



INTERNATIONAL LABOUR ORGANIZATION
Sectoral Activities Programme

See text links
below.

ILO/WHO/D.2/1997

Guidelines for Conducting Pre-sea and Periodic Medical
Fitness Examinations for Seafarers

Part 6

Annex D

Minimum requirements for the medical examination of seafarers

Name (last, first, middle): MAMUN MD HARUN AL

Date of birth (day/month/year): 11 /12/1975 Sex: ☒ male • ☐ female

Home address: HOSSAIN AHMED PARA, RAHAM ALI SOWDAGOR GOLI,
PATENGA, CHATTOGRAM

Passport No./Discharge Book No.: EH0553007 / T134030

Type of ship (container, tanker, passenger, fishing):

Trade area (e.g., coastal, tropical, worldwide):

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?	☐	☒
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	☐	☒

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- | | | | | | |
|------------------------------------|-------------------------------------|-------------------------------------|------------------------------|--------------------------|-------------------------------------|
| 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 hospitalized? | ☐ | ☒ |
| 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 certify that the personal declaration above is a true statement to the best of my knowledge.

Signature of examinee: [Signature] Date (day/month/year): 14 JUL 2024

Witnessed by: (Signature) [Signature] Name: (Typed or printed) DR. MIR. MD. RAIHAN
MBBS (DU), DPM, CCD (Bierem), 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 from any health professionals, health institutions and public authorities to Dr. MIR. MD. RAIHAN (the approved medical examiner).

Signature of examinee: [Signature] Date (day/month/year): 14 JUL 2024

Witnessed by: (Signature) [Signature] Name: (Typed or printed) DR. MIR. MD. RAIHAN
MBBS (DU), DPM, CCD (Bierem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited

Medical examination

☐ Pre-sea ☒ Periodic ☐ Other

Sight

	Visual acuity						Visual fields	
	Unaided			Aided			Normal	Defective
	Right eye	Left eye	Binocular	Right eye	Left eye	Binocular		
Distant	6/6	6/6	✓				✓	
Near	15	15	✓				✓	

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

Hearing

	Pure tone and audio metry (threshold values in dB)						Speech and whisper test (metres)	
	500 Hz	4,000 Hz	2,000 Hz	3,000 Hz	4,000 Hz	6,000 Hz	Normal	Whisper
Right ear	20	20	20				4	4
Left ear	20	20	20				4	4



Height: 161 (cm)Weight: 65 (kg)Pulse rate: 78 (/minute)Rhythm: RegularBlood pressure: Systolic: 130 (mm Hg) Diastolic: 80 (mm Hg)Urinalysis: Glucose: Nil Protein: 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	☒	☐
Ophthalmoscopy	☒	☐	Upper and lower extremities	☒	☐
Pupils	☒	☐	Spine (C/S, T/S and L/S)	☒	☐
Eye movement	☒	☐	Neurologic (full brief)	☒	☐
Lungs and chest	☒	☐	Psychiatric	☒	☐
Breast examination	☒	☐	General appearance	☒	☐
Heart	☒	☐			
Skin	☒	☐			

Chest X-ray: ☐ Not performed ☒ Performed on (day/month/year): 14 JUL 2024Results: Normal chest xray

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

Test Blood test Result Normal

Medical examiner's comments:

FIT FOR DUTY ON BOARD SHIP

Vaccination status recorded:

☒ Yes☐ No

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 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)

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

Place of examination: **RADICAL HOSPITAL LIMITED**
Dhaka, Dhaka, Bangladesh

Date of examination (day/month/year):

14 JUL 2024

Medical certificate's date of expiration (day/month/year):

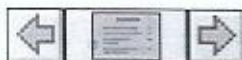
13 JUL 2026

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

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

Signature of medical examiner:

Authorized by: **DG SHIPPING BANGLADOSH** (competent authority)



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For further information, please contact the Sectoral Activities Department (SECTOR)
at Tel: Fax: or email: sector@ilo.org

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MEDICAL EXAMINATION REPORT/CERTIFICATE

MARITIME ADMINISTRATOR

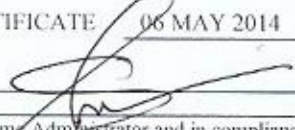
CONFIDENTIAL DOCUMENT

REPUBLIC OF THE MARSHALL ISLANDS

SURNAME MAMUN	GIVEN NAME(S) MD HARUN AL	
DATE OF BIRTH 11 MONTH 12 DAY 1975 YEAR	PLACE OF BIRTH CITY CHATTOTGRAB COUNTRY BANGLADESH	SEX ☒ MALE ☐ FEMALE
EXAMINATION FOR DUTY AS: MASTER ☐ DECK OFFICER ☐ ENGINEERING OFFICER ☐ RADIO OFFICER ☐ RATING ☒	MAILING ADDRESS OF APPLICANT: HOSSAIN AHMED PARA, AM RAHAM ALI SOWDAGOR GOLI, PATENGA, CHATTOTGRAM	

MEDICAL EXAMINATION (SEE REVERSE SIDE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE

HEIGHT 162 cm	WEIGHT 65 kg	BLOOD PRESSURE 130/80 mm	PULSE 78 /min	RESPIRATION 19 /min	GENERAL APPEARANCE Good
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6 LEFT EYE 6/6		HEARING: RT. EAR Normal LEFT EAR Normal	
COLOR TEST TYPE: BOOK ☒ LANTERN ☐ IS COLOR TEST NORMAL? ☒ YES ☐ NO (If "No" EXPLAIN ON PAGE 2)					
ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARD? YES ☐ NO ☒					
HEAD AND NECK Normal			HEART (CARDIOVASCULAR) Normal		
LUNGS Normal			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? Yes		
EXTREMITIES: UPPER Normal LOWER Normal					
IS APPLICANT VACCINATED IN ACCORDANCE WITH WHO RECOMMENDATIONS? YES ☒ NO ☐					
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY WORKING ABOARD A VESSEL, OR TO RENDER HIM/HER UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? YES ☐ NO ☒					
IF YES, PLEASE ENTER EXPLANATION IN THE SECTION AT THE BOTTOM OF ON PAGE 2					
IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICATIONS? YES ☐ NO ☒					

SIGNATURE OF APPLICANT 	DATE OF EXAMINATION 14 JUL 2024	EXPIRY DATE 13 JUL 2026
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN.		
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: MAMUN MD HARUN AL		
NAME OF APPLICANT (SURNAME, GIVEN NAME(S))		
THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE DISEASE (OR VIRUSES FOR COOKS): YES ☐ NO ☒		
SEAFARER IS FOUND TO BE ☒ FIT / ☐ NOT FIT FOR DUTY AS A ☐ MASTER / ☐ DECK OFFICER / ☐ ENGINEERING OFFICER / ☐ RADIO OFFICER / ☐ RATING / ☐ CHIEF COOK / ☐ COOK ☒ WITHOUT ANY RESTRICTIONS / ☐ WITH THE FOLLOWING RESTRICTIONS:		
NAME AND DEGREE OF PHYSICIAN DR. MIR MD RAIHAN MBBS, DFM		
ADDRESS RADICAL HOSPITALS LIMITED 35, SHAH MAKHDOM AVENUE SECTOR-12, UTTARA, DHAKA-1230		
NAME OF PHYSICIAN'S CERTIFYING AUTHORITY DG SHIPPING BANGLADESH		
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE 06 MAY 2014		
SIGNATURE OF PHYSICIAN 		DATE 14 JUL 2024

This certificate is issued by authority of the Maritime Administrator and in compliance with the requirements of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers 1978, as amended, and the Maritime Labour Convention, 2006, as amended.

Rev. Mar/2022

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



MI-105M

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifications shall be required to have a medical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer's certificate, application for Seafarer's Identification and Record Book, or application for certification of special qualifications. This medical examination must be carried out within the 24 months immediately preceding application for an officer certificate, certification of special qualifications or a Seafarer's Identification and Record Book. The examination shall be conducted in accordance with RMI MG-7-47-1. 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 seafarer's 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 whispered voice in better ear at 15 feet (4.57 m) and in poorer ear at 5 feet (1.52 m).
- (b) **Eyesight**
 - Deck officer applicants must have (either with or without glasses) at least 20/20 (1.00) vision in one eye and at least 20/40 (0.50) in the other. Applicants for deck officer and deck ratings who will serve on vessels of 500 gross tons or more must have normal color perception that complies with C.I.E. Standard 1; those serving on vessels less than 500 gross tons must comply with C.I.E. Standards 1 or 2.
 - Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 (0.63) vision in one eye and at least 20/50 (0.40) in the other. Applicants for engineering officer or rating and for radio operator must comply with C.I.E. Standards 1, 2, or 3. 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/Navigation officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (f) **Vaccinations**
 - All applicants should be vaccinated according to the recommendations provided in the WHO publication, International Travel and Health, Vaccination Requirements and Health Advice, and should be given advice by the certified physician on immunizations. If new vaccinations are given, these should 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 use of narcotics.
- (h) **Physical Requirements**
 - Applicants for able seafarer, bosun, GP-1, ordinary seafarer and junior ordinary seafarer must meet the physical requirements for a deck/navigation officer's certificate.
 - Applicants for fire/watertender, oiler/motor, pump technician, electrician, wiper, tanker rating and survival craft/rescue boat crewmember must meet the physical requirements for an engineer officer's certificate.

IMPORTANT NOTE:

A copy of the MI-105M must accompany the application. The applicant must retain the original of the MI-105M as evidence of physical qualification while serving on board a vessel.

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 right 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 an equivalent form.
(See RMI MG-7-47-1, §3.3).

14 JUL 2024



DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BSD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited
MI-105M

ID NO : 24070349

Date : 14/07/2024

Patient's Name : MD HARUN AL MAMUN

Age : 48Y 7M 3D

Ref. By : DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-T/34030

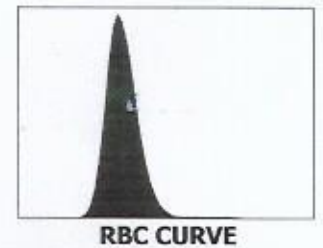
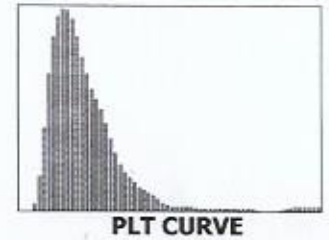
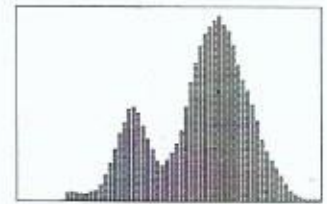
Sex : Male

Specimen : Blood

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

HAEMATOLOGY REPORT

Parameter	Results	Reference Values	Histogram
Haemoglobin(Hb)	16.0	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	11,000	/cumm	4,000 - 11,000 /cumm
DIFFERENTIAL COUNT			
Neutrophils	82	%	(40 - 75)%
Lymphocytes	11	%	(20-45)%
Monocytes	04	%	(2-10)%
Eosinophils	03	%	(1-6)%
Basophil	00	%	0-1 %
TOTAL CIR. EOSIONOPHIL COUNT	336	/cumm	40 - 450 /cumm
TOTAL PLATELET COUNT(PC)	241,000	/cumm	1,50,000-4,50,000 /cumm
MPV	8.9	fL	7.0 -11.0 fL
PDW-CV	16.1	%	10 - 18 %
PCT	0.22	%	0.10 - 0.28
P-LCR	20.5	%	9.00 - 45.00%
P-LCC	50	$\times 10^3/\mu\text{L}$	13 - 129 $\times 10^3/\mu\text{L}$
RBC COUNT	5.64	m/ul	M: 4.5-6.5, F: 3.8-5.8 m/ul
HCT/PCV	50.2	%	M: 40-54%, F: 37-47%
MCV	89.1	fL	76-94 fL
MCH	28.4	pg	27-32 pg
MCHC	31.9	g/dL	29-34 g/dL
RDW SD	50	fL	30.0-57.0 fL
RDW CV	17	%	10-16%



Checked By: [Signature]
 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.

Bill No	DIA24070349	Received Date	14/07/2024
Patient's Name	MD HARUN AL MAMUN		
Patient's Age	48Y 7M 3D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	T/34030
Sample	BLOOD		

BIOCHEMISTRY REPORT

<u>Test Name</u>	<u>Result</u>	<u>Reference Range</u>
Random Blood Sugar (RBS)	5.7 mmol/L	4.2 – 6.4 mmol/L

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	DIA24070349	Received Date	14/07/2024
Patient's Name	MD HARUN AL MAMUN		
Patient's Age	48Y 7M 3D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	T/34030
Sample	BLOOD		

SEROLOGICAL REPORTTest NameResult

HIV 1 & 2 (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	DIA24070349	Received Date	14/07/2024
Patient's Name	MD HARUN AL MAMUN		
Patient's Age	48Y 7M 3D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	T/34030
Sample	URINE		

URINE ROUTINE EXAMINATION**PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION**

Quantity	Sufficient	CELLS / HPF	
Color	Straw	RBC	Nil
Appearance	Clear	Pus Cells	0-2/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

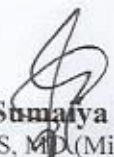
ON REQUESTCRYSTALS & OTHERS

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	DIA24070349	Received Date	14/07/2024
Patient's Name	MD HARUN AL MAMUN		
Patient's Age	48Y 7M 3D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	T/34030
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's Name	:	MD HARUN AL MAMUN	ID NO	:	24070349
Age	:	48 Yrs	Date	:	14/07/2024
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 Hygiene : 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

TREADMILLSTRESS TEST

Patient ID	24070349	Test Date	14-07-2024		
Patient Name	MD HARUN AL MAMUN	Age	48 Yrs	Sex	Male
Attending Dr.	Dr. ROSEYAT PERVEEN				

Total Exercise Time : 08:6 Min

Max.HR attained : 168 bpm.

% of max.pred. hR : 98 %

Max. Pred HR : 169 bpm.

Maximum BP : 150/90 mmHg.

Max. work load attained : 13.00METS.

Indication : Screening for IHD.

Risk Factors :

Reason for Termina : Attainment of THR.

Test Profile : BRUCE

Symptoms :

Summary Result ⇒ **NEGATIVE**

Comments :

- MD HARUN AL MAMUN 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 showed no abnormality.
- ECG during exercise & Recovery showed no significant ST-T changes.

Conclusion : Stress test is **NEGATIVE** for ECG evidence of promotable myocardial ischemia.

Dr. ROSEYAT PERVEEN

MBBS, MD (Cardiology), NICVD, Dhaka
Consultant, IBN SINA D-Lab, Uttara, Dhaka

HR : 82 bpm

mmHg

P : 122 ms

PR : 150 ms

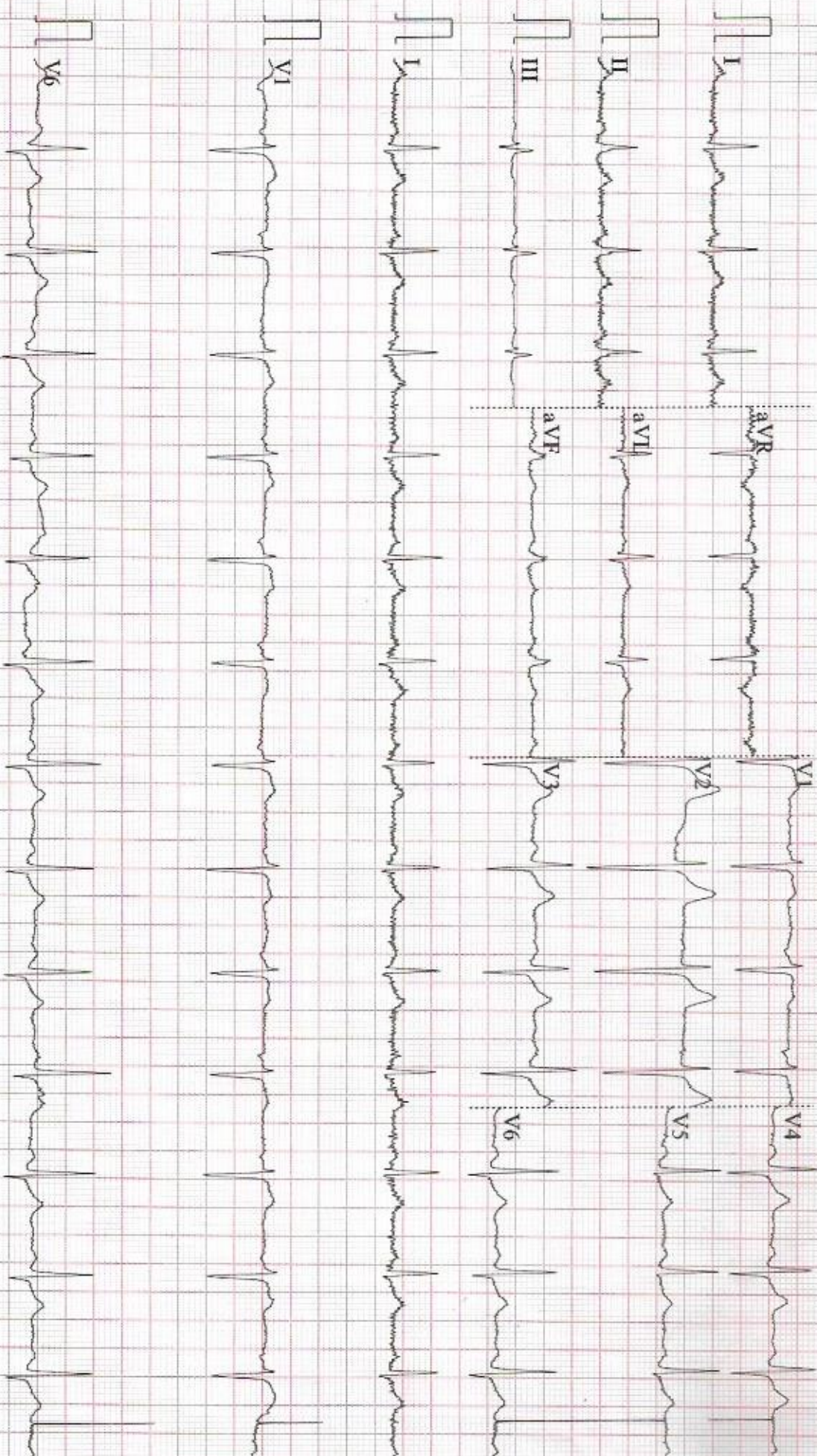
QT/QTc : 336/393

RV5/SV1 : 1.080/0.98

Sinus rhythm

Normal ECG

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/V 4*2.5s+3r ♡82

SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	: 24070349	Receive: Print:14/07/2024
Patient's Name	: MD HARUN AL MAMUN	
Age	: 48 YRS	Sex : M
Refd. by	: Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 82 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

Page 1 of 1

INTERNATIONAL CERTIFICATE OF VACCINATION OR PROPHYLAXIS

This is to certify that (name) MD. HAKUN AL. MAMUN
 date of birth 11-12-1975 Sex MALE
 nationality BANGLADESHI
 national identification documents, if applicable N/A
 whose signature follows [Signature]
 has on the date indicated been vaccinated or received prophylaxis
 against (name of disease or condition) _____

In accordance with the International Health Regulations.

CERTIFICATE INTERNATIONAL DE VACCINATION OU DE PROPHYLAXIE

Nous certifions que (nom) MD. HAKUN AL. MAMUN
 Né(e) le 11-12-1975 de Sexe M
 et de nationalité BANGLADESHI
 document d'identification national, le cas échéant _____
 dont la signature suit [Signature]
 a été vacciné(e) ou a reçu des agents prophylactiques à la date indiquée
 contre: (nom de la maladie ou de l'affection) _____

Conformément au Règlement sanitaire international.

Vaccine or prophylaxis Vaccin ou agent prophylactique	Date	Signature and professional Status of supervising Clinician	Manufacturer and Batch no. of vaccine or prophylaxis	Certificate valid From: Until:	Official stamp of the administering centre
	14 JUL 2024	<u>[Signature]</u> Signature of the clinician responsible	Fabricant du vaccin ou de l'agent prophylactique et numéro du lot	Certificat valable à partir du : jusqu'au :	Cachet officiel du centre habilité
		<u>DR. MIR. MD. RAHIM</u> General Physician Bangladesh Approver Federal Hospitals Limited	<u>22615</u>	<u>14 JUL 2024</u>	<u>YELLOW FEVER VACCINE</u> L. NO DAKAR

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION
AGAINST CHOLERA
CERTIFICAT INTERNATIONUAUX DE VACCINATION OU DE REVACCINATION
CON IRE LE CHOLERA

MD HARUN AL MAMUN

This is to certify that JE Soussigne' (e) certifie que _____ date of birth 11-12-1975 Sex MALE
no' (e) le _____ sexe _____

Whose signature follows
dont la signature suit _____

has on the Date indicated been vaccinated or revaccinated against cholera
a e'te' vaccine (e) ar revaccine' (e) contre le fievre jaune a ia date indiquee.

Date 14 JUL 2024	Signature and professional Status of Vaccinator Signature et qualite profess- sionelle vaccinateur	Approved Stamp Cechet d'authentification
1	DR. MIA MD. RAIHAN MBBS (DIP. DPM, CCD (Siderm), PGD (Orth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited	ORAL CHOLERA "DUKORAL" Valid Upto 2 yrs
2		

Organisation
Mondiale de la Santé



Certificat international de
vaccination ou de prophylaxie
Règlement sanitaire international (2005)

World Health
Organization



International Certificate of
Vaccination or Prophylaxis
International Health Regulations (2005)

Issued to / Délivré à

Passport number or
Travel document number
Numéro du passeport ou
du document de voyage

PHYSICAL EXAMINATION REPORT/CERTIFICATE

DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

THE REPUBLIC OF LIBERIA

LAST NAME OF APPLICANT MAMUN			FIRST NAME MD HARUN AL		MIDDLE INITIAL
DATE OF BIRTH MONTH 12 DAY 11 YEAR 1975			PLACE OF BIRTH BANGLADESH		SEX
			CITY CHATTOTGRAM	COUNTRY	MALE ☒ FEMALE ☐
EXAMINATION FOR DUTY AS: MASTER ☐ RATING ☒ MATE ☐ MOU DECK ☐ ENGINEER ☐ MOU ENGINE ☐ RADIO OFF ☐ SUPERNUMERARY ☐			MAILING ADDRESS OF APPLICANT: HOSSAIN AHMED PARA, RAHAM ALI SOWDAGOR GOLI, PATENGA, CHATTOTGRAM		

MEDICAL EXAMINATION (SEE PAGE 2) STATE DETAILS ON PAGE 2

HEIGHT 269cm	WEIGHT 66kg	BLOOD PRESSURE 120/80/90	PULSE 78b/min	RESPIRATION 24b/min	GENERAL APPEARANCE Good
VISION: WITHOUT GLASSES 6/6 WITH GLASSES 6/6		RIGHT EYE 6/6	LEFT EYE 6/6		
DATE OF LAST COLOR VISION TEST (Month/Day/Year) 14 JUL 2024 Testing Required every 6 years					
COLOR VISION MEETS STANDARDS IN STCW CODE, TABLE A-I/9?				YES ☐ NO ☒	
COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR TEST IS NORMAL. YELLOW ☐ RED ☐ GREEN ☒ BLUE ☐					
HEARING: RT. EAR Normal LEFT EAR Normal					
HEAD AND NECK Normal			HEART (CARDIOVASCULAR) Normal		
LUNGS Normal			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? Yes		
EXTREMITIES: UPPER Normal LOWER Normal					
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY, OR TO RENDER HIM UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? IF YES, EXPLAIN IN DETAILS OF MEDICAL EXAMINATION ON PAGE 2. No.					

SIGNATURE OF APPLICANT

DATE OF EXAM

EXPIRY DATE

THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN.

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: **MD HARUN AL MAMUN**

FIT FOR DUTY ON BOARD SHIP

(NAME OF APPLICANT)

(HE) (SHE) IS FOUND TO BE (FT) (NOT FIT) FOR DUTY AS A: (MASTER, MATE, ENGINEER, RADIO OFFICER, RATING, MOU DECK, MOU ENGINE or SUPERNUMERARY). IF EMPLOYED AS A WATCHSTANDER (HE) (SHE) IS FOUND TO BE (FT) (NOT FIT) FOR LOOKOUT DUTIES?

NAME AND DEGREE OF PHYSICIAN **DR. MIR MD. RAIHAN MBBS(DU), DFM REG:A-55144**

ADDRESS **RADICAL HOSPITAL LIMITED 35, SHAH MAKHDUM AVENUE SECTOR-12, UTTARA, DHAKA-1230**

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

DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE **06 MAY 2014**

SIGNATURE OF PHYSICIAN

DATE OF EXAMINATION: **14 JUL 2024**

This certificate is issued by authority of the Deputy Commissioner of Maritime Affairs, R.L. and in compliance with the requirements of the Maritime Labour Convention, 2006 for the Medical Examination of Seafarers.

The Medical Certificate shall be valid for no more than two (2) years from the date of the Examination for those over 18 years of age and for no more than one (1) year for those under 18 years of age.

DR. MIR. MD. RAIHAN

MBBS (DU), DFM, CCB (Birmen), PGT (Ophth)

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

General Physician
Radical Hospitals Limited



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.
- (c) Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and at least 20/50 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/200 in both eyes. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.
- (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 seafarer deck, bosun, GP-I, 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, able seafarer engine 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)

1. COMPLETE PHYSICAL EXAMINATION INCLUDING HEARING TEST.

2. PATHOLOGICAL EXAMINATION : A) Complete Blood Count

B) Blood Sugar Estimation

C) Serological Test(VDR) D) Hepatitis B Surface Antigen Test (HbsAg)

E) 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

14 JUL 2024



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