HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh.
Tel : +880-2-333316214-6, Fax : +880-2-333310530

Accredited By : BMDC
Accreditation No. A 55144

PATIENT CONTROL NUMBER
201523

MEDICAL EXAMINATION CERTIFICATE

DR. MIR MD RAIHAN ★ RADICAL HOSPITALS LTD ★ REG. NO. A-55144

SURNAME	FIRST NAME AND	MIDDLE NAME
ALI	RAZZAB	
PLACE AND DATE OF BIRTH	PASSPORT NUMBER	SEAMAN'S BOOK NUMBER
MUNSHIGONJ 10-Oct-1978	A14763760	CO4112

NATIONALITY : BANGLADESHI | SEX : ☑ Male ☐ Female | VESSEL TYPE : IL/CHEM TANKE | TRADING AREA : WORLD WIDE

PERMANENT HOME ADDRESS :
MORDERN HOUSING, ROAD NO.1, PLOT NO- 01, LALPUR ROAD, FATULLAH, NARAYANGANJ SADAR-1400, NARAYANGANJ, BANGLADESH

CONTACT NUMBER : 0088 01911293551

RANK : CHIEF 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	☐	NA	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.

Signature of Seafarer

MEDICAL EXAMINATION

Weight 70kg Height (cm) 164 BMI 26.0 Blood Pressure: Systolic 120mm Diastolic 80mm PULSE: 78/m

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

Audiometry			
500	1000	2000	3000
	NT		

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					Visual fields	
	Unaided		Aided			Normal	Defective
	Right eye	Left eye	Right eye	Left eye			
Distant			6/6	6/6	Right eye	✓	
Near					Left eye	✓	

Visual acuity meets the standard laid down in STCW Code Section A-1/9 ✓ 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) 09 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	NAD	☐	General appearance	☑	☐
Heart	☐	☐	Skin	☑	☐

RESULTS OF ANCILLARY EXAMINATIONS

Chest X-Ray	NAD	BIO CHEMICAL (LIVER FUNCTION TEST)			Marijuana	☐ Positive	☑ Negative
ECG	NAD	BILIRUBIN	0.95		Alcohol Test	☐ Positive	☑ Negative
BLOOD R/E		SGPT	32		URINE R/E	NAD	
DC(differential count)	NAD	SGOT	23		OTHERS		
HAEMOGLOBIN (HGB)	14.5	DRUG AND ALCOHOL TEST			HBsAg	☐ Reactive	☑ Nonreactive
ESR (WESTERGREN)	08	Morphine	☐ Positive	☑ Negative	HIV / AIDS Test	☐ Reactive	☑ Nonreactive
WBC	7000	Amphetamine	☐ Positive	☑ Negative	VDRL	☐ Reactive	☑ Nonreactive
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive	☑ Negative	Blood Type	B+(VE)	
RANDOM	4.0	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:

Razzab (signature) — RAZZAB ALI — 09 JUL 2024

Signature of Seafarer | 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: 09 JUL 2024 Until: 08 JUL 2026

DR. MIR. MD. RAIHAN
MBBS, DIP. SEU, ... BMDC A-55144, MMC-BGD-818
General Physician
Radical Hospitals Limited

Name and Signature of Authorized Physician

ANNEX B

MARITIME AND PORT AUTHORITY OF SINGAPORE
SHIPPING DIVISION

RECORD OF MEDICAL EXAMINATIONS OF SEAFARER

Part A – to be completed by the Seafarer who is responsible for answering each question accurately.

Seafarer's Name :(*Last, first, middle*) (BLOCK CAPITALS) ALI RAZZAB			Gender: Male/~~Female~~
Date of Birth: day/month/year 10-OCT-1978	Place of Birth: MUNSHIGANJ	Nationality: BANGLADESHI	
Type of ID documents: NRIC No. / Passport No.: A14763760	Dept: Deck / Engine / Catering / others Rank: CHIEF ENGINEER	Type of ship: OIL/CHEM TANKER	
Home Address: MORDERN HOUSING, ROAD NO.1, PLOT NO- 01, LALPUR ROAD, FATULLAH, NARAYANGANJ SADAR-1400, NARAYANGANJ, BANGLADESH	Routine and emergency duties: BOTH	Trading area: e.g coastal / world wide	

Seafarer's Declarations *(please tick)*

Have you ever had any of the following conditions?

	Yes	No		Yes	No
1. Eye/vision problem		✓	18. Sleep problem		✓
2. High blood pressure		✓	19. Do you smoke, use alcohol or drugs?		✓
3. Heart/vascular disease		✓	20. Operation/surgery		✓
4. Heart Surgery		✓	21. Epilesy/seizures		✓
5. Varicose veins/piles		✓	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(hearing, tinnitus/nose/throat problem		✓
14. Infectious / contagious diseases		✓	31. Restricted mobility		✓
15. Hernia		✓	32. Back or joint problem		✓
16. Genital disorder		✓	33. Amputation		✓
17. Pregnancy	✓		34. Fracture/dislocations		✓

If you answer "yes" to any of the above questions, please provide details:

Additional questions

	Yes	No
35. Have you ever been signed off as sick or repatriated from a ship?		✓
36. Have you ever been hospitalized?		✓

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37. Have you ever been declared unfit for sea duty?		✓
38. Has your medical certificate even 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 medication?		✓
42. Are you using any non-prescription or prescription medication?		✓

If you answer "yes", please list the medications taken, the purpose(s) and the dosage:

I hereby declare that the personal declaration above is a true statement to the best of my knowledge.

Date	Signature of Seafarer	Name and Signature of Witness
09 JUL 2024	Zarnal	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

I hereby authorize the release of all my previous medical records (including my last Seafarer Medical Certificate) from any health professional, health institutions and public authorities to Dr. _____.

Date	Signature of Seafarer	Name and Signature of Witness
09 JUL 2024	Zarnal	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

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Part B – Result of medical examinations

Eyesight

Use of glasses or contact lenses

☐ No

☑ Yes Type ..... Purpose .....

Visual Acuity

Unaided			Aided		
Right eye	Left eye	Binocular	Right eye	Left eye	Binocular
Distant			Distant	6/6	6/6
Near			Near	N5	N5

Visual fields

	Normal	Defective
Right eye	✓	
Left eye	✓	

Colour Vision *(please tick)*

☐ Not tested ☑ Normal ☐ Doubtful ☐ Defective

Hearing

Pure tone and audiometry (threshold values in dB)				
	500 Hz	1,000 Hz	2,000 Hz	3,000 Hz
Right ear	20	20	20	
Left ear	20	20	20	

Speech and whisper test (metres)

	Normal	Whisper
Right ear	✓	
Left ear	✓	

Clinical Findings

Height	164 (cm)		Weight	70 (kg)	
Pulse rate	(per minute)	78	Rhythm	Regular	
Blood Pressure Systolic (mm Hg)		120	Diastolic (mm Hg)	80	
Urinalysis:	Glucose: Nil		Protein: Nil		Blood: Nil

	Normal	Abnormal
Head	✓	
Sinus, nose, throat	✓	
Mouth/teeth	✓	

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Ears (general)	✓	
Tympanic membrane	✓	
Eyes	✓	
Ophthalmoscopy	✓	
Pupils	✓	
Eye movement	✓	
Lungs and chest	✓	
Breast examination	N/A	
Heart	✓	
Skin	✓	
Varicose Vein	✓	
Vascular (inc. pedal pulse)	✓	
Abdomen and viscera	✓	
Hernia	✓	
Anus (not rectal exam)	✓	
G-U system	✓	
Upper and lower extremities	✓	
Spine (C/s, T/S, L/S)	✓	
Neurologic (full/brief)	✓	
Psychiatric	✓	
General appearance	✓	

Chest X-ray

☐ Not performed ☑ Performed on (day/month/year): 09 JUL 2024

Results: Normal

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

Test ... Blood urine Results: Normal

Medical practitioner's comments and assessment of fitness, with reasons for any limitations.

FIT FOR DUTY ON BOARD SHIP

Assessment of fitness for service at sea *(please tick)*

On the basis of the seafarer's personal declaration, my clinical examination and diagnostic test results recorded above, I declare the seafarer medically:

☑ Fit for look out duty ☐ Unfit for lookout duty

☑ Visual aid required ☐ Visual aid not required

	Deck Service	Engine Service	Catering Service	Other Service
Fit				
Unfit				

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☒ Without restrictions ☐ With restrictions

Description of restrictions (e.g. specific position, type of ship, trading area etc.)

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

09 JUL 2024

Date

Signature of Medical Practitioner

Medical Practitioner's name, licence number, address

****

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

ANNEX C

MARITIME AND PORT AUTHORITY OF SINGAPORE

SEAFARER'S MEDICAL CERTIFICATE

This certificate is issued by the undersigned recognized medical practitioner to the named seafarer on behalf of the **Maritime and Port Authority of Singapore** and meets both the requirements of the International Convention on Standards of Trainings, Certification and Watchkeeping for Seafarers, 1978, as amended (STCW Convention) and the Maritime Labour Convention, 2006.

Seafarer's Name :(*Last, first, middle*)		Gender:
ALI RAZZAB		Male/~~Female~~*
Date of Birth: (*Day/month/year*)	Nationality:	Place of Birth:
10-OCT-1978	BANGLADESHI	DHAKA

Declaration of the recognized medical practitioner:

		Yes	No
1	Identification documents were checked at the point of examination?	✓	
2	Hearing meets the standards in STCW Code Section A-I/9?	✓	
3	Unaided hearing satisfactory?	✓	
4	Visual acuity meets the standards in STCW Code Section A-I/9?	✓	
5	Colour vision meets the standards in STCW Code Section A-I/9?	✓	
	Date of last colour vision test: 09 JUL 2024		
6	Fit for look-out duty?	✓	
7	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 endanger the life of person onboard?	✓	
8	No limitations or restrictions on fitness?	✓	
	If "**no**" specify limitations or restrictions		
9	Date of examination: (*day/month/year*) 09 JUL 2024		
10	Expiry of certificate: (*day/month/year*) 08 JUL 2026 ** *Maximum two years from date of examination unless the seafarer is under the age of 18*		

09 JUL 2024
Date

Signature of Authorised Medical Practitioner

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 Practitioner's Official stamp
(*name, licence number, address etc*)

I have been informed of the content of the certificate and of the right to a review.

Signature of Seafarer

* delete as appropriate

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

Appendix – V

SIGHT TEST CERTIFICATE

New Entry*/Periodic*

Reference No. _____

Form B :

Full Name RAZZAB ALI

Rank CHIEF ENGINEER

PP/CDC/ ID No. A14763760, C/O/4112

Date & Place of Birth 10-OCT-19 & MUNSHIGANJ

Colour of Eyes

Identification Notes _____

		Right Eye	Left Eye	Both Eyes	Result
Distance Vision	Unaided				
	Aided	6/6	6/6		
Near Vision	Unaided				
	Aided	N5	N5		
Field of Vision	Horizontal Plan	normal	normal		
	Vertical Plan	normal	normal		
Colour Vision	Ishihara	normal			
	Lantern / Others	normal			

I, Dr. md. Raihan. hereby certify that the above mentioned candidate has met/not met*, the eye sight standard for his/her designated rank / position as set out in Annex-II* /Annex-III* for seafaring occupation.

Candidate's Signature

Signature of the Medical Examiner

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

Date 09-JUL-2024 at DHAKA

Note:

1) This certificate is valid for two years from the above date. New entry sight test certificates should be retained by the candidate till his active sea career.
2) Seafarer aggrieved by the decision of the Medical Examiner may appeal as per the provision of the M.S. (Medical Examination) Rules, 2000 as amended.

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* Delete if not applicable.

Appendix -IV

Medical Certificate for Service at Sea

RAZZAB ALI

(Seafarer's Last name, First name and Middle name)

A14763760 / e10/4112

(Number of: CDC/ Passport/other valid identification document – with type of document)

has been examined by DR. MIR MD. RAIHAN.

(Name of Medical Examiner)

and has been found fit for service at sea in the job of CH. COOK

(a) The hearing and sight of the seafarer concerned, and the colour vision in the case of a seafarer to be employed in capacities where fitness for the work to be performed is liable to be affected by defective colour vision, are all satisfactory; and

(b) The seafarer concerned is not suffering 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.

(c) The Seafarer complies with the requirements specified in Table A-I/9 of STCW Code (i.e. Minimum in service eyesight standards for seafarers), Table B-I/9 of the STCW Code (i.e. Assessment of minimum entry level and in-service physical abilities for seafarers) and Regulation 1.2, Standard A-1.2 & Guideline B-1.2 of the Maritime Labour Convention 2006.

09 JUL 2024 RADICAL HOSPITAL LIMITED Uttara, Dhaka, Bangladesh

(Date & Place of Medical Examination)

(Signature of the Medical Examiner)

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

04.2024.6963

(Serial number of the Certificate)

(Address with E-mail ID & Contact No. of Medical Examiner)

Official Stamp of the Medical Examiner

This Certificate expires on* 08 JUL 2026

(Day, Month, Year)*

(* Not more than 2 years from the date of issue, unless the seafarers is under the age of 18, in which case the maximum period of validity of the Medical Certificate shall be 1 year).

If the period of validity of the medical certificate expires in the course of voyage, the medical certificate shall continue in force until the next port of call where an approved Medical Examiner is available and the seafarer can obtain a medical certificate, provided that period of such extension shall not exceed 3 months.

V.SHIPS V. SHIPS INDIA Pvt. Ltd.

Certificate No: 04.2024.6963

MEDICAL CERTIFICATE FOR SERVICE AT SEA

Merchant Shipping (Medical Examination) Rules 2000;
STCW code I/9 MLC 2006 – Reg 1.2 And
ILO/ IMO Guidelines on the medical examinations of seafarers **ILO/IMO/JMS/2011/12**

DR. MIR. MD. RAIHAN * RADICAL HOSPITALS LTD * REG. NO. A-55144

Family Name	ALI	
Given Names	RAZZAB	
Date of birth (day/month/year)	10-OCT-1978	Sex: ☑ Male ☐ Female
Nationality	BANGLADESHI	

	Yes	No	NA
Confirmation that identification documents were checked at the point of examination	✓		
Hearing satisfactory and meets the standards in STCW Code, section A-I/9 and MLC 2006 1.2- 6 (a):	✓		
Unaided hearing satisfactory?	✓		
Visual acuity satisfactory and meets standards in STCW Code, section A-I/9 and MLC 2006 1.2- 6 (a)?	✓		
Colour vision satisfactory and meets standards in STCW Code, section A-I/9 and MLC 2006 1.2- 6 (a)?	✓		

I have evaluated the above named examinee according to _____
(National law, regulation or other requirement)

On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I certify that the seafarer concerned is not suffering 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 and hence declare the examinee medically:

☑ Fit for look-out duty ☐ Not fit for look-out duty

	Deck service	Engine service	Catering service	Other services
Fit	☐	☑	☐	☐
Unfit	☐	☐	☐	☐

☑ Without restrictions ☐ With restrictions

Visual aid required ☑ Yes ☐ No

Chest X-ray	☑ normal	☐ not performed
Bacteriological stool test	☑ negative	☐ not performed
Parasitical stool test	☑ negative	☐ not performed
Vaccination records	☑ satisfactory	☐ to be renewed

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

Place of examination: RADICAL HOSPITAL LIMITED Uttara, Dhaka, Bangladesh Date (day/month/year) 09 JUL 2024

Medical certificate's date of expiration (day/month/year) 08 JUL 2026

Official stamp (also print name of medical examiner if not legible):

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

Signature of medical examiner: _____

Authorised by: _____ (competent authority)

I acknowledge and confirm that I have been informed of the content of the certificate and of the right to a review in accordance with paragraph 6 of section A-I/9 of the STCW Code.

Examinee's signature: Razzab
(To be signed in the presence of the medical examiner)

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

V.SHIPS V. SHIPS INDIA Pvt. Ltd

Certificate No: 04.2024.6963

GUIDELINES AND MINIMUM REQUIREMENTS FOR:

PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS OF SEAFARERS

Merchant Shipping (Medical Examination) Rules 2000;
STCW code I/9 and MLC 2006 – Reg 1.2 And
ILO/ IMO Guidelines on the medical examinations of seafarers **ILO/IMO/JMS/2011/12**

DR. MIR MD. RAIHAN ★ RADICAL HOSPITALS LTD ★ REG. NO. A-551

Family Name	ALI	
Given Names	RAZZAB	
Rank and department	CHIEF ENGINEER, ENGINE	
Date of birth (day/month/year)	10-OCT-1978	Sex: ☑ Male ☐ Female
Nationality	BANGLADESHI	
Home address	MORDERN HOUSING, ROAD NO.1, PLOT NO-01, LALPUR ROAD, FATULLAH, NARAYANGANJ SADAR-1400, NARAYANGANJ, BANGLADESH	
Residence & Mobile No:	'0088 01911293551	
Passport No./Discharge Book No.	A14763760, C/O/4112	
Type of ship (container, tanker, passenger, fishing)	OIL/CHEM TANKER	
Trade area (e.g., coastal, tropical, worldwide)	WORLDWIDE	

A. EXAMINEE'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 problems	☐	☑
2.	High blood pressure	☐	☑	19.	Do you smoke; use alcohol or drugs?	☐	☑
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 or joint problems	☐	☑
16.	Genital disorders	☐	☑	33.	Amputation	☐	☑
17.	Pregnancy	☐	☑	34.	Fractures/dislocations	☐	☑

If any of the above questions were answered "yes", please give details.

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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 RAZZAB ALI holding Passport/Seaman Book No A14763760, C/O/4112 hereby declare that I have made full disclosure of all of my medical history to the doctors and staff of this clinic. I am aware that the information supplied by me forms the basis upon which I will be offered employment as a seafarer. I understand that in the event of any misrepresentation either by statement or omission I may lose the right to benefit from sick pay and / or compensation which would otherwise be due to me under the Contract of Employment or under any Collective Bargaining Agreement. I also hereby consent to my medical records being made available upon demand to my employers and / or the owners and / or Insurers of the vessel or their authorized representatives.

I hereby certify that the personal declaration above is a true statement to the best of my knowledge.

Signature of examinee: Razzab Date (day/month/year) 09 JUL 2024

Witnessed by: (Signature) _____ Name: (typed or printed) 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

I hereby authorise the release of all my previous medical records from any health professionals, health institutions and public authorities to Dr. MIR MD RAIHAN (the approved medical examiner).

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

B. MEDICAL EXAMINATION

Sight:

Use of glasses or contact lenses: Yes ☐ / No ☐. (if yes, specify which type and for what purpose)

	Visual acuity						Visual fields	
	Unaided			Aided				
	Right eye	Left eye	Bino-cular	Right eye	Left eye	Bino-cular	Normal	Defective
Distant				6/6	6/6			
Near				N5	N5			

	Normal	Defective
Right eye	✓	
Left eye	✓	

Method of Testing Colour vision: ☑ Ishirara Plates ☑ Lantern Test ☐ Others

Colour vision: ☐ Not tested ☑ Normal ☐ Doubtful ☐ Defective

Hearing:

Pure tone and audiometry (threshold values in dB)

	500 Hz	1000 Hz	2000 Hz	3000 Hz
Right ear	20	20	20	
Left ear	20	20	20	

Speech and whisper test (metres)

	Normal	Whisper
Right ear	✓	
Left ear	✓	

Clinical Findings:

Height in cm	164	Weight in kg	70
Pulse rate	78 (/ minute)	Rhythm	Regular
Blood pressure Systolic	120 mm Hg	Diastolic	80 mm Hg

Urinalysis

Glucose:	Nil	Protein:	Nil	Blood:	Nil

	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	✓	☐	Piles	✓	☐
Heart	✓	☐	Skin	✓	☐
Hydrocele	✓	☐	General appearance	✓	☐

Chest X-ray	☐ Not performed	Normal · 09 JUL 2024
	Performed on (day/month/year): ___/___/___	
Results:		

Radical Hospital Ltd. As Per-MLC-2008 DG Shipping Bangladesh Approved

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

Test	Result		
Blood Tests – tick in box if done- readings seperately issued*1	CBC ☑, Blood VDRL test ☑, Blood ESR ☑, Blood Sugar – Random ☑		
Haemoglobin "Hb" *1			g/dl
Hepatitis B *3	HB (ab) ☐ +ve ☑ -ve	HB (ag) ☐ +ve ☑ -ve	
Bacteriological stool test*4	☑ not performed	☐ negative	☐ positive
Parasitical stool test*5	☑ not performed	☐ negative	☐ positive
ECG (only for crew above 40 years)	normal		
HIV *2 (+ve or -ve)	negative		
Medical examiner's comments:	FIT FOR DUTY ON BOARD SHIP		

*1 compulsory
*2 not compulsory
*3 required by the Company for all crew from endemic areas
*4 required by the Company for all food handlers
*5 required by the Company for all food handlers from tropical climates

Assessment of fitness for service at sea including physical capabilities:

On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I certify that the seafarer concerned is not suffering 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 and hence declare the examinee medically:

☑ Fit for look-out duty ☐ Not fit for look-out duty

	Deck service	Engine service	Catering service	Other services
Fit	☐	☑	☐	☐
Unfit	☐	☐	☐	☐

☑ Without restrictions ☐ With restrictions

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

Place of examination: REDICAL HOSPITALS LIMITED
Date (day/month/year) 09 JUL 2024
Medical certificate's date of expiration (day/month/year) 08 JUL 2026
Date medical certificate issued (day/month/year): 09 JUL 2024
Official stamp (also print name of medical examiner if not legible):
Signature of medical examiner: _____

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 practitioner information (name, license number, address):

NAME: 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

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

CRW15 – CHEMICAL BLOOD TEST REPORT

LAST NAME	FIRST NAME		POSITION ON BOARD
ALI	RAZZAB		CHIEF ENGINEER
DATE OF BIRTH	PLACE OF BIRTH	SEX	ID DOCUMENT NO
10-OCT-1978	MUNSHIGANJ	MALE	C/O/4112

(PLEASE INDICATE BELOW IF THE LISTED TESTS ARE WITHIN THE REFERENCE LEVEL)

TEST	YES	NO	TEST	YES	NO
WHITE BLOOD CELL COUNT (WBC)	☑	☐	LYMPHOCYTE COUNT	☑	☐
RED BLOOD CELL COUNT (RBC)	☑	☐	MONOCYTE COUNT	☑	☐
PLATELET COUNT (PLT)	☑	☐	EOSINOPHIL COUNT	☑	☐
HAEMOGLOBIN (HGB)	☑	☐	BASOPHIL COUNT	☑	☐
HAEMOTOCRIT (HCT)	☑	☐	GRANULOCIYTE COUNT	☑	☐
MEAN CORPUSCULAR VOLUME (MCV)	☑	☐	THROMBOCYTE COUNT	☑	☐
MEAN CORPUSCULAR HAEMOGLOBIN (MCH)	☑	☐	**BIOCHEMISTRY**	**YES**	**NO**
MEAN CORPULSCULAR HB. CONC (MCHC)	☑	☐	ASPARTATE AMINOTRANSFERASE (AST, SGOT)	☑	☐
MEAN PLATELET VOLUME (MPV)	☑	☐	ALANINE AMINOTRANSFERASE (ALT, SGPT)	☑	☐
RED BLOOD CELL DISTRIBTION WIDTH (RDW)	☑	☐	TOTAL BILIRUBIN	☑	☐
NEUTORPHIL COUNT	☑	☐		☐	☐

IF ANY OF THE ABOVE CHECMICAL-SPECIFIC BLOOD TEST INDICATES NEGATIVE RESPONSE TO CLINICAL TEST PARAMETERS, PLEASE GIVE DETAILS BELOW.
COMMENTS (for abnormal result):

Doctors Comments:

No Abnormality Found.

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

09 JUL 2024

MEDICAL EXAMINER
(SIGNATURE & PRINTED NAME)

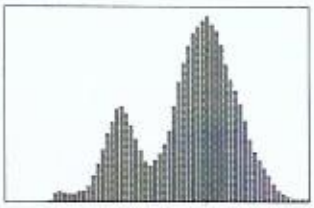
DATE OF EXAMINATION

ID NO	**: 24070218**	**Date**	**: 09/07/2024**
Patient's Name	**: RAZZAB ALI**	**Age**	**: 45Y8M29D**
Ref. By	**: DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/4112**	**Sex**	**: Male**
Specimen	**: Blood**		

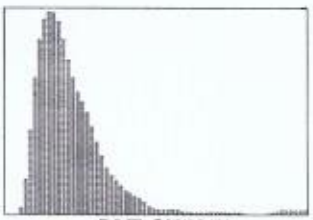
(Relevent estimations were carried out by KT -44 Haematology Analyzer with checked manually)

HAEMATOLOGY REPORT

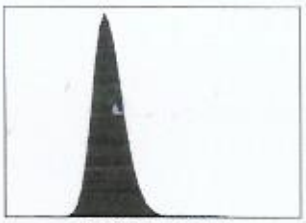
Parameter	Results		Reference Values
Haemoglobin(Hb)	**14.5**	**g/dl**	M:12-16, F:10-14.0 g/dl
ESR(Westergren)	**08**	**mm/1st hr**	M:0-10, F:0-20 mm/1st hr
TOTAL WBC COUNT	**7,000**	**/cumm**	4,000 - 11,000 /cumm
DIFFERENTIAL COUNT			
Neutrophils	62	%	(40 - 75)%
Lymphocytes	31	%	(20-45)%
Monocytes	04	%	(2-10)%
Eosinophils	03	%	(1-6)%
Basophil	00	%	0-1 %
TOTAL CIR. EOSIONOPHIL COUNT	**210**	**/cumm**	40 - 450 /cumm
TOTAL PLATELET COUNT(PC)	**203,000**	**/cumm**	1,50,000-4,50,000 /cumm
MPV	12	fL	7.0 -11.0 fL
PDW-CV	17.3	%	10 - 18 %
PCT	0.24	%	0.10 - 0.28
P-LCR	39.4	%	9.00 - 45.00%
P-LCC	80	x10^3/uL	13 - 129 x10^3/uL
RBC COUNT	**5.03**	**m/ul**	M: 4.5-6.5, F: 3.8-5.8 m/ul
HCT/PCV	45.4	%	M: 40-54%, F: 37-47%
MCV	90.3	fL	76-94 fL
MCH	28.8	pg	27-32 pg
MCHC	31.9	g/dL	29-34 g/dL
RDW SD	46	fL	30.0-57.0 fL
RDW CV	15.6	%	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	DIA24070218	Received Date	09/07/2024
Patient's Name	RAZZAB ALI		
Patient's Age	45Y 8M 29D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/4112
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Serum Creatinine	0.95 mg/dl	0.3 - 1.3 mg/dl
Uric Acid	4.0 mg/dl	3.8 - 8.0 mg/dl
Serum AST (SGOT)	23.0U/L	Up to 37 U/L
Serum ALT (SGPT)	26.0 U/L	Up to 40 U/L
HbA1C	5.0 %	4.2 - 6.7 %
Lipid profile		
Serum Cholesterol	155 mg/dl	up to 200 mg/dl
Serum HDL- Cholesterol	38 mg/dl	>35 mg/dl
Serum Triglyceride	130 mg/dl	upto 220 mg/dl
Serum LDL- Cholesterol	91 mg/dl	<130 mg/dl

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

RADICAL HOSPITAL LIMITED

Bill No	DIA24070218	Received Date	09/07/2024
Patient's Name	RAZZAB ALI		
Patient's Age	45Y 8M 29D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/4112
Sample	BLOOD		

SEROLOGICAL REPORT

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

BLOOD GROUPING RESULT	
ABO Blood Group	"B" (+ve)
Rh(D)Factor	Positive

Checked By

Medical Technologist.
Radical Hospital Ltd.

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Associate Professor
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East West Medical College and Hospital.

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RADICAL HOSPITAL LIMITED

Bill No	DIA24070218	Received Date	09/07/2024
Patient's Name	RAZZAB ALI		
Patient's Age	45Y 8M 29D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/4112
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	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.

Bill No	DIA24070218	Received Date	09/07/2024
Patient's Name	RAZZAB ALI		
Patient's Age	45Y 8M 29D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/4112
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.

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Bill No	DIA24070218	Received Date	09/07/2024
Patient's Name	RAZZAB ALI		
Patient's Age	45Y 8M 29D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/4112
Sample	STOOL		

STOOL ANALYSIS

Physical Examination:

Color	: Brown
Consistency	: Soft
Worm	: Nil
Mucus	: Nil
Blood	: Nil

Chemical Examination:

Reaction	: Acid
Occult Blood Test (OBT)	: Not done
Reducing Substance (RS)	: Not done

Microscopic Examination:

Ova	: Not found	Mucus flakes	: Nil
Cyst	: Not found	Cyst of Giardia	: Not found
Protozoa (Trophozoite)	: Not found	Macrophage	: Not found
Larva	: Not found	Fat Globules	: (+)
Epithelial Cell	: Nil	Vegetable Cell	:Nil
Pus Cell	: Nil	Starch	: Nil
RBC	: Nil	Muscle fibre	: 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

REF:	MV. SIROCCO	DATE: 09/07/2024

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

EYE EXAMINATION REPORT

NAME:	RAZZAB ALI	RANK: CH.ENG	CDC NO: C/O/4112

VISUAL ACUITY: RIGHT LEFT

UNAIDED

AIDED 6/6 6/6

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

Patient's Name	:	RAZZAB ALI	ID NO	:	**24070218**
Age	:	**45 Yrs**	Date	:	**09/07/2024**
Sex	:	**Male**			
Referred by	:	**Dr. Mir Md. Raihan MBBS,(DU),CCD (BIRDEM),PGT(Eye),DFM**			

Dental Examination Reports

On Examination

1. Dental Caries : Absent
2. Calculus : Absent
3. Missing : Absent
4. Gum Condition : Normal
5. Filling : No
6. Root Canal Treatment : No
7. Any Bridge/Denture/Crown : No
8. Oral Hygine : Normal

Comments : Normal

Dr. Mir Md. Raihan
MBBS (DU), DFM, CCD (Birdem), PGT(opth)
Reg- A55144 BGD-016(MMC)
DG Shipping Bangladesh Approved
Malaysian Medical Council Approved
General Physician
Radical Hospitals Limited

radical_hospitals@yahoo.com, www.radicalhospital.com

RADICAL HOSPITAL LIMITED

Patient's Name	:	RAZZAB ALI	ID NO	:	24070518
Age	:	**45 Yrs**	Date	:	09/07/2024
Sex	:	Male			
Referred by	:	**Dr. Mir Md. Raihan MBBS,(DU), DFM**			
Nature of Specimen	:				

PULMONARY FUNCTION TEST (SPIROMETRY)

FVC	= 6
FEV	= 5
FEV/FVC	= 80%

Comments: Normal Lung Function

Dr. Mir Md. Raihan
MBBS (DU) CCD(Birdem),PGT (opth)
Reg- A55144 BGD-016(MMC)
DG Shipping Bangladesh Approved
Malaysian Medical Council Approved
General Physician
Radical Hospitals Limited

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

AUDIOLOGICAL REPORT

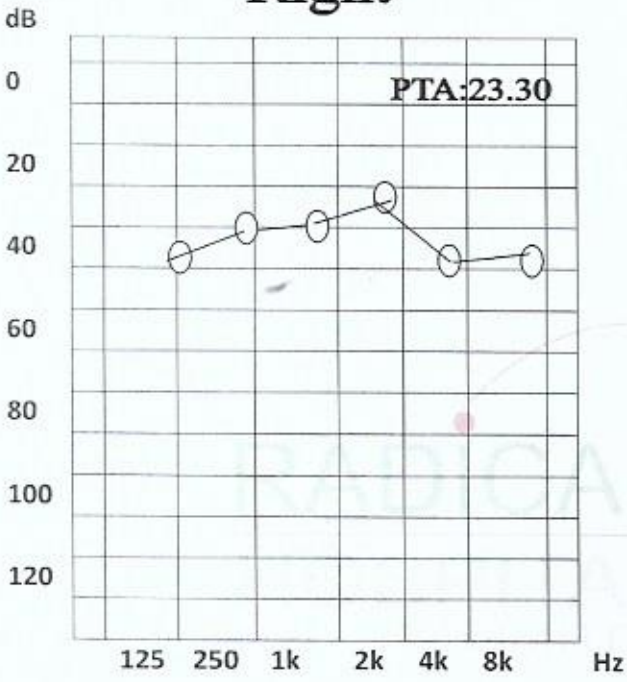
Patient Name : RAZZAB ALI 09/07/2024

Age : 45 Yrs

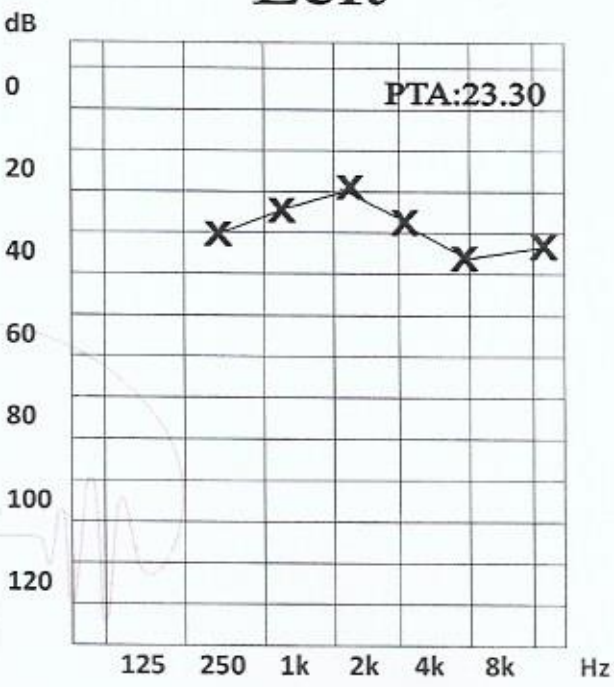
Address : RHL, UTTARA

Referred By : Dr. Mir Md. Raihan , MBBS,(DU), DFM

Right



Left



0-25= Normal Hearing.
26-40= Mild Hearing Loss.
41-55= Moderate Hearing Loss.
56-70= Moderately Severe Hearing Loss.
71-90= Severe Hearing Loss.
91-120= Profound Hearing Loss.

	Right Ear	Left Ear
Air Unmasking OX		
Bone Unmasking		
	Right Ear	**Left Ear**
Air MaskingOX		
Bone Masking ΔΔ		

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.

ID: Rizwan AC.

Male 45 Years

mmHg

09-07-2024 16:05:35

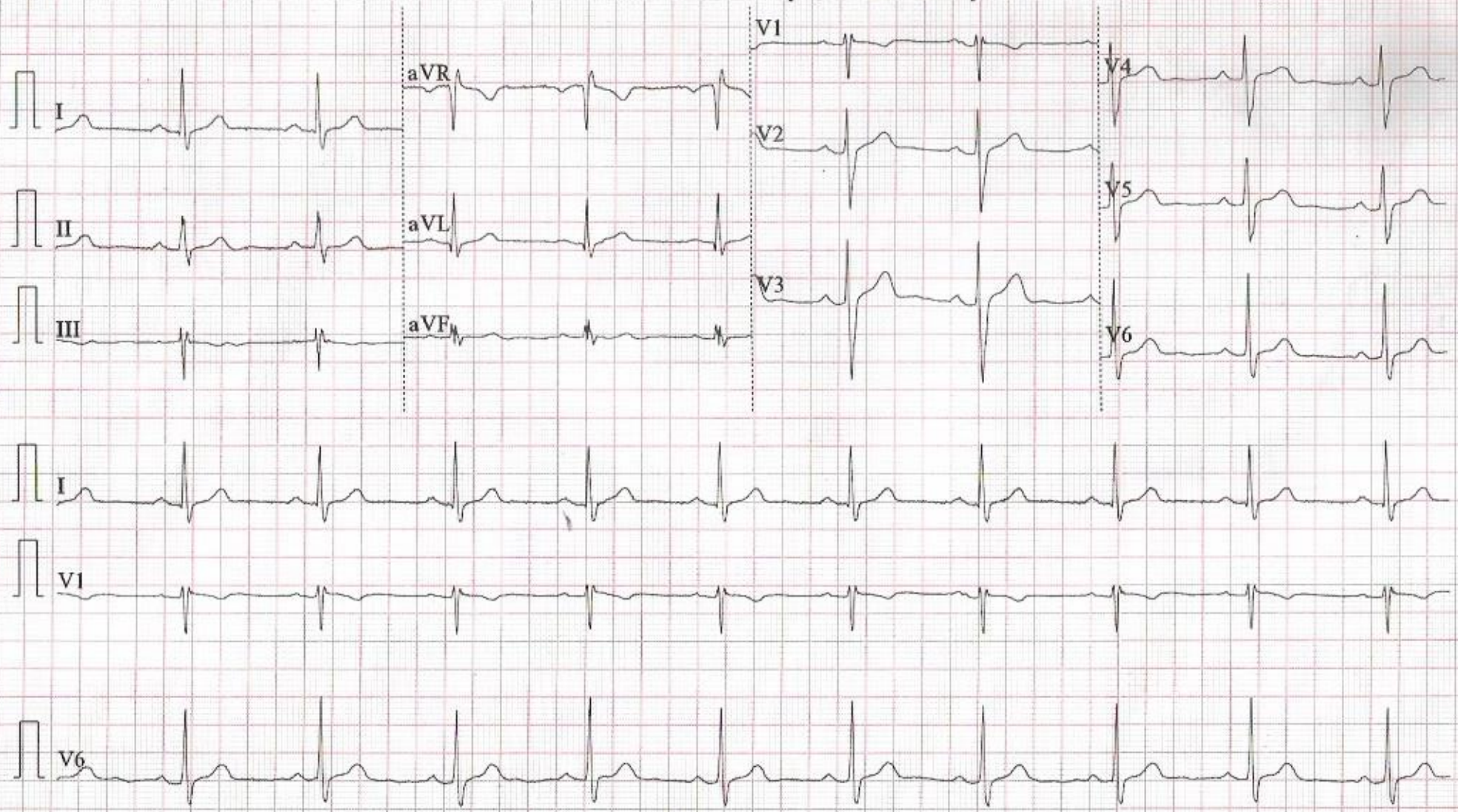
HR	: 62	bpm	
P	: 118	ms	
PR	: 186	ms	
QRS	: 102	ms	
QT/QTc	: 402/409	ms	
P/QRS/T	: 18/8/17	°	
RV5/SV1	: 0.803/0.616	mV	

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 4*2.5s+3r ♥62 SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

10mmX30m

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

Patient ID	24070218	**Voucher No**	
Test Name	USG OF WHOLE ABDOMEN	**Delivery Date**	09/07/2024
Patient Name	**RAZZAB ALI**		
Age	45 YRS	**Sex**	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		

THANK YOU FOR THE COURTESY OF THIS REFERRAL

LIVER :- **Is enlarged in size 15.1 , regular in shape and normal position. The echogenicity of the parenchyma is increased** . Intrahepatic biliary channel are not dilated. No focal lesion is seen.

GALL BLADDER : Absent (H/O operation). CBD is not dilated 5.5mm.

PANCREASE :- Normal size regular in shape. Echogenecity is homogenous. PD not dilated.

SPLEEN :- Is normal in size (10 x 4.5)cm and uniform in echo-texture.

BOTH KIDNEYS :-Are normal in size RK-9.5cm, LK-10.8 cm regular in shape. 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 normal. No intravesicle lesion is seen

PROSTATE: Normal in size and volume is 13.1 cc , regular in shape. Echogenicity is homogenous. No area of calcification is seen.

IMPRESSION: Fatty change in liver. Grade-1.

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

9.7.24

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	:	24070218	Receive:09/07/2024	Print: 09/07/2024
Patient's Name	:	RAZZAB ALI		
Age	:	45 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.

HOUSE # 52, GARIB-E-NEWAZ AVENUE, SECTOR-13, UTTARA, DHAKA-1230
Hotline: 09610009612
E-mail: istuttara@gmail.com, Web: www.ibnsinatrust.com

IBN SINA
Pioneer in Health Care

IBN SINA DIAGNOSTIC & CONSULTATION CENTER, UTTARA

ISO 9001:2015 Certified

ECHO-CARDIOGRAPHY REPORT

2-D & M-MODE, DOPPLER & COLOUR FLOW IMAGING

241911203023

I.D. No	: U258188	Received date : 9 Jul 2024	Printed date: 9 Jul 2024 07:03PM	
Name of Pt.	: RAZZAB ALI		Age : 45 y(s)	Sex: Male
Exam	: ECHO 2D			
Ref. By	: RADICAL HOSPITAL LTD			

PROCEDURES: 2D & M-MODE STUDY

Measurement:

AOD	: 30	mm	20-37 mm	**LVIDd**	: 45	mm	37-56 mm
LAD	: 35	mm	19-40 mm	**LVIDs**	: 29	mm	22-40 mm
ACS	: 20	mm	15-26 mm	**FS**	: 37	%	
RVIDd	:	mm	<30	**LVEF**	: 67	%	
IVSd	: 09	mm	06-11mm	**MPA**	:		
LVPWd	: 09	mm	06-11mm	**MV area**	:		>3 cm^2
TAPSE	: 23	mm		**MV annulus**	:	mm	

LA : Normal. **Ao** : Normal.
LV : Cavity is normal. Wall thickness normal. Wall motion normal.
RA : Normal.
RV : Normal.
PA : Normal.
IVS : Intact.
IAS : Intact.

Valves

MV : Both the AML & PML are normal.
AV : Normal systolic excursion & diastolic coaptation.
TV : Normal
PV : Normal

No vegetation or thrombus seen.
Pericardium : No pericardial effusion seen.

Comments:

- **No regional wall motion abnormality.**
- **Good LV systolic function (EF – 67%).**
- **Normal cavity dimension.**
- **Normal valve morphology.**

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Prepared by: Jannat

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TREADMILL STRESS TEST

I.D. No	: U258148	Received date : 9 Jul 2024	Printed date: 9 Jul 2024 08:46PM	
Name of Pt.	: RAZZAB ALI		Age : 45 y(s)	Sex: Male
Exam	: ETT			
Ref. By	: RADICAL HOSPITAL LTD			

Total Exercise Time	: 10.04 Min		**Max.HR attained**	: 150	Bpm.
% of max. pred. HR	: 85 %		**Max. Pred HR**	: 175	Bpm.
Maximum BP	: 160/80 mmhg.		**Max. work load attained**	: 13.40	METS
Indication	: Screening for IHD.				
Risk Factors	: Nil.				
Reason for Termina.	: Attainment of THR.				
Test Profile	: BRUCE				
Symptoms	: Nil.				

Summary Result ⇒ **NEGATIVE**

Comments:

- **RAZZAB ALI** performed stress test in Bruce protocol for the evaluation of IHD (angina pectoris).
- Exercise capacity was good.
- Inotropic and chronotropic responses were normal.
- Stress test was terminated because of attainment of THR.
- ECG at rest shows no abnormality.
- ECG during exercise & recovery shows no significant ST depression.

Conclusion : Stress test is **NEGATIVE** for ECG evidence of provocable myocardial ischaemia.

9/7/2024

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Medical college for women & Hospital, Uttara.
Consultant, IBN SINA D-Lab, Uttara, Dhaka.

Prepared By: Tahmina

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that whose signature follows } Date of birth 10-OCT-1978 Sex MALE

RAZZAB ALI (C/01/9112)

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
09 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	
2			
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

This is to certify that whose signature follows } Date of birth 10.10.1978 Sex M

Fasaal ALI RAZZAB

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 06 MAR 2017	DR. MIR MD. RAIHAN MBBS (DU), Reg. No. A-55144 (BMDC) Reg. No. BGD-016 (MMC) DG Shipping Approved (BD) General Physician Radical Hospitals Ltd.	YELLOW FEVER VACCINE L. NO DAKAR	1 2 CENTER FOR VACCINATION 35, Sirajul Mokaddum Avenue Uttara, Dhaka BANGLADESH
2			
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.