

REPORT OF MEDICAL EXAMINATION OF SEAFARER BY AN APPROVED MEDICAL EXAMINER.

As per Merchant Shipping (Medical Examination) Rules 2000 and ISM / STCW code 1/9 and ILO convention 147 (MLC 2006)

DR. MIR MD. RAIHAN MBBS, (DU), DFM

RADICAL HOSPITAL LIMITED,

35 SHAH MAKHDUM AVENUE, UTTARA, DHAKA-1230.

TEL: +88027920116, +88 01955567000. EMAIL: radical_hospitals@yahoo.com

Name: DAS PALASH CHANDRA Sex: M Serial No: 2/0
 Date of Birth: 30/12/1992 PP/CDC: C/017531 Rank: 2/0
 Vessel: MY. ELVITA R Type: BULK Route: WORLDWIDE
 Home Address: Vill: Barakanta, P.O. Chandina, P.S. Debidwar, Dist. Cumilla

Company Name: Symphony ship management.

Medical History

Please answer the following to the best of your knowledge.

Is there any past / present history of any of the following	Candidate Declaration		Examiner Record			Candidate Declaration		Examiner Record	
	Yes	No	Yes	No		Yes	No	Yes	No
Severe one-sided headaches (Migraine)		☒		☒	Hernia / Hydrocoele / Appendicitis		☒		☒
Head Injury / Concussion / Loss of Memory		☒		☒	High / Low blood pressure / Heart disease		☒		☒
Fits / Epilepsy / Dizziness / Fainting		☒		☒	Asthma / Bronchitis / Tuberculosis		☒		☒
Eye / Vision Problems (Glasses, etc.)		☒		☒	Allergy / Skin disease		☒		☒
Hearing Impairment		☒		☒	Infection / Contagious Disease		☒		☒
Ear / Nose / Throat problems		☒		☒	Addiction to alcohol / drugs / tobacco		☒		☒
Stomach / Bowel disorders		☒		☒	Fracture / Dislocation / Injury / Amputation		☒		☒
Gall stones / Kidney disorders		☒		☒	Major / Minor Operation		☒		☒
Jaundice / Liver Disease		☒		☒	Diabetes		☒		☒
Piles / Varicose veins		☒		☒	Nervous / Mental disease / Sleep disorder		☒		☒
Blood Disorder		☒		☒	Malignant disease (Cancer)		☒		☒
Female Disorder		☒		☒	Signed off on medical grounds / Declared Unfit		☒		☒

Notes

Medical Examination

Height	Weight in Kgs	Chest Insp-Exp	Blood Pressure in mm of Hg	Pulse-Beats / min	Resp.Rate / min	General Condition							
<u>170cm</u>	<u>60kg</u>	<u>43-41</u>	<u>120/80mmHg</u>	<u>76b/min</u>	<u>19b/min</u>	<u>Good</u>							
Distant Vision	Uncorrected	Corrected	Field of Vision	Audiometry	bz	500	1000	2000	3000	4000	5000	6000	8000
Right Eye	<u>6/6</u>		Normal	Right Ear	dB	<u>20</u>	<u>20</u>	<u>20</u>					
Left Eye	<u>6/6</u>		Abnormal	Left Ear	dB	<u>20</u>	<u>20</u>	<u>20</u>					
Colour Vision	Ishihara	Normal	Abnormal	Hearing	Right Ear				Left ear				
	Other	Normal	Abnormal		<u>4</u>				<u>4</u>				

Systemic Examination

	Normal	Abnormal	Notes		Normal	Abnormal
Head & Neck	☒	☐	FIT FOR SEA SERVICE AS 2ND OFF AS PER MLC 2006 Enhanced GARD Medicals done		Respiratory system	☒
Eyes	☒	☐			Cardiovascular system	☒
Ears / Nose / Throat	☒	☐			Per Abdomen	☒
Teeth / Oral Cavity	☒	☐			Genito-urinary system	☒
Musculo-Skeletal system	☒	☐			Others	☒
Nervous system	☒	☐			Hernia / Hydrocoele	☒
Reflexes	☒	☐			Varicose Veins	☒
Skin	☒	☐			Fissure/Fistula/Piles	☒

Investigations

Blood	Result	Normal	Urine
Hemoglobin	<u>14.8 gm%</u>	14-16 gm %	Colour <u>3m</u>
Total WBC count	<u>8200/cu.mm</u>	4000-11000 / cu.mm	Specific Gravity
Neu <u>64</u> % Lymph <u>31</u> % Eos <u>03</u> Ba <u>00</u> % Mono <u>02</u> %			pH
Malarial parasite	<u>NOT FOUND</u>		Albumin
ESR	<u>05 mm / 1st hour</u>	1-15 mm / hr	Sugar
SGPT	<u>U/L</u>	9-43 U / L	Bile pigment
S.Cholesterol	<u>mg/dl</u>	145-260 mg / dl	Bile salts
S.Triglycerides	<u>mg/dl</u>	upto 200 mg / dl	Occult blood
Blood Sugar	RBS <u>PPBS</u>	upto 125 mg %	RBC cells
HbsAg	<u>NOT FOUND</u>		Leucocytes
HIV 1 & II	<u>NOT FOUND</u>		Others
VDRL	<u>NOT FOUND</u>		Spirometry: <u>N/D</u>
Others		GGTP U/L	Drugs of Abuse: <u>Negative</u>
Blood Group			USG: <u>N/D</u>
ECG: <u>Normal</u>	TMT: <u>N/D</u>		
X-Ray Chest: <u>Normal</u>			



Result of Medical Examination

On the basis of the examinee's history, clinical examination and diagnostic tests, I, Dr. MIR MD Raihan, hereby declare the examinee medically Fit Unfit Temporarily unfit Permanently unfit Should be re-examined in days / weeks / months.

Remarks / Recommendations

I, Doctor's Name: DR. MIR MD. RAIHAN certify that all information required under Annexure E & F of M.S. (Medical Examination) Rules 2000 is incorporated in this Certificate

This certificate is valid till: 09 MAR 2026

Candidate's Signature: [Signature]

Official Stamp

Doctor's signature: [Signature]

Date: 10 MAR 2024



DR. MIR. MD. RAIHAN
 MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
 BMDC A-55144, MMC-BSD-616
 DG Shipping Bangladesh Approved
 General Physician
 Radical Hospitals Limited.

04.2024.6100



**MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD
REPUBLIC OF PANAMA**

SURNAME: <u>DAS</u>	GIVEN NAME (S): <u>PALASH CHANDRA</u>	
DATE OF BIRTH: DAY <u>30</u> MONTH <u>12</u> YEAR <u>1992</u>	PLACE OF BIRTH CITY <u>CUMILLA</u> COUNTRY <u>BANGLADESH</u>	SEX MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER ☐ DECK OFFICER ☒ ENGINEERING OFFICER ☐ RADIO OPERATOR ☐ RATING ☐	MAILING ADDRESS OF APPLICANT: <u>palashdas6499@gmail.com</u> <u>Vill: Borkhanta, p.o. Chandina, p.s. Debidwar,</u> <u>Dist: Cumilla.</u>	

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION		COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	
RIGHT EYE	<u>6/6</u>	—	RIGHT EAR <u>mm</u>
LEFT EYE	<u>6/6</u>	—	LEFT EAR <u>mm</u>

COLOR TEST TYPE:
☒ BOOK
☒ LANTERN
YELLOW mm RED mm
GREEN mm BLUE mm

Confirmation that identification documents were checked at the point of examination: YES ☒ NO ☐

Hearing meets the standards in STCW Code, Section A-1/9? YES ☒ NO ☐ NOT APPLICABLE ☐

Unaided hearing satisfactory? YES ☐ NO ☐

Visual acuity meets standards in STCW Code, Section A-1/9? YES ☒ NO ☐

Colour vision meets standards in STCW Code, Section A-1/9? YES ☒ NO ☐
(the visual test is required every six years)

Date of the last colour vision test: (Day/Month/Year) 10 MAR 2024

Are glasses or contact lenses necessary to meet the required vision standards? YES ☐ NO ☒

Able for watchkeeping? YES ☐ NO ☐

Is applicant taking any non-prescription or prescription medications? YES ☐ NO ☒

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

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

Signature of Applicant

Name of Applicant

Date

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

FIT FOR DUTY ON BOARD SHIP

NAME AND DEGREE OF PHYSICIAN: <u>DR. MIR MD. RAIHAN MBBS, (DU), DFM REG: A-55144</u>		
ADDRESS: <u>RADICAL HOSPITAL LIMITED SECTOR-12, UTTARA, DHAKA-1230</u>		
NAME OF PHYSICIAN'S CERTIFYING AUTHORITY: <u>DG SHIPPING BANGLADESH</u>		
DATE OF ISSUE PHYSICIAN'S CERTIFICATE: <u>06-MAY-2014</u>		
SIGNATURE OF PHYSICIAN: <u>[Signature]</u>	STAMP OF PHYSICIAN: <u>[Stamp]</u>	DATE: <u>10 MAR 2024</u>
EXPIRY DATE OF CERTIFICATE: <u>09 MAR 2026</u>		

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

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

Radical Hospitals Limited.

Id No : 0261 **Date** : 10-Mar-2024 **D.Date** : 10-Mar-2024
Patient's Name : PALASH CHANDRA DAS **Age** : 31Y 2M 10D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/7531

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	14.8 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl.
ESR(Westergreen)	05 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	8,200 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	64 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	31 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	03 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	164 /cumm	50-450/cumm
Total RBC Count	5.0 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	41 %	M: 40-54%, F:37-47%
MCV	78 fL	76 - 94 fL
MCH	29 pg	27 - 32 pg
MCHC	30 g/dL	29 - 34 g/dL
RDW	13 %	11 - 16 %
PDW	36 fL	35 - 56 fL
Total Platelete Count (PC)	3,60,000 /cumm	150,000-450,000/cumm
MPV	8.0 fL	7.0 - 11.0 fL
PCT	0.1 %	0.1 - 0.2 %
Bleeding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %

Checked By 
Medical Technologist


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

Bill No	DIA24030261	Received Date	10/03/2024
Patient's Name	PALASH CHANDRA DAS		
Patient's Age	31Y 2M 10D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 7531
Sample	BLOOD		

SEROLOGICAL REPORT

Test Name

Result

HBs Ag (Method : (ICT)	Negative
HIV 1 & 2 (Method : (ICT)	Negative
<u>BLOOD GROUPING RESULT</u>	
ABO Blood Group	"O" (-ve)
Rh (D)Factor	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	DIA24030261	Received Date	10/03/2024
Patient's Name	PALASH CHANDRA DAS		
Patient's Age	31Y 2M 10D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/ 7531
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

Test Name	Result
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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.

AUDIOLOGICAL REPORT

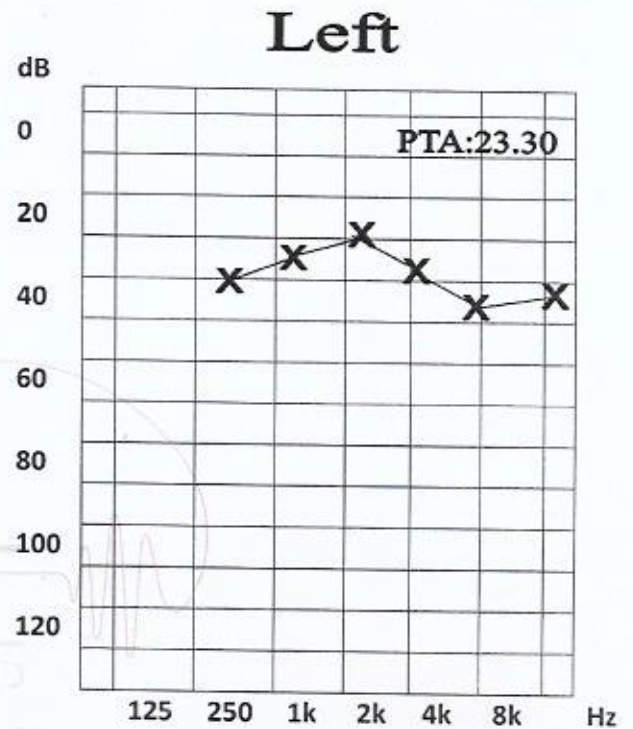
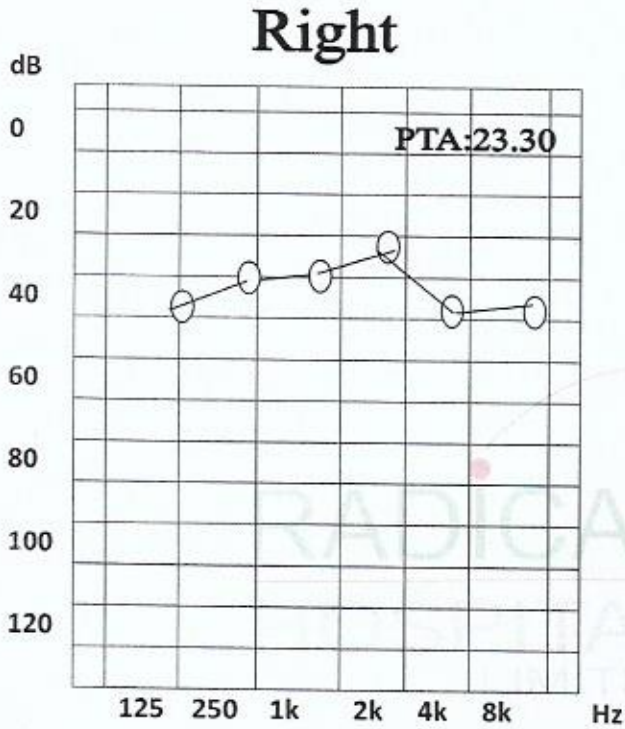
Patient Name : PALASH CHANDRA DAS

10/03/2024

Age : 31 Yrs

s Address : RHL, UTTARA

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



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		
Air Masking OX		
Bone Masking ΔΔ		

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24030261 Receive: Print: 10/03/2024
Patient's Name : **PALASH CHANDRA DAS**
Age : 31 YRS Sex : M
Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 65 b/min

Rhythm : Regular

P-Wave : Normal

P-R Interval : Normal

QRS Complex : Normal

ST. Segment : Is electric

T. Wave : Normal

Impression : Findings are within normal limit.



Dr. Debashish Paul
MBBS, MD (Cardiology)
Associate Professor
Department of Cardiology
Sylhet Women's Medical College Hospital

This report has been electronically signed

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ID: 24020576

10-03-2024 17:56:56

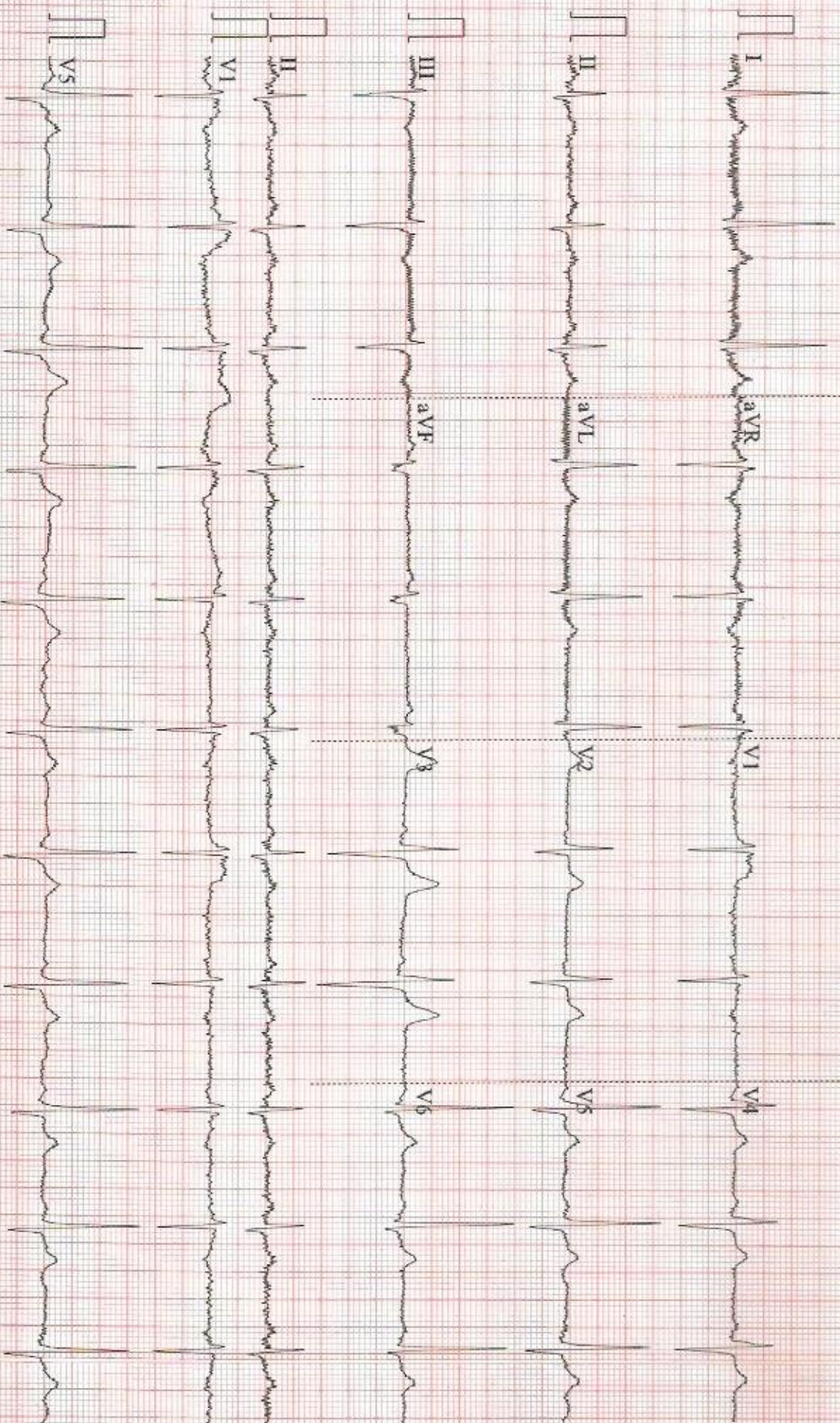
William O'Mahony
Male 39 Years

HR	: 65	bpm
P	: 120	ms
PR	: 146	ms
QRS	: 108	ms
QT/QTc	: 388/404	ms
P/QRS/T	: 39/-11/0	°
RV5/SVI	: 1.663/0.972	mV

Diagnosis Information:

Sinus rhythm
Inferior T wave abnormality is nonspecific
Borderline ECG

Report Confirmed by:



0.67-100Hz AC50 25mm/s 10mm/mV

4*2.5s+3r 65

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

20.383

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24030261 Receive: 10/03/2024 Print: 10/03/2024
Patient's Name : **PALASH CHANDRA DAS**
Age : 31 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.

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