HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh.
Tel : +880 31 716214-6, Fax : +880 31 710530

Accredited By : BMDC
Accreditation No. A 55144

PATIENT CONTROL NUMBER
HSL-003815

MD RAIHAN RADICAL HOSPITALS LTD REG. NO. A-55144

MEDICAL EXAMINATION CERTIFICATE

SURNAME	FIRST NAME	MIDDLE NAME
HOSSAIN	MD	ARIF
PLACE AND DATE OF BIRTH	PASSPORT NUMBER	SEAMAN'S BOOK NUMBER
NAOGAON 25-Oct-2000	A00648201	CO11736
NATIONALITY : BANGLADESHI	SEX : ☑ Male ☐ Female	VESSEL TYPE : CHEM. TANKER / TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : VILL-CHAKLIA PO-NAOGAON SADAR, PS- NAOGAON SADAR DIST-NAOGAON	CONTACT NUMBER : +8801764917829 (SELF)	
	RANK : CADET DECK	

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	☐	N/A	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?	☐	☑

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.

Arif

Signature of Seafarer

MEDICAL EXAMINATION

Weight 62 kg Height (cm) 165 BMI 22.7 Blood Pressure: Systolic 120 mg Diastolic 80 mg PULSE: 78 /m

Ear	Hearing by Audiometry	
Right	☐ Adequate	☐ Inadequate
Left	☐ Adequate	☐ Inadequate

Audiometry			
500	1000	2000	3000
	N/A		

Hearing by Whisper Test	
☐ Adequate	☐ Inadequate
☑ Adequate	☐ Inadequate

Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☑ NO ☐

Cont'd from page 1

	Visual acuity			
	Unaided		Aided	
	Right eye	Left eye	Right eye	Left eye
Distant	6/6	6/6		
Near				

Visual fields		
	Normal	Defective
Right eye	✓	
Left eye	✓	

Visual acuity meets the standard laid down in STCW Code Section A-I/9 YES / NO

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

Date of last colour vision test: Date (day/month/year) 01 JUL 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	✓	☐
Opthalmoscopy	✓	☐	Upper and lower extremities	✓	☐
Pupils	✓	☐	Spine (C/S, T/S and L/S)	✓	☐
Eye movement	✓	☐	Neurologic (full brief)	✓	☐
Lungs and chest	✓	☐	Psychiatric	✓	☐
Breast examination	N/A	☐	General appearance	✓	☐
Heart	✓	☐	Skin	✓	☐

RESULTS OF ANCILLARY EXAMINATIONS

Chest X-Ray	NAD	BIO CHEMICAL (LIVER FUNCTION TEST)			Marijuana	☐	Positive	☑	Negative
ECG	NAD	BILIRUBIN	0.5-6		Alcohol Test	☐	Positive	☐	Negative
BLOOD R/E:		SGPT	25		URINE R/E:	NAD			
DC(differential count)	NAD	SGOT	22		OTHERS				
HAEMOGLOBIN (HGB):	12.3	DRUG AND ALCOHOL TEST			HBsAg	☐	Reactiv	☑	Nonreactive
ESR (WESTERGREN)	05	Morphine	☐	Positive ☑ Negative	HIV / AIDS Test	☐	Reactiv	☑	Nonreactive
WBC	6500	Amphetamine	☐	Positive ☑ Negative	VDRL	☐	Reactiv	☐	Nonreactive
BLOOD GLUCOSE LEVEL		Phencyclidine	☐	Positive ☑ Negative	Blood Type	B+ve			
RANDOM	5.2	Barbiturates	☐	Positive ☑ Negative	Psychological Exam	NAD			
HBA1C	5.0%	Cocaine	☐	Positive ☑ Negative	Others(KUB Ultrasound)	NAD			

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

01 JUL 2024

Asif

Signature of Seafarer

MD ARIF HOSSAIN

Name of Seafarer

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:	01 JUL 2024	Valid Until :	30 JUN 2026

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

Name and Signature of Authorized Physician

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: **HOSSAIN**	GIVEN NAME (S): **MD ARIF**
DATE OF BIRTH: DAY **25** MONTH **10** YEAR **2000**	PLACE OF BIRTH CITY **NAOGAON** COUNTRY **BANGLADESH**
SEX: MALE [✓] FEMALE [ ]	
POSITION ON BOARD: MASTER [ ] DECK OFFICER [✓] ENGINEERING OFFICER [ ] RADIO OPERATOR [ ] RATING [ ]	MAILING ADDRESS OF APPLICANT: **VILL-CHAKLIA PO-NAOGAON SADAR, PS- NAOGAON SADAR DIST-NAOGAON BANGLADESH.**

DECLARATION OF THE AUTHORIZED PHYSICIAN

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

COLOR TEST TYPE: [ ] BOOK [✓] LANTERN — YELLOW RED GREEN BLUE

HEARING: RIGHT EAR LEFT EAR

Confirmation that identification documents were checked at the point of examination: YES [✓] NO [ ]

Hearing meets the standards in STCW Code, Section A-1/9? YES [✓] NO [ ] NOT APLICABLE [ ]

Unaided hearing satisfactory? YES [✓] NO [ ]

Visual acuity meets standards in STCW Code, Section A-1/9? YES [✓] NO [ ]

Colour vision meets standards in STCW Code, Section A-1/9? YES [✓] NO [ ]

(the visual test it is required every six years)

Date of the last colour vision test: (Day/Month/Year) 01 JUL 2024

Are glasses or contact lenses necessary to meet the required vision standards? YES [ ] NO [✓]

Able for watchkeeping? YES [✓] NO [ ]

Is applicant taking any non prescription or prescription medications? YES [ ] NO [✓]

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

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

Signature of Applicant	Name of Applicant	Date
Arif	MD ARIF HOSSAIN	1-Jul-2024

CIRCLE APPROPIATE CHOICE: (HE / SHE) IS FOUND TO BE (FIT / NOT FIT) FOR DUTY AS A (MASTER / DECK OFFCIER / ENGINEERING OFFICER / RADIO OPERATOR / RATING) (WITHOUT ANY / WITH THE FOLLOWING) RESTRICTIONS:

FIT FOR DUTY ON BOARD SHIP

NAME AND DEGREE OF PHYSICIAN: **DR. MIR MD. RAIHAN; M.B.B.S.(D.U.), REG. NO. A-55144**

ADDRESS: **REDICAL HOSPITALS LIMITED, 35, SHAH MAKHDUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230, BANGLADESH.**

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: **DG SHIPPING BANGLADESH**

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: **06-05-2014**

SIGNATURE OF PHYSICIAN: STAMP OF PHYSICIAN: Radical Hospital Ltd. As Per-MLC-2006 DG Shipping Bangladesh Approved DATE: 01 JUL 2024

EXPIRY DATE OF CERTIFICATE: 30 JUN 2026

This certificate is issued in compliance with the requirements of the STCW Convention, 1978, as amended and the Maritime Labour Convention, 2006.

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

HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaildanga,
Agrabad C/A, Chattogram, Bangladesh.
Tel: +88 02333316214-6

Name	MD ARIF HOSSAIN	Date	1-Jul-2024
Age	23	Sex	MALE
Passport No	A00648201	CDC No	CO11736
Sample	BLOOD	Rank	CADET DECK

BIOCHEMISTRY REPORT COMPARE

Vessel Name:	CONCERTO	GINGA LYNX	
	After Sign-Off	Before Sign-On	Reference Range
Date of Report	30-03-2024	09.07.2024	-
Serum Bilirubin	0.54	0.56	0.2 - 1.1 mg/dl
Serum S.G.O.T/A.S.T	25	22	Up to 37 U/L
Serum S.G.P.T.	21	25	Up to 42 U/L

DOCTOR'S REMARKS:	No Restrictions

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

Doctor Seal & Signature

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

RADICAL HOSPITAL LIMITED

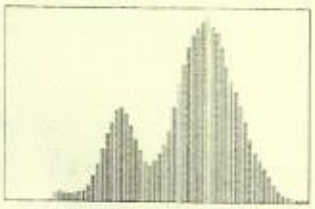
radical_hospitals@yahoo.com, www.radicalhospital.com

ID NO	: 24070006	Date	: 01/07/2024
Patient's Name	: MD.ARIF HOSSAIN	Age	: 23Y 8M 6D
Ref. By	: DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/11736	Sex	: Male
Specimen	: Blood		

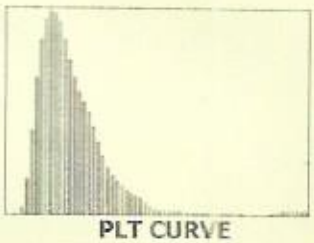
(Relevent estimations were carried out by KT -44 Haematology Analyzer with checked manually)

HAEMATOLOGY REPORT

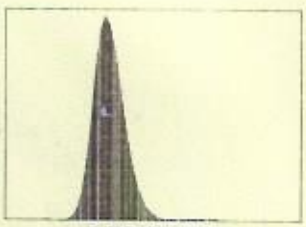
Parameter	Results		Reference Values	Histogram
Haemoglobin(Hb)	**12.3**	**g/dl**	M:12-16, F:10-14.0 g/dl	
ESR(Westergren)	**05**	**mm/1st hr**	M:0-10, F:0-20 mm/1st hr	
TOTAL WBC COUNT	**6,500**	**/cumm**	4,000 - 11,000 /cumm	
DIFFERENTIAL COUNT				
Neutrophils	65	%	(40 - 75)%	
Lymphocytes	28	%	(20-45)%	
Monocytes	04	%	(2-10)%	
Eosinophils	03	%	(1-6)%	
Basophil	00	%	0-1 %	
TOTAL CIR. EOSIONOPHIL COUNT	**195**	**/cumm**	40 - 450 /cumm	
TOTAL PLATELET COUNT(PC)	**264,000**	**/cumm**	1,50,000-4,50,000 /cumm	
MPV	9.7	fL	7.0 -11.0 fL	
PDW-CV	16.6	%	10 - 18 %	
PCT	0.26	%	0.10 - 0.28	
P-LCR	27.8	%	9.00 - 45.00%	
P-LCC	73	x10^3/uL	13 - 129 x10^3/uL	
RBC COUNT	**6.85**	**m/ul**	M: 4.5-6.5, F: 3.8-5.8 m/ul	
HCT/PCV	43.1	%	M: 40-54%, F: 37-47%	
MCV	62.8	fL	76-94 fL	
MCH	18	pg	27-32 pg	
MCHC	28.6	g/dL	29-34 g/dL	
RDW.SD	58	fL	30.0-57.0 fL	
RDW CV	26.9	%	10-16%	



WBC CURVE



PLT CURVE



RBC CURVE

Checked By.....
Medical Technologist.
Redical Hospital Ltd.
Uttara,Dhaka.

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

radical_hospitals@yahoo.com, www.radicalhospital.com

RADICAL HOSPITAL LIMITED

Bill No	DIA24070006	Received Date	01/07/2024
Patient's Name	MD ARIF HOSSAIN		
Patient's Age	23Y 8M 6D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11736
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)	0.56 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	25.0 U/L	Up to 40 U/L
Serum AST (SGOT)	22.0U/L	Up to 37 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.

radical_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24070006	Received Date	01/07/2024
Patient's Name	MD ARIF HOSSAIN		
Patient's Age	23Y 8M 6D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11736
Sample	BLOOD		

SEROLOGICAL REPORT

Test Name	Result
HBs Ag (Method : (ICT)	Negative
HIV 1 & 2 (Method : (ICT)	Negative
VDRL	Non-reactive

BLOOD GROUPING RESULT	
ABO Blood Group	"B" (+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.

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24070006	Received Date	01/07/2024
Patient's Name	MD ARIF HOSSAIN		
Patient's Age	23Y 8M 6D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11736
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	Straw	RBC	Nil
Appearance	Clear	Pus Cells	0-1/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.

RADICAL HOSPITAL LIMITED
radical_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24070006	Received Date	01/07/2024
Patient's Name	MD ARIF HOSSAIN		
Patient's Age	23Y 8M 6D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/11736
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromato graphic Assay (Rapid one Step Test)

Test Name	Result
Drug Level of Urine	
Cocaine	Negative
Morphine	Negative
Marijuana	Negative
Barbiturates	Negative
Amphetamines	Negative
Phencyclidine	Negative
Alcohol	Negative
Benzodiazepines	Negative
Methadone	Negative
Propoxyphene	Negative

Checked By
Medical Technologist.
Radical Hospital Ltd.

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

Patient ID	24070006	Voucher No	
Test Name	USG OF KUB	Delivery Date	01/07/2024
Patient Name	MD ARIF HOSSAIN		
Age	23 Yrs	Sex	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		

THANK YOU FOR THE COURTESY OF THIS REFERRAL

RT KIDNEY : - Is normal in size regular in shape and position. Bipolar length 9.1 cm. The cortical Echogenicity are normal with clear cortico–medullar differentiation. The cortical Thicknesses are normal. The renal sinus shows normal echogenicity and thickness. *P-C systems are not dilated.*

LT KIDNEY : - Is normal in size regular in shape and position. Bipolar length 9.6 cm. The cortical Echogenicity are normal with clear cortico–medullar differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness. *P-C systems are not dilated.*

URINARY BLADDER :- Is well filled. Wall thickness is regular and within normal limit. No intravesicle lesion is seen.

PROSTATE :- Normal in size , volume is 11.06 cc & regular in shape. Echogenicity is homogenous.

COMMENT :- **Suggestive of - Normal study.**

01.07.24

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

radical_hospitals@yahoo.com, www.radicalhospital.com

RADICAL HOSPITAL LIMITED

REF:	GINGA LYNX	DATE: 01/07/2024

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

EYE EXAMINATION REPORT

NAME:	MD ARIF HOSSAIN	RANK: D/CDT	CDC NO: C/O/11736

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:

Md. Akif Hossain.

Male 23 Years

mmHg

01-07-2024 13:17:35

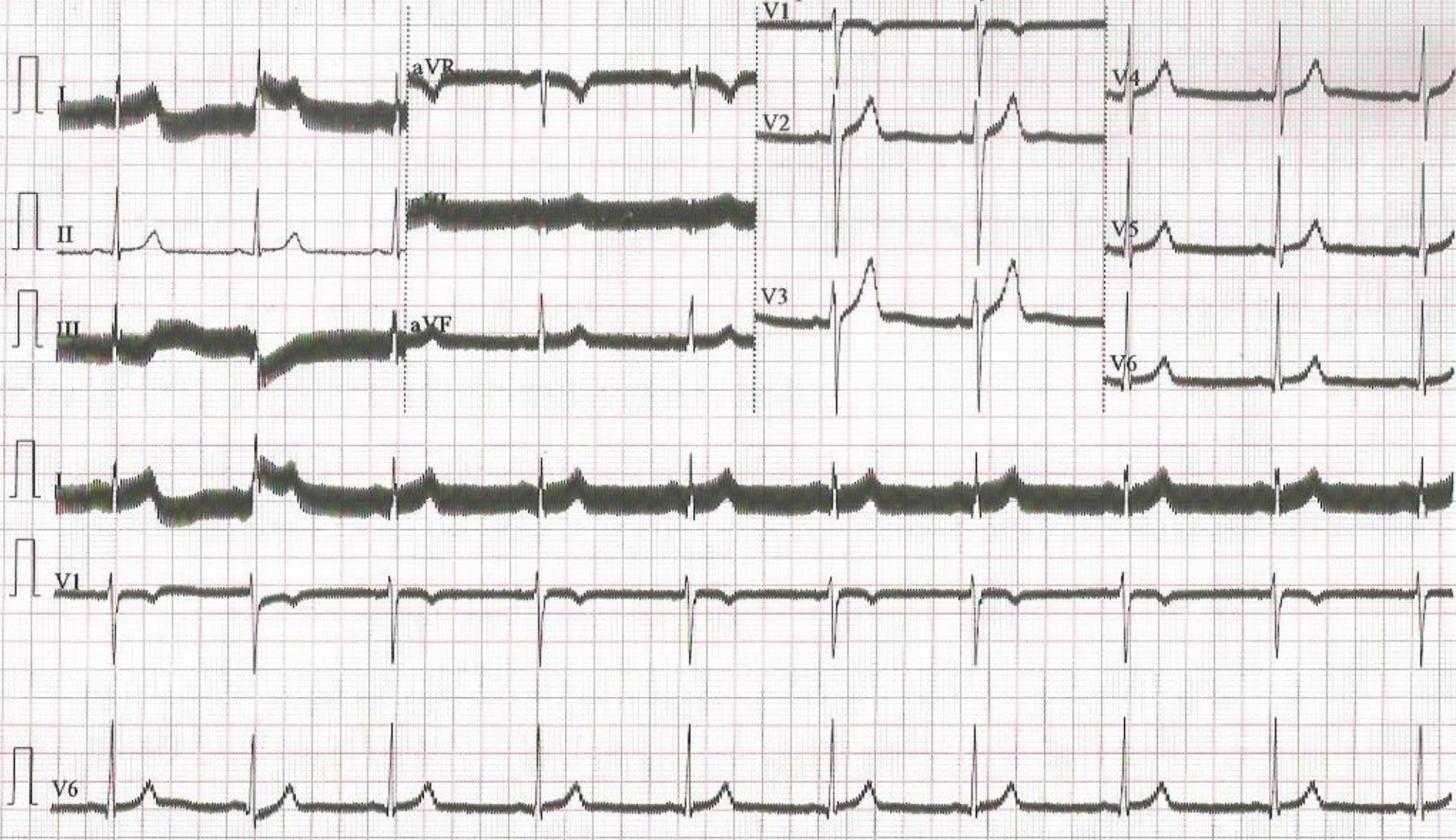
HR	: 57	bpm
P	: 96	ms
PR	: 132	ms
QRS	: 110	ms
QT/QTc	: 404/394	ms
P/QRS/T	: 0/48/24	°
RV5/SV1	: 1.565/1.236	mV

Diagnosis Information:

Sinus bradycardia

Normal ECG except for rate

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 4*2.5s+3r ♥57 SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	:	24070006	Receive:01/07/2024	Print: 01/07/2024
Patient's Name	:	MD ARIF HOSSAIN		
Age	:	23 YRS	*Sex*	: M
Refd. by	:	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		

X-RAY OF CHEST (DIGITAL)

Diaphragm : Both hemidiaphragm are normal in position.
C-P angles are clear.

Heart : Normal in T.D.

Lung : Lung fields are clear.

Bony thorax : Reveals no abnormality.

Comments : **Normal chest skiagram.**

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

This report has been electronically signed.

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

MD ARIF HOSSAIN

This is to certify that whose signature follows } Date of birth 25-10-2000 Sex Male.

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
09 OCT 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.	CENTER FOR VACCINATION 35, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH	
01 JUL 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.	CENTER FOR VACCINATION 35, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH	

3		3	4
4			
5		5	6
6			
7		7	8
8			

Continued overleaf Suite our erso

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

MD ARIF HOSSAIN

This is to certify that whose signature follows } Date of birth 25-10-2000 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
1 09 OCT 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.	YELLOW FEVER VACCINE L. NO DAKAR	CENTER FOR VACCINATION 35, Shah Makhdom Avenue Uttara, Dhaka BANGLADESH
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3			3 4
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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.