#### Medical Certificate for Service at Sea

As per medical standards of ILO-MLC 2006, as amended STCW 2010

Issue Date: 15th July 2013 Rev. Date: 01 November 2022 Revision No.: 01 Form #: C-43

Name: (last, first, middle	2)				
AHMED	MD			HREDOY	
Date of birth: (day/month/year)	04	04	2001	Gender: (male/female)	MALE
Passport / Discharge book No:	B007	B00778488		Nationality:	BANGLADESHI
Rank:	DECK	HAND		Place of Examination:	



I have evaluated the above-named seafarer/ new entrant after establishing his identity as per the documents mentioned above. On the basis of the seafarer's/ new entrant 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 —

		103 110
a.	Hearing meets the standards in STCW Code, section A-I/9:	
b.	Unaided hearing is satisfactory;	
c.	Color Vision meets the required STCW Code standards section A-I/9 (testing only required every six years)	
d.	Date of last color vision test:	
e	Fit for lookout duty	
f	Is the seafarer free from any medical condition 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:	
	This seafarer is UNFIT FOR DUTY **/ FIT FOR DUTY with / without resbelow.	The state of the s
	*This Medical Certificate is issued with following restriction	
	** Reasons for being unfit	

Date of examination: (Day/Month/Year)	2 9 JAN 2024
Expiry date of certificate: (Day/Month/Year)	2 8 JAN 2026
Name of Medical Examiner	DR. MIR MD. PAIHAN MBBS, (DU), DFM
Signature of Medical Examiner	Au S
Official Stamp	



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.

File No.: L #3 (2nd/O)

Retention: 3 Years / Frequency: As Required

Page 1 of 1

#### **Medical Declaration**

As per medical standards of ILO- MLC 2006, as amended STCW 2010

## Medical Examination of Seafarers Examinee's Declaration

Name (last, first, middle):	AHMED MD HREDOY
Date of birth (day/month/year):	04-APR-2001
Sex: Male / Female	MALE
	TOKINAGOR, BAGATIPARA, PAKA-6410
Home address:	NATORE, BANGLADESH
Passport No./Discharge book No.:	B00778488
Department (Deck/Engine/Radio/Food handling/other):	DECK
Rank:	DECK HAND
Routine and emergency duties (if known);	
Type of ship (Cargo, Tanker, Passenger):	
Trade area (coastal, tropical, worldwide):	

### Seafarer's Personal Declaration

(Assistance should be offered by medical staff)

#### Have you ever had any of the following conditions?

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

File No.: L #4 (2nd/O)

Retention: 3 Year Hospital Required

# Issue Date: 15th July 2013 Rev. Date: 01\* November 2022 Revision No.: 01 Form#: C-44

#### **Medical Declaration**

As per medical standards of ILO- MLC 2006, as amended STCW 2010

						3
					100	
						10
Α	Additional questions				Yes	No
	Have you ever been sign	ed off as sick	or repatriated from a ship	9	1,12,070	
	Have you ever been hosp		or repair lated from a ship			
	Have you ever been decla		sea duty?			-
}	Has your medical certific					
		######################################	ical problems, diseases or	illnesses?		
		And the control of th	the duties of your designation		/	
	Are you allergic to any n	nedication?				1
	If yes, please list the medicat	ions taken, ar	or the purpose(s) and dose	ago(s).		
ignat	hereby certify that the personance of	nal declaratio	n above is a true statement	2 9 JAN 2		
/itne igna	ssed by:	D.	Name (Typed or Printed)	BMDC A-55144, DG Shipp.ng Bang	(Birdem), PGT ( MMC-BGD ladesh App	Ophth) -016
	by authorize the release of all m authorities to Dr. Mir Md. Rail			General P Radical Hosp n professionals, health inst	tals Limited	d
igna	ture of Examinee	1	Day (day/month/year)	2 9	JAN 202	
vitne	ssed by: (signature	tu	Name (Typed or Printed	DR. MIR M885 (DU), DF BMDC A-5	M. CCD (Birden	RAIHA

File No. : L #4 (2nd/O)

Retention: 3 Years Frequency: As Required

Page 2 of 4

Issue Date: 15th July 20. Rev. Date: 01\* November 2022 Revision No.: 01 Form#: C-44

Medical Declaration
As per medical standards of ILO- MLC 2006, as amended STCW 2010

Medical	Examination	by	Doctor

	Pre -s	ea		JE	Periodic			Other	
Sight									
				l Acuity				Visua	al Fields
	701.1.4	Unaided	1		Aided		-	Normal	Defective
	Right Eye	Left Eve	Binocular	Right Eye	Left Eye	Binocular	Right Eye		
Distance	616			Lye	Eye		Left Eye	1	
Near	NS	NJ	. /				Left Eye		
Color vi	sion: aring		Not tested	£	Normal	_[	Doubtful		Defective
1100	500	1000	2000	3000	4000	6000	Speec	and whisp Normal	er test (met Whisper
D. I	Hz	Hz	Hz	Hz	Hz	Hz			- Inspec
Right Ear	20	w	20				Right Ear	4	4
Left Ear	20	20	20				Left Ear	4	4
Pulse rate	e: (/minute	-		18	6/min	Rhythm:		(2	early
	the second secon	COSA:	Systolic:(mi	The second second	120	Diastolic:			80.
The second second	the second secon	cose:	THE RESERVE TO A PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	n/Hg) ✓ i 【	Protein:	Diastolic:		Blood:	7
	the second secon	cose:		111	Protein:				
Urinalysi	the second secon	cose:	THE RESERVE TO A PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	The second second	Protein:	7		Blood:	
Urinalysi Head Sinuses,	s: Glu	cose:		111	Protein:	Skin		Norm	al Abnor
Urinalysi Head Sinuses,	s: Glu	cose:		111	Protein:	Skin Varicose vei	ns		al Abnor
Head Sinuses, Mouth/te Ears (gen	nose, throateth	cose:		111	Protein:	Skin Varicose vei Vascular (in	ins c. pedal pulses)	Norm	al Abnor
Head Sinuses, Mouth/te Ears (gen Tympani	nose, throa	cose:	Normal	111	Protein:	Skin Varicose vei	ins c. pedal pulses)	Norm	al Abnor
Head Sinuses, Mouth/te Ears (gen Tympanic Eyes	nose, throateth neeral)	cose:	Normal	111	Protein:	Skin Varicose vei Vascular (in Abdomen an Hernia	ins c. pedal pulses) ad viscera	Norm	al Abnor
Head Sinuses, Mouth/te Ears (gen Tympanic Eyes Ophthalm	nose, throateth neeral)	cose:	Normal /	111	Protein:	Skin Varicose vei Vascular (in Abdomen an	ins c. pedal pulses) ad viscera	Norm	al Abnor
Head Sinuses, Mouth/te Ears (gen Tympanid Eyes Ophthaln Pupils	nose, throateth neral) c membrar	cose:	Normal	111	Protein:	Skin Varicose vei Vascular (in Abdomen an Hernia Anus (not re G-U system	ins c. pedal pulses) ad viscera	Norm	al Abnor
Head Sinuses, Mouth/te Ears (gen Tympanic Eyes Ophthaln Pupils Eye move	nose, throateth neral) c membrar	cose:	Normal /	111	Protein:	Skin Varicose vei Vascular (in Abdomen an Hernia Anus (not re G-U system Upper and le	ns c. pedal pulses) nd viscera ctal exam)	Norm	al Abnor
Mouth/te Ears (gen Tympanie Eyes Ophthaln Pupils Eye move Lungs an	nose, throa eth eeral) c membrar noscopy	cose:	Normal /	111	Protein:	Skin Varicose vei Vascular (in Abdomen an Hernia Anus (not re G-U system Upper and le	ns c. pedal pulses) nd viscera ctal exam) ower extremities T/S and L/S)	Norm	al Abnor
Head Sinuses, Mouth/te Ears (gen Tympanie Eyes Ophthaln Pupils Eye move Lungs an	nose, throateth neral) c membrar	cose:	Normal /	111	Protein:	Skin Varicose vei Vascular (in Abdomen an Hernia Anus (not re G-U system Upper and lo Spine (C/S,	ns c. pedal pulses) nd viscera ctal exam) ower extremities T/S and L/S)	Norm	al Abnor

Not performed

Chest X-ray

Performed on (day/month/year):

NORMAL

29 JAN 2024

#### **Medical Declaration**

Issue Date: 15th July 2013 Rev. Date: 01th November 2022 Revision No.: 01 Form #: C-44

As per medical standards of ILO- MLC 2006, as amended STCW 2010

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

Test			Results			
	BLOOD TEST		NORMAL			
	URINE TEST		NORM/	AL		
	ECG		NORMAL			
Medical pra	ctitioner's comments and	d assessment of fitnes	s, with reasons for any lin	nitations:		
	No	Restrictions				
Vaccination statu	us recorded:	Yes	□ No			
	ove, I declare the examin		inical examination and th			
	Deck services	Engine service	Catering service	Other services		
Fit						
Unfit Without Re	striction ions (e.g., specific positi	on, type of ship, trade	With Restrictions area)			
Unfit  Without Re  Describe restrict		A 200				
Unfit  Without Re  Describe restrict  Action takes	ions (e.g., specific positions)	(e.g. referral):		2 9 JAN 2024		
Without Re Describe restrict  Action takes	ions (e.g., specific positions) ions (e.g., specific positions) in by Medical Examiner (	(e.g. referral):		2 9 JAN 2024 > 2 8 JAN 2026		
Without Re Describe restrict  Action takes	ions (e.g., specific positions) ions (e.g., specific position by Medical Examiner (  tion: (Day/Month/Year) ertificate: (Day/Month/Y	(e.g. referral):		2 8 JAN 2026		
Without Re Describe restrict  Action takes  Date of examina  Expiry date of examina	ions (e.g., specific positions)  n by Medical Examiner (  tion: (Day/Month/Year)  ertificate: (Day/Month/Y	(e.g. referral):	area)	2 8 JAN 2026		

BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician Radical Hospitals Limited

File No.: L #4 (2nd/O)

Retention: Frequency: As Required

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Id No : 0542

Date: 29-Jan-2024

D.Date: 29-Jan-2024

Patient's Name: MD HREDOY AHMED

Age: 22Y 9M 25D

Gender: Male

Specimen : Blo

: Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-T/ 35831

#### **Haematology Report**

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)  ESR(Westergreen)	14.8 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.
Total WBC Count(TC)	05 mm/1st hr 9,100 /cumm	Male:0-10, F:0-20 mm/1st hr. Adult: 4000 - 11000/cumm.
rotal Wide count(Te)	9,100 /cullill	Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		5/222 25/200/ 68/11/11
Neutrophils	66 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	29 %	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	182 /cumm	50-450/cumm
Total RBC Count	5.01 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	42 %	M: 40-54%, F:37-47%
MCV	77 fL	76 - 94 fL
MCH	<b>33</b> pg	27 - 32 pg
MCHC	33.4 g/dL	29 - 34 g/dL
RDW	12.0 %	11 - 16 %
PDW	36 fL	35 - 56 fl
Total Platelete Count (PC)	2,00,000 /cumm	150,000-450,000/cumm
MPV	8.9 fL	7.0 - 11.0 fL
PCT	0.10 %	0.1 - 0.%
Bledding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %

Checked By Medical Technologist

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



Bill No	DIA24010542 Received Date			29/01/2024	
Patient's Name	MD HREDOY AHMED				
Patient's Age	22Y 9M 25D		Patient's	s Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CC	D(BIRDEM),PGT(Eye),DFM	1 0	DC NO	T/ 35831
Sample	BLOOD	C. SVIN STEERING TO STEER STEERING		- 2-40 26.71 -40.00	- Thereses

#### BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.5 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.51 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	22.0 U/L	Up to 40 U/L

#### REMARKS (IF ANY)

IN VIEW OF THE LIVER FUNCTION TEST RESULT, HIS BLOOD IS FREE FROM TOXIC EFFECT OF CHEMICAL.

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	DIA24010542	Received Date 29/01/		2024	
Patient's Name	MD HREDOY AHMED				
Patient's Age	22Y 9M 25D	Patient's Sex		Male	
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRD	r Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO		DC NO	T/ 35831
Sample	BLOOD				

#### SEROLOGICAL REPORT

Test Name

Result

HBaAg (Method : (ICT) Negative

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	DIA24010542	Received Date		29/01/2024	
Patient's Name	MD HREDOY AHMED				
Patient's Age	201/ 001/ 055	atient's	Sev.	Male	
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(E			T/35831	
Sample	Blood	x - xı - x - x - x - x - x - x - x - x -	ODC NO.	1/33031	

### SEROLOGYCAL REPORT

Test Name

Result

ICT for Syphilis	Negative
ICT for Tuberculosis(TB)	Negative

HOSPITAL

Checked By

Medical Technologist, Radical Hospitals Ltd. Dr. Sumaiya Khatun MBBS, MD (Microbiology)

Associate Professor Dept. of Microbiology

East West Medical College and Hospital



Bill No	DIA24010542	Received Date 29		29/01/2024	
Patient's Name	MD HREDOY AHMED				
Patient's Age	22Y 9M 25D P		Patient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC No.		DC NO	T/ 35831	
Sample	URINE				

#### URINE ROUTINE EXAMINATION

#### PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	0-2/HPF
Sediment	Nil	Epithelial	1-3/HPF

#### CHEMICAL EXAMINATION CASTS / LPF

Reaction	Acidic	RBC	Nil	
Albumin	Nil	WBC	Nil	
Sugar	Nil	Epithelial	Nil	
Ex.Phosphate	Nil	Granular	Nil	
The state of the s		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	DIA24010542	Received Date 29/01/2		2024	
Patient's Name	MD HREDOY AHMED	HREDOY AHMED			
Patient's Age	22Y 9M 25D	Patient's Sex		Male	
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO		DC NO	T/ 35831	
Sample	URINE				

#### DRUG ABUSE TEST

METHOD: Immunochromato graphic Assay (Rapid one Step Test)

Test Name	Result
Drug Level of Ur	ine
Cocaine	Negative
Morphine	Negative
Morphine	Negative

Cocame	regative
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. Sumaiya Khatun MBBS, MD (Microbiology) Associate Professor

Dept. of Microbiology East West Medical College and Hospital.



#### **DEPARTMENT OF RADIOLOGY & IMAGING**

ID. No. : 24010542 Receive:29/01/2024 Print: 29/01/2024

Patient's Name : MD HREDOY AHMED

Age : 22 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.

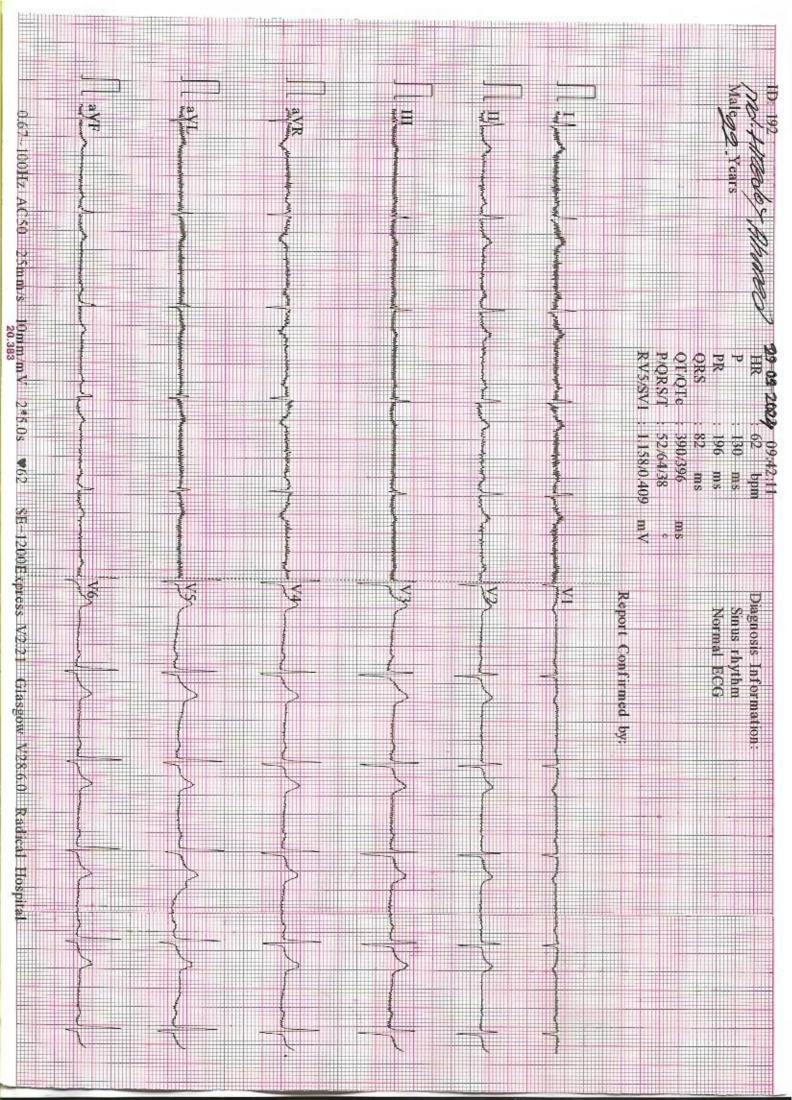
Lung fields are clear.

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



#### **DEPARTMENT OF RADIOLOGY & IMAGING**

ID. No.

24010542

Receive: Print: 29/01/2024

Patient's Name

MD HREDOY AHMED

Age

22 YRS

Sex

: M

Refd. by

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

#### ELECTROCARDIOGRAM (E.C.G) REPORT

Rate

62 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

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