



HAQUE & SONS LTD.

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Accredited By BMDC Accreditation No. A-55144

PATIENT CONTROL NUMBER: HSL-004794

MEDICAL EXAMINATION CERTIFICATE

G. NO. P			
SURNAME MAHMUD	FIRST NAME AND MUHAMMAD KHALED	MIDDLE NAME	
PLACE AND DATE OF BIRTH CHANDPUR 31-Dec-1993	PASSPORT NUMBER EH0274147	SEAMAN'S BO	OK NUMBER C/O/8917
NATIONALITY: BANGLADESHI SEX:	Male D Female VESSEL TY	PE: Container Ship TRA	ADING AREA: WORLD WIDE
PERMANENT HOME ADDRESS:	West State of the	CONTACT NUMBER :	01676693894 (SELF)
S RAHMAN VILLA, HOLDING NO- 1169, M CHANDPUR, CHATTOGRAM, BANGLADES		RANK ;	4TH ENGINEER

PU	R, CHATTOGRAM, BANGLADESH.		DAD, PROI	500000000000000000000000000000000000000	RANK ;	4TH ENGINEER
e y	ou ever had any of the following condit	tions?				
_	Condition	YES	NO	T	Condition	YES NO
1	Eye/vision problem	LI		18	Sleep problems	0 1
2	High blood pressure		4	19	Do you smoke?	0 8
3	Heart/vascular disease			20	Operation/surgery	0 6
4	Heart surgery			21	Epilepsy/seizures	D D
5	Varicose veins		TT.	22	Dizziness/fainting	0 0
5	Asthma/bronchitis	П	U	23	Loss of consciousness	(D) D
7	Blood disorder		II,	24	Psychiatric problems	~ \p/ D
3	Diabetes		ď	25	Depression	7 7 7
9	Thyroid problem		ď	26	Attempted suicide	1 2 2
0			d	27		
1	Digestive disorder		13	28	Loss of memory	
2	Kidney problem		G.	633377	Balance problem	AV03: 2000
	Skin problem		ď	29	Severe headaches	
3	Allergies			30	Ear/nose/throat problems	
4	Infectious/contagious diseases		3	31	Restricted mobility	
5	Hemia		Y	32	Back problems	
6	Genital disorders		Junior.	33	Amputation	
7	Pregnancy f the above questions were answered	U ₂	40	34	Fractures/dislocations	
35 36 37 38	Have you ever been signed off as si Have you ever been hospitalised? Have you ever been declared unfit f Has your medical certificate ever be	or sea duty en restricte	/? ed or revok	ed?		YES NO
35 36 37 38 39	Have you ever been signed off as si Have you ever been hospitalised? Have you ever been declared unfit fi Has your medical certificate ever be Are you aware that you have any mo Do you, feel, healthy, and, fit to per	or sea duty en restrict edical prob form the	/? ed or revok lems, disea	ed? ases or i	illnesses?	
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35 36 37 38 39 10 11 11 12 225, 1	Have you ever been signed off as si Have you ever been hospitalised? Have you ever been declared unfit for Has your medical certificate ever be Are you aware that you have any medications? Are you allergic to any medications? Ents: Are you taking any non-prescription please list the medications taken and the youthorize the release of all my previous medical professional professi	or sea duty en restricte edical prob form the of TFOR or prescrip the purpose ous medical actioner) I	ed or revok elems, diser duties of your DUTY Of otion medic e(s) and do	ed? ases or in pur designations? ations? sage(s) rom any	Illnesses? gnated position/occupation? VED SHIP health professionals, health institut in history contained above is true and	ions and public authorities dany false statement will
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Near			-		+		Right			
Visual acuity	meets the st	andard laid d	down in	STCW Cod	le Se	ction A-1/9	Left e	Ye,		
Colour vision	as per STC\	W CODE See	ction A-	1/9:		ormal	□ Doubt	1000) of mation	
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ESR (WESTE WBC BLOOL		5-4 5-67	2 Amph Pheno	etamine cyclidine uratës	0	Positive I/	Negative Negative Negative	HIV / AIDS Test VDRL	☐ Read	ctiv-t Nopreacti
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PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

THE DEPUBLIC OF LIDEDIA

ANNEX 2

LAST MANGE OF					
LAST NAME OF A	APPLICANT		FIRST NAME		MIDDLE INITIAL
MAHMUD			MUHAMMAD	KHALED	
DATE OF BIRTH			PLACE OF BIRTI		SEX
12	31	1993	CHANDPUR	BANGLADESH	1
MONTH	DAY	YEAR	CITY	COUNTRY	MALE FEMALE
EXAMINATION F	OR DUTY AS	š:		MAILING ADDRESS OF APPLICA	INT
MASTER		RATING		S RAHMAN VILLA, HOLDING S	NO- 1169, MOLLA BARI ROAD,
MATE	П -	MOU DECK		PROFESSOR PARA, CHANDPUT	R, CHATTOGRAM.
ENGINEER	F	MOU ENGINE			
RADIO OFF	n	SUPERNUME	RARY	BANGLADESH.	
MEDICAL EXA	- total		2) STATE DETAIL	S ON PAGE 2	
COLOR TEST TYPE HEARING HEAD AND NECT	SES 6 COLOR VISION MEETS STANI E: BOOK LAN RT. EAR	N TEST (Monti	LEFT EYE LOW CODE, TABLE A LIF COLOR TEST IS N S S	JUL 2024 Testing Required YES Testing Required	NO GREEN BLUE BLUE BLUE BLUE BLUE BLUE BLUE BLUE
UPPER	UFFERING ER	JCY ROM ANY DIS	m EASE LIKELY TO E	LOWER	er him unfit for service at sea
IS APPLICANT ST				S ON BOARD? IF YES, EXPLAIN IN I	
IS APPLICANT SI OR LIKELY TO E EXAMINATION (/\/\	
OR LIKELY TO E	ON PAGE 2.	ahuid		25-Jul-2024	2 4 JUL 2026 *
OR LIKELY TO E EXAMINATION O	ON PAGE 2.			25-Jul-2024 DATE OF EXAM	2 4 JUL 2026 EXPIRY DATE
OR LIKELY TO E EXAMINATION O Pluham > SIGN	ON PAGE 2 Kindly 1 ^M ATURE OF AP	PPLICANT	BE AFFIXED IN TE		EXPIRY DATE
OR LIKELY TO E EXAMINATION (Pluham > SIGN	ON PAGE 2 KING IN ATURE OF AP THIS SIGNAT	PPLICANT URE SHOULD		DATE OF EXAM HE PRESENCE OF THE EXAMINING I GIVEN TO SHIP	EXPIRY DATE PHYSICIAN AD KHALED MAHMUD
OR LIKELY TO E EXAMINATION (Pluham Sign/ Sign/	ON PAGE 2 ATURE OF AP THIS SIGNAT HEY THAT A	PPLICANT URE SHOULD PHYSICAL EX EIT FIT) (NOT FIT	FOR DUTY ON	DATE OF EXAM HE PRESENCE OF THE EXAMINING	EXPIRY DATE PHYSICIAN AD KHALED MAHMUD PLICANT)
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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 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 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.
- (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.
- 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)

I. CC	MPLETE	PHYSICAL	EXAMINATION INCLUDING HEARING TEST.

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

C) Scrological 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

Sal Hosoica Sal Hosoica Sal Marantica Sal Ma

DR. MIR. MD. RAIHAN
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General Physician
Radical Hospitals Limited
Rev0 - 09/01/2023

RLM-105M ANNEX 2 25 JUL 2024





ID NO : 24070625 Date : 25/07/2024

Patient's Name: MUHAMMAD KHALED MAHMUD Age: 30Y6M25D

Ref. By : DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/8917 Sex : Male

Specimen : Blood

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

Parameter	R	esults	Reference Values	Histogram
Haemoglobin(Hb) ESR(Westergren)	15.4 06	g/dl mm/1st hr	M:12-16, F:10-14.0 g/dl M:0-10, F:0-20 mm/1st hr	A
TOTAL WBC COUNT	8,200	/cumm	4,000 - 11,000 /cumm	
DIFFERENTIAL COUNT				
Neutrophils	70	%	(40 - 75)%	
Lymphocytes	23	%	(20-45)%	WBC CURVE
Monocytes	04	%	(2-10)%	
Eosinophils	03	%	(1-6)%	the
Basophil	00	%	0-1 %	A
TOTAL CIR. EOSIONOPHIL COUNT	246	/cumm	40 - 450 /cumm	
TOTAL PLATELET COUNT(PC)	342,000	/cumm	1,50,000-4,50,000 /cumm	
MPV	10.1	fL	7.0 -11.0 fL	
PDW-CV	16.2	%	10 - 18 %	PLT CURVE
PCT	0.34	%	0.10 - 0.28	
P-LCR	27.5	%	9.00 - 45.00%	A
P-LCC	94	x10^3/uL	13 - 129 x10^3/uL	
RBC COUNT	5.83	m/ul	M: 4.5-6.5, F: 3.8-5.8 m/ul	
HCT/PCV	48.2	%	M: 40-54%, F: 37-47%	
MCV	82.6	fL	76-94 fL	
MCH	26.4	pg	27-32 pg	RBC CURVE
MCHC	31.9	g/dL	29-34 g/dL	NDC CORVE
RDW SD	48	fL -	30.0-57.0 fL	
RDW CV	17.2	%	10-16%	

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

Bill No	DIA24070625	Received Date	25/07/2024
Patient's Name	MUHAMMAD KHALED MAHMU	D	
Patient's Age	30Y 6M 25D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),C	CD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/8917
Sample	BLOOD	-	

BIOCHEMISTRY REPORT

<u>Test Name</u>	Result	Reference Range
Random Blood Sugar (RBS)	5.4 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.45 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	26 U/L	Up to 40 U/L
Serum AST (SGOT)	21 U/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 Technologis Radical Hospitals Ltd. Dr. Suma (ya Khatun MBBS, MD (Microbiology)

Associate Professor Dept. of Microbiology

East West Medical College and Hospital



radical_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24070625	Received Date	25/07/2024
Patient's Name	MUHAMMAD KHALED MAHN	MUD	
Patient's Age	30Y 6M 25D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/8917
Sample	BLOOD		

SEROLOGICAL REPORT

Result

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

OOD GROUPING RESULT		
ABO Blood Group	"O" (+ve)	
Rh(D)Factor	Positive	

Medical Technologist.
Radical Hospital Ltd.

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



radical_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA24070625	Received Date	25/07/2024			
Patient's Name	MUHAMMAD KHALED MAHMUI)	50)-1			
Patient's Age	30Y 6M 25D	Patient's Sex	Male			
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),Co	BS,(DU),CCD(BIRDEM),PGT(Eye),DFM				
Sample	URINE					

URINE ROUTINE EXAMINATION

PHYSICAL 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
_	19.31	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, AD (Microbiology)

Associate Professor Dept. of Microbiology

East West Medical College and Hospital.

RADICAL HOSPITAL

radical_hospitals@yahoo.com, www.radicalhospital.com

Test Name

Bill No	DIA24070625	Received Date	25/07/2024
Patient's Name	MUHAMMAD KHALED MAHM	UD	
Patient's Age	30Y 6M 25D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU)	,CCD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/8917
Sample	URINE		

Result

DRUG ABUSE TEST

METHOD: Immunochromato graphic Assay (Rapid one Step Test)

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, Mb (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospitai.

RADICAL HOSPITAL

radical_hospitals@yahoo.com, www.radicalhospital.com

REF: MV. MSC LEO VI

DATE: 25/07/2024

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

EYE EXAMINATION REPORT

NAME: MUHAMMAD KHALED MAHMUD

RANK: 4TH ENG

CDC NO: C/O/8917

VISUAL ACUITY:

RIGHT

LEFT

616

6

UNAIDED

AIDED

COLOUR VISION:

NORMAL / BLIND

OPINION

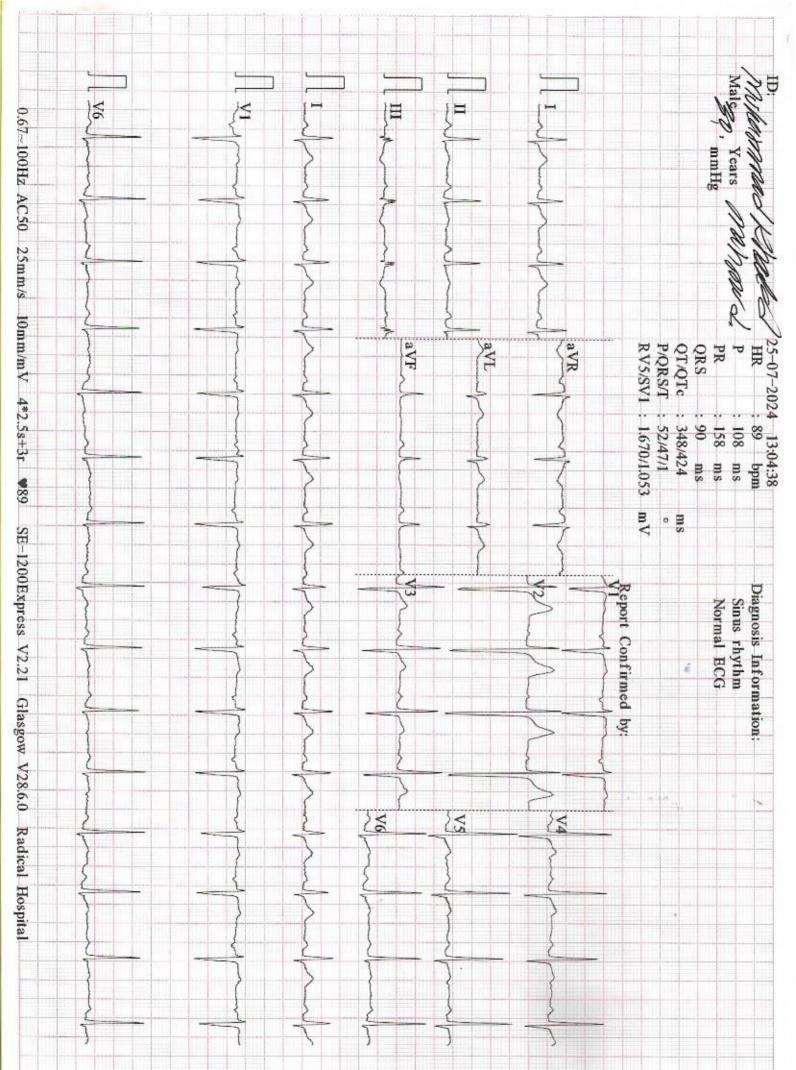
UNFIT / FIT FOR EMPLOYMENT ON BOARD

Dr. Mir Md. Raihan

MBBS, PGT (Ophthalmology)

Assistant Registrar (EX)

East west Medical College & Hospital



radical_hospitals@yañoo.com, www.radicalhospital.com



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24070625 Receive:25/07/2024 Print: 25/07/2024

Patient's Name : MUHAMMAD KHALED 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 ields 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.

Page of 1

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

Date	has on the date indicated been vaccin Signature and Professional status of vaccinator	Approved S	
IN.	DR. MTR. 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.	35, Shah Makhdum Ayenue Uttara, Dhaka	
2			
3		3	4
4			
5		5	6
6			
7		7	8
8			

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

Date of birth 31	12/1993	Sex_	MALE	
			1311/01/50	****
slid Mahawy icated been vaccinate	HUUIY or reversionate	לאןיוןיון decainate	KHHTED	пини
		Date of birth 31 12 1993 Add Mahand MUHA icated been vaccinated or revaccinated	A CONTRACTOR OF THE CONTRACTOR	

Date	Signature and Professional status of vaccinator	Origin and batch no, of vaccine	Official stamp of vaccination centre
ES JUL PART	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.	DAKAR OF	Se FOR VACCION Service Service Uttera, Dhaka
2	2 2		
3	The Statement		3 4
4	The same of the sa	N. TEL	

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.

ISSUED ON BEHALF OF THE DEPARTMENT OF SHIPPING GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

Form No: SMC

Myhammad Khalid Mahmo

Seafarer's Signature



SL NO			 				 			
	0	4	2	0	2	4	7	0	4	1

DG Shipping Bangladesh Approved General Physician

Name & signature to the blactitioner:

SEAFARER MEDICAL CERTIFICATE

This certificate is issued in accordance with Bangladesh Merchant Shipping Ordinance, 1983 and Bangladesh Merchant Shipping Officers and Ratings Training, Certification, Recruitment, Work Hours and Watch keeping Rules, 2011 in compliance with the International Convention on Standards of Training Certificate and Watch keeping for Seafarers, 1978 as amended (STCW'78) and Regulation 1.2 of the Maritime Labour Convention, 2006

The second secon	The state of the s	19,95 00.00		Contract of the opposite of the
SEAFARER INFORMATION:				100
Name: Last MAHMUD	First MUHAMP	1AD	Middle	KHALED
Gender: (Male/Female)MALE				
Occupation: Deck/Engine/Catering/0	V V V V V V V V V V V V V V V V V V V			l'É
Father's/ Husbad'sname: HUT	1944년 (1870년 1972년 - 1981년 - 1921년 1882년			18917
Mother's Name: HASI		050005269		
Address: House No: 1169		H0274147		
Locality/Village: PROFE				
PO: CHANDPL	Carried and the contract of th			1/12/1993
P.S. CHANDPUR		1555		
District: CHANDP			(DD)	/MM/YYYY)
District: 9100002	V-1 1	****		
DECLARATION OF THE RECOGNIZ				
I am duly authorized by the Depa	rtment of Shipping, Gov	ernment of the P	eople's Republic	of Bangladesh and confirm
the followings:	- dan anna da mara abaak	nd at the maint of a		:XESANO
 Confirmation that identificatio Hearing meets the standards 		ed at the point of 6	examination	:YES/NO
Unaided hearing satisfactory				:YES/NO
Visual acuity meets standard:				:XE87NO
Colour vision meets standard				YES/NO
Date of last colour v	T			25 JUL 2024
6. Fit for lookout duties?				:XES/NO
7. Is the seafarer free from any	medical condition likely to	be aggravated by	service at sea or	
render the seafarer unfit for serv		n		:XES/NO
8. Any limitations or restrictions	on fitness?			:YES/NØ
If YES, specify limitations or res	trictions:			
Duties:				
Location/Vessel:	ACCOUNT OF THE PROPERTY OF THE	L HOSPITAL LIMITED	1	
Medical/Other:	- ilana	. Dhake, Bangladesh		
0 Madiant 64	Fit-No restriction	Fit Subject	to restrictions	Unfit
Medical fitness category :	- I It-NO resulction	i it-oubject	to restrictions	Ottilit
10. Date of examination/Issue (DD	MM/YYYY 25 JUL 20	24		
			vacra from the dat	of examination"
11. Date of expiry (DD/MM/YYYY)	No more than 2	years from the dat	e or examination .
Thousand the contests of the cont	(Casta	Tosow.	7	All and the second
I have read the contents of the cert and have been informed of the righ	// 20	E	DR. M	R. MD. RAIHAN
review.	(Z)	Borra Capago B	MBBS (DU). I BMDC A-	DFM, CCD (Birdem), PGT (Ophth) 55144, MMC-BGD-016

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifig:itions 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 24 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. The examination shall be conducted in accordance with the International Labor Organization World Health Organization, Guidelines for Conducting Pre-sea and Periodic Medical Fitness Examinations for Seafarers (ILO/WHO/D.211997). 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 seafarers 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 whis pered voice in better ear at 15 feet (4.57m) and in poorer ear at 5 feet (1.52m).

(b) Eyesight:

- Deck officer applicants must have (either with or without glasses) at least 6/6 [20/20] (1.00) vision in one eye and at least 6/12 [20/40] (0.50) in the other. If the applicant wears glasses, he must have vision without glasses of at least 6/45 [20/150] (0.13) 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 6/9 [20/30] (0.67) vision in
 one eye and at least 6/15 [20/50] (0.40) in the other. If the applicant wears glasses, he must have vision without
 glasses of at least 6/60 [20/200] (0.10) in both eyes. 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/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal
voice communication.

(f) Vaccinations:

 All applicants shall be vaccinated according to the requirements indicated in the WHO publication, International Travel and Health, Vaccination Requirements. and Health Advice, and shall be given advice by the certified physician on immunizations. If new vaccinations are given, these shall 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 useofnarcotics. Applicants diagnosed with, suspected of, orexposed to any communicable disease transmit table by food shall be restricted from working with food or in food - related areas until symptom-free for at least 48 hours.

(h) Physical Requirements:

- 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 craft/rescue boat crewman must meet the physical requirements for an enineer officer's certificate.

IMPORTANT NOTE:

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 fight 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 a form similar or identical to the model provided in Appendix1):

1. Complete physical Examination.

2. Pathological Examination:

a.CBC b.ESR c.HBSAG d.LFT e.ECG f.RBS g.URINER/M/E

DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
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25 JUL 2024