC Count(TC)	5,300 /cumm	
Differential WBC Count (DC)		
Neutrophils	63 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	32 %	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	4.91 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	41.6 %	M: 40-54%, F:37-47%
MCV	84.7 fL	76 - 94 fL
MCH	31.8 pg	27 - 32 pg
MCHC	37.5 g/dL	29 - 34 g/dL
RDW	12.8 %	11 - 16 %
PDW	14.2 fL	35 - 56 fL
Total Platelete Count (PC)	2,22,000 /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	DIA24010070	Received Date	04/01/2024
Patient's Name	SYED ASIF MAHMUD		
Patient's Age	30Y 4M 15D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/8653
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.2 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.45 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	29.0 U/L	Up to 37 U/L
HbA1C	4.8 %	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.

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Patient's Age	30Y 4M 15D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/8653
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	"O" (+ve)
Rh(D)Factor	Positive

Checked By

 Medical Technologist.
 Radical Hospital Ltd.


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

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Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/8653
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	Straw	R B C	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.

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: SYED ASIF MAHMUD

RANK: 3A/ENG

CDC NO: C/O/8653

VISUAL ACUITY:

RIGHT

LEFT

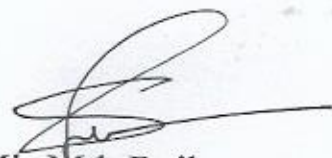
UNAIDED

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: 92

12:10:21

Male 30 Years

Speed 100mm/s

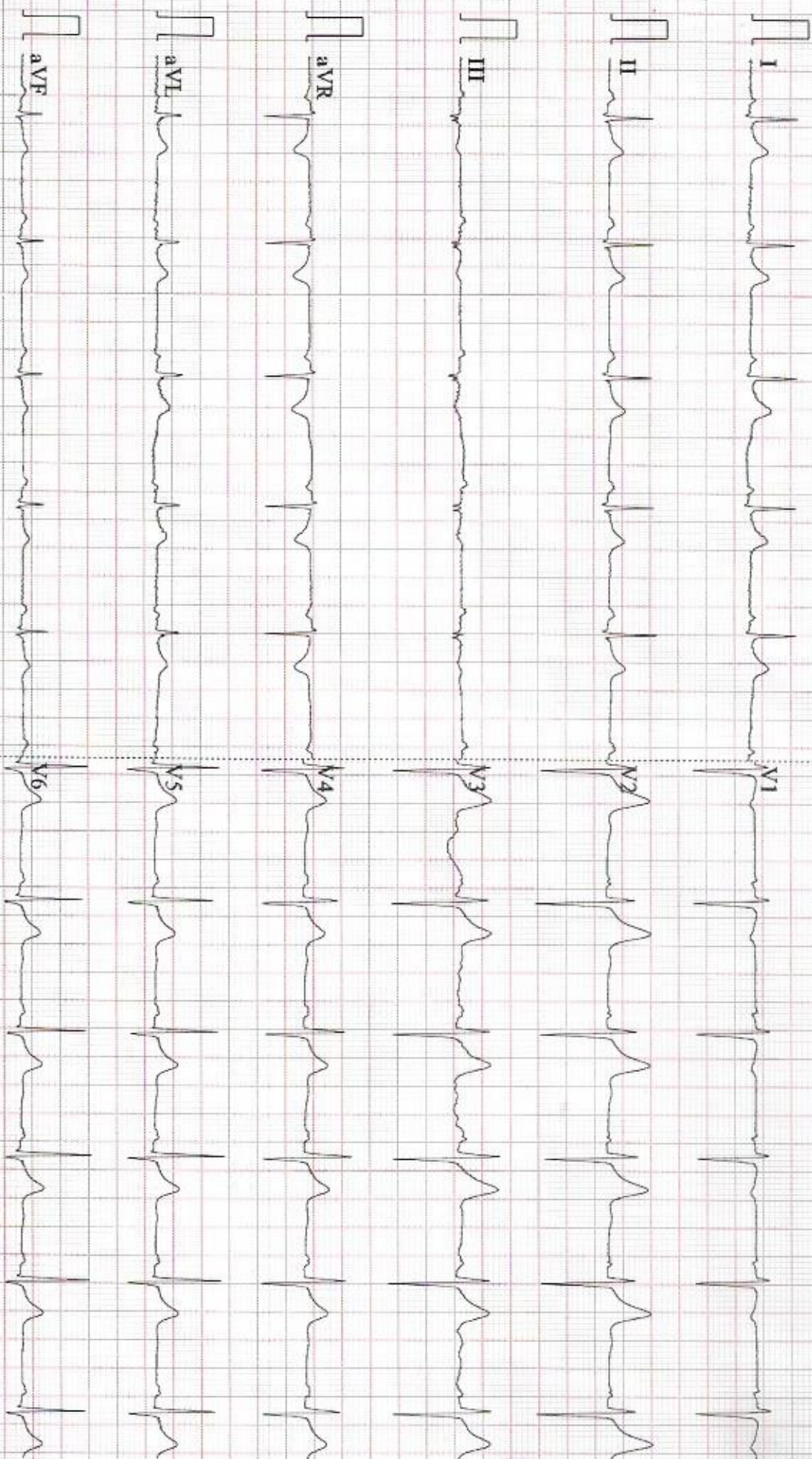
Diagnosis Information:

Sinus rhythm

Normal ECG

HR	65	bpm
P	102	ms
PR	160	ms
QRS	86	ms
QT/QTc	372/387	ms
P/QRS/T	55/22/20	°
RV5/SV1	1.145/1.071	mV

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 2*5.0s

65

SE-1200Express V2.21

Glasgow V28.6.0 Radical Hospital

CE0133

Size: 210mmx300mm

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 240100670 Receive: 04/01/2024 Print: 04/01/2024
Patient's Name : SYED ASIF MAHMUD
Age : 30 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

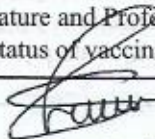
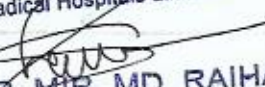
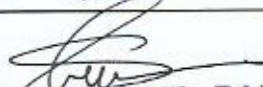
INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that
whose signature follows

Date of birth 19-08-1993 Sex Male

Syed Afif Mahmud

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
1 11 MAY 2021	 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 04 SEP 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.		
3 04 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.		4
5		5	6
6			
7		7	8
8			

Continued overleaf Suite our erso

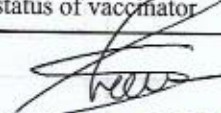
INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that
whose signature follows

Date of birth 19-08-1993 Sex Male

Syed Asif Mahmud

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
1 11 MAY 2021	 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			
3			3 4
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.

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