

REPORT OF MEDICAL EXAMINATION OF SEAFARER BY AN APPROVED MEDICAL EXAMINER
As per Merchant Shipping (Medical Examination) Amendment Rules, 2000 and ILO IMO/JMS/2011/2012
(In Compliance with MLC 2006 & ISM/STCW 2010, Code 1/9)

Name: MOHAMMAD SHAHJAHAN Sex: MALE Serial No.: _____
Date of Birth: 12-10-1962 PP/CDC No.: C/0/2130
Rank: CHIEF ENGINEER Vessel: N.V. NIAGRA HIGHWAY Nationality: BANGLADESHI
Home Address: HOUSE NO-57, ROAD-4, BALK-D, BASHUNDHARA R/A, DHAKA-1229 Route: WORLDWIDE
Company Name & Address: WALLEN SHIP MANAGEMENT, HONG KONG.

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		Is there any past/present history of any of the following?	Candidate Declaration		Examiner Record	
	Yes	No	Yes	No		Yes	No	Yes	No
Severe one-side 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		☒		☒
Calc Stones / Kidney Disorders		☒		☒	Major / Minor Operation		☒		☒
Jaundice / Liver Disease		☒		☒	Diabetes		☒		☒
Piles / Venous ulcers		☒		☒	Nervous / Mental disease / Sleep disorder		☒		☒
Blind Disorder		☒		☒	Malignant Disease (Cancer)		☒		☒
Female Disorders		☒		☒	Significant medical grounds/Declared Unfit		☒		☒
Prostheses		☒		☒					

Candidate's Declaration: My signature below acknowledges that all statements provided by me in this application are true & correct to the best of my knowledge and belief and I further authorize & consent to the release of any /all of my medical records from any source including insurance offices, Doctors, Hospitals or other institutions and public authorities. This general medical release will also authorize the release of any /all of my psychological records. If I am being tested for HIV virus, I consent to have the result revealed to my employer. I declare the above statements to be correct.

I hereby certify that the above medical statements are true and will form the basis of my medical examination. I agree that any omission or misrepresentation shall preclude me from employment and other medical benefits.

Date: _____

Medical Examination:

Height in cms		Weight in Kgs		Blood Pressure in mm of Hg		Pulse-beats/min		Resp. Rate/min		General Appearance							
168cm		72kg		130/80 mmHg		78/min		19 b/min		HEALTHY							
Compliant with MLC2006, STCW 2010 STANDARD A-1/9	Distant Vision (Snellen's Chart)		Uncorrected	Corrected	Field Of Vision	Audiometry		Hz	500	1000	2000	3000	4000	5000	6000	8000	Compliant with MLC2006, STCW 2010 STANDARD A-1/9
	Right Eye					6/6	Normal		Right Ear	6B	20	20	20	Not Indicated			
	Left Eye		6/6	Abnormal		Left Ear	6B	20	20	20							
	Colour Vision		Ishihara	Normal	Abnormal		*Hearing		Normal Voice				Whispered Voice				
Others		Normal	Abnormal		Right Ear		4 METER				2 METER						
					Left Ear		4 METER				2 METER						
Systemic Examination																	
Notes																	
Head & Neck																	
Eyes																	
Ear / Nose / Throat																	
Teeth / Oral Cavity																	
Musculo-Skeletal System																	
Nervous System																	
Reflexes																	
Skin																	

Systemic Examination		Normal	Abnor	Notes	4 METER	2 METER	Normal	Abnor	
Head & Neck		✓		FIT FOR SEA SERVICE AS AS PER MLC 2006 Enhanced GARD Medicals done	Respiratory System		✓		
Eyes		✓			Cardiovascular System		✓		
Ear / Nose / Throat		✓			Hep Abdomen		✓		
Teeth / Oral Cavity		✓			Gen-to-urinary System		✓		
Musculo-Skeletal System		✓			Others		✓		
Nervous System		✓			Hernia / Hydrocoele		✓		
Reflexes		✓			Varicose Veins		✓		
Skin		✓			Fistula / Piles		✓		
Investigations :									

Result Of Medical Examination											
On the basis of the history, clinical examination & diagnostic tests, I											
hereby declare the above examinee has been found											
Remarks / Recommendation: *Unaided Hearing - Satisfactory											
I certify that all information required under Annexure F & G of M.S (Medical Examination) Rules 2000 are incorporated in this certificate.											
Date of Medical Exam: <u>26 MAR 2024</u>											
Date of Medical Fitness: <u>26 MAR 2024</u>											
Validity of Medical Certificate: <u>25 MAR 2025</u>											

IDENTITY OF CANDIDATE CONFIRMED WITH



DR. MIR MD. RAHAN

MBBS, DPM, DFM, CCD (Medical), PGD (Public Health)

UG Shipping Bangladesh Approved

General Physician

Radical Hospital Ltd.

MEDICAL FITNESS CERTIFICATE

LAST NAME OF APPLICANT SHAHJAHAN			FIRST NAME MOHAMMAD		MIDDLE INITIAL
DATE OF BIRTH 10 MONTH 12 DAY 1962 YEAR	PLACE OF BIRTH CITY CHOTTOGRAM		COUNTRY BANGLADESH		
EXAMINATION FOR DUTY AS : MASTER ☐ MATE ☐ ENGINEER ☒ RADIO OFF ☐ SEAMAN ☐			MAILING ADDRESS OF APPLICANT HOUSE NO - 57, ROAD NO - 4, BLOCK - D BASHUNDHARA R/A, DHAKA - 1229		

MEDICAL EXAMINATION														
HEIGHT 168	WEIGHT 72.5	BLOOD PRESSURE 130/80 mmHg	PULSE 78 b/min	RESPIRATION 19.5/min	GENERAL APPEARANCE Good									
VISION:			HEARING:											
<table border="1"> <tr> <td></td> <td>RIGHT EYE</td> <td>LEFT EYE</td> </tr> <tr> <td>WITHOUT GLASSES</td> <td></td> <td></td> </tr> <tr> <td>WITH GLASSES</td> <td>6/6</td> <td>6/6</td> </tr> </table>				RIGHT EYE	LEFT EYE	WITHOUT GLASSES			WITH GLASSES	6/6	6/6	RIGHT EAR mm LEFT EAR mm		
	RIGHT EYE	LEFT EYE												
WITHOUT GLASSES														
WITH GLASSES	6/6	6/6												
COLOR TEST TYPE : BOOK ☒ LANTERN ☐ Check if color test is normal Normal			YELLOW mm RED mm GREEN mm BLUE mm HEART (CARDIOVASCULAR) Normal											
LUNGS Normal														
SPEECH : Is speech unimpaired for normal voice communication ?														
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 onboard? No.														

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO :
AND HE / SHE IS FOUND TO BE FIT FOR SEA SERVICE FROM

NAME AND DEGREE OF PHYSICIAN **DR. MIR. MD. RAIHAN, MBBS. DFM,**
(PLEASE PRINT)
ADDRESS **RADICAL HOSPITAL LIMITED, UTARA**

NAME OF PHYSICIAN'S LICENSING AUTHORITY **DG SHIPPING BANGLADESH**
DATE OF ISSUE OF PHYSICIAN'S LICENSE **06 May 2014**

SIGNATURE OF PHYSICIAN

This certificate is issued in compliance with the requirements of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73)



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

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: SHAHJAHAN

GIVEN NAME (S): MOHAMMAD

DATE OF BIRTH:

DAY 12 MONTH 10 YEAR 1962

PLACE OF BIRTH

CITY CHATTGRAM COUNTRY BAHGLADESH

SEX

MALE ☒ FEMALE ☐

POSITION ON BOARD:

MASTER ☐

DECK OFFICER ☐

ENGINEERING OFFICER ☒

RADIO OPERATOR ☐

RATING ☐

MAILING ADDRESS OF APPLICANT:

HOUSE NO - 59, ROAD NO - 4, BLK - D, BASHONDHARA
R/A, DHAKA - 1229

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION

WITHOUT GLASSES

WITH GLASSES

RIGHT EYE

LEFT EYE

COLOR TEST TYPE

☐ BOOK

☐ LANTERN

YELLOW ☒

GREEN ☒

RED ☒

BLUE ☒

HEARING

RIGHT EAR ☒

LEFT EAR ☒

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

Hearing meets the standards in STCW Code, Section A-1/9? YES ☒ NO ☐ NOT 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 it is required every six years)

Date of the last colour vision test: (Day/Month/Year) 26 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

MOHAMMAD SHAHJAHAN

Name of Applicant

26 MAR 2024

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:

DR. MIR. MD. RAIHAN, MBBS, DPM

ADDRESS: RADICAL HOSPITAL LIMITED, UTARA

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: DA SHIPPING BANGLADESH

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06 MAY 2014

SIGNATURE OF PHYSICIAN: 

STAMP OF PHYSICIAN:



DATE:

26 MAR 2024

EXPIRY DATE OF CERTIFICATE:

25 MAR 2025

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

DR. MIR. MD. RAIHAN

MBBS (DU), DPM, CCD (Bitem), PGT (Ophth)

BMDC A-55144, MMC-BGD-010

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited

MEDICAL CERTIFICATE FOR FITNESS FOR SERVICE AT SEA

FIT FOR DUTY ON BOARD SHIP

Last/Family Name

SHAHJAHAN

First & Middle /Given Name

MOHAMMAD

Position applied for

CHIEF ENGR

Date of Birth

12-10-1962

Sex

MALE

Nationality

BANGLADESHI

ID (Passport/Discharge book) No.

C/O/2130

I have evaluated the above-named seafarer after establishing his identity as per the documents mentioned above and in compliance with the medical standards of MLC 2006 Reg 1.2; STCW 2010 & the guidance for the conduct of medical examination issued by the Directorate, as amended from time to time. On the basis of the seafarer's personal declaration, my clinical examination, the diagnostic test results obtained, and in consideration of the essential requirements of the position applied for, my opinion is -

(a) that the hearing meets the required standards for his rank:-

Unaided hearing is satisfactory

✓ Yes No

✓ Yes No

(b) Visual acuity meets the required standards for his rank

Colour Vision meets the the required standard

that he is fit for look out duty

✓ Yes No

✓ Yes No

Yes No

(c) that he needs visual aids / informed to carry spares

Yes No

(d) that he is taking regular medication & seafarer does require to take same during his tenure on board vessel

✓ Yes No

(e) that the seafarer is not suffering from any disease likely to be aggravated by, or render him unfit for, service at sea or likely to endanger the health of other persons on board ships

✓ Yes No

(f) this seafarer is **FIT FOR DUTY without restrictions*** as mentioned below

** This Medical Certificate is issued with following restrictions

** Reasons for being unfit

Physician Signature:

Physician Name Printed:

Date:

26 MAR 2024

Valid Till:

25 MAR 2025

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

Clinic Stamp



Authorizing body of Medical Examiner: Directorate General of Shipping, Govt. of Bangladesh

I acknowledge, that I have been advised of the content of the medical certificate & of the rights for a review and my obligations.

26 MAR 2024

Seafarers signature with Date:-

Delete whatever is not applicable



WALLEM SHIPMANAGEMENT(INDIA) PVT. LTD.

REQUISITION FOR SEAFARER'S MEDICAL EXAMINATION
(Confidential Document)

Form : MHRS 08
Prepared by : MR
Approved by : MD
Issued : Feb '08
Revised : Mar '17

From :

(Please write Name, Address & Contact Details of Manning Centre)

RADICAL HOSPITAL LIMITED

To : Uttara, Dhaka, Bangladesh

(Please write Name, Address & Contact Details of the Doctor/ Clinic/ Examiner)

Please carry out medical examination of the seafarer, the details and requirements for which are as follows:

(Name & Signature of Responsible Person from Manning Centre)

Date : 26 MAR 2024

Examinee's Details :

Full Name : MOHAMMAD SHAHJAHAN Address : House - 57, Road-4, Bk-D, DASHEN DHAKA R/A, DHAKA

Date of Birth : 12-10-1962 Rank : CHIEF ENGR. Name of vessel to be assigned : N.V. NIAGRA HIGHWAY

Type of vessel : PCC Trade area : WORLDWIDE

(Container, Tanker, Passenger etc) (e.g. Coastal, Tropical, Worldwide) :

CDC No. : C/0/2130 Passport No. : _____ Crew ID. (from Compas) : 24499

Position Offered/ Applied for : C/E Routine & Emergency Duties (if known) : _____

As per requirements of applicable P&I club :

- | | | |
|--|--|--|
| ☐ West of England P&I | ☐ UK P&I | ☐ Steamship Mutual Underwriting Association |
| ☐ Britannia P&I | ☐ Skuld P&I | ☐ North of England Association P&I |
| ☐ Standard P&I | ☐ Gard P&I | ☐ London Steamships P&I |
| ☐ Japan P&I | ☐ American Steamships P&I | ☐ Others : _____ |

As per requirements of applicable Flag State :

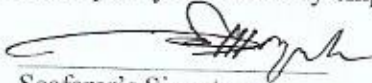
- | | | | | |
|-----------------------------------|------------------------------|-------------------------------------|---|--------------------------------|
| ☐ Liberian | ☐ NIS | ☐ Panamanian | ☐ Marshall Islands | ☐ Malta |
| ☐ Danish | ☐ ILO | ☐ UK | ☐ Others : _____ | |

Medical Examination Module (as applicable): _____ (Please refer to "Annex 1" of WSM(I)'s Quality Manual)

FOR SEAFARERS : Please write any past medical history [Injury or Illness] in detail; any history of allergy to drugs should be mentioned in the box provided below :

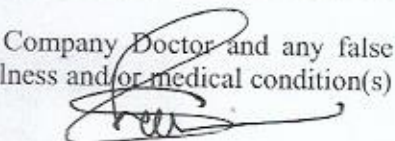
Please read and sign the following statement :-

"I certify that my past medical history will be/has been fully declared to the Company Doctor and any false statement or undisclosed material and/or information in regard to past or present illness and/or medical condition(s) will disqualify me from any employment benefits and claims."



Seafarer's Signature
Date : 26 MAR 2024





Doctor's Signature
Date : 26 MAR 2024

Original: Doctor & Copy : Manning Centre
Remark: The document to be uploaded into CMS under "Medical" Tab.

DR. MIR. MD. RAIHAN
MBBS (DU), DPM, CCD (Birdem), PG1 (Opht)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospital Limited

WALLEM	SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER In accordance with: STCW Convention, 1978, as amended, MLC 2006, ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended (Confidential Document)	Form: OHF 48 Version: 01 Date: 18 Aug 21 Page: 1 of 7

Pre-Sea Exam: ☐	Periodic Exam: ☒	Other: ☐
--	--	---------------------------------

Examination for duty as: Master: Y/N: _____ Deck Officer: Y/N: _____ Eng Officer: <u>Y/N: 7</u> Ratings: Y/N: _____ Cook: Y/N: _____ Other: Y/N: _____ Please specify _____	 	Fit to perform the duties he/she is to carry out. ☒	Fit to perform the duties he/she is to carry out with the prescribed medicines which will not affect seafarer's health while onboard. ☐	Temporarily unfit to perform the duties he/she is to carry out. ☐	Permanently unfit to perform the duties he/she is to carry out. ☐
--	--	---	--	--	--

To be filled by Manning Centres

Name, Address with Contact details of Manning Centre:				
Vessel to be assigned:	<u>M.V. NIAGRAH</u>	Routine & Emergency Duties (if known):	Position Offered/ Applied for:	<u>CHIEF ENGR</u>
Type of vessel (Container, Tanker, Passenger etc):	<u>PCC</u>			
Trade area (e.g. Coastal, Tropical, Worldwide):	Coastal ☐ Tropical ☐ WorldWide ☒			

Part I - Examinee's Personal Declaration with Medical History
 (Examinee is to be answer the following to the best of examinee's knowledge)
 (Assistance should be offered by medical staff)

In case of any wrongful Act or misrepresentation/ suppression of material fact(s) of information or infringement the concerned seafarer shall be fully responsible/ liable for the consequences/ damages / penalties as per the provisions or the applicable laws.

Examinee's Personal Details

Name of Examinee (Family/ last, first, middle):		<u>MOHAMMAD SHAHJAHAN</u>						
Home/ Permanent Address:		<u>HOUSE NO-57, Road no-4, Block-D, BASHUNDHARA KA DHAKA-1229</u>						
Mailing Address:		<u>SAME AS ABOVE</u>						
Date of birth (day/month/year):		<u>12</u>	<u>1</u>	<u>10</u>	<u>1</u>	19 <u>62</u>	Sex:	<u>MALIE</u>
Place of Birth:	City: <u>CHATTOGRAM</u> Country: <u>BANGLADESH</u>	Nationality:	<u>BANGLADESHI</u>	Rank:	<u>CHIEF ENGR</u>			
Civil Status:		<u>MARRIED</u>						
Identity Docs/ Passport /Discharge Book No:		<u>C/O/2130</u>						

Examinee's Medical History

Is there any past / present history of any of the following	Examinee	Examiner's	Is there any past / present history of any of the following	Examinee	Examiner's
---	----------	------------	---	----------	------------

04.2024.6237

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER

In accordance with:
STCW Convention, 1978, as amended, MLC 2006,
ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and
Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

Form: OHF 48
Version: 01
Date: 18 Aug 21
Page: 2 of 7

	Declaration		Record			Declaration		Record	
	Yes	No	Yes	No		Yes	No	Yes	No
Loss of Consciousness/ Fits / Head Injury / Dizziness / Loss of Memory		✓		✓	Malignant Disease (Cancer) including Lymphoma, Leukaemia and related conditions Recurrence – especially Acute Complications, e.g. Harm to Self from Bleeding and to others from Seizures / Tumor		✓		✓
Neuropsychiatric diseases or Depression/ Suicidal Tendency/ Psychosis		✓		✓	Stomach / Bowel Disorders/ Digestive Disorder		✓		✓
Ear (Hearing, tinnitus) Problems / Impairment		✓		✓	Gall Stones/ Jaundice / Kidney Disorders		✓		✓
Mental Diseases, Breakdown / Sleep Disorder		✓		✓	Severe/ Frequent/ One Sided Headaches (Migraine)		✓		✓
Fractures / Dislocations / Injury / Amputation/ Restricted Mobility		✓		✓	Back / Joint Problems/ Wrist Problems/ Slipped Disc		✓		✓
Eye/ Vision Problems (Whether using Glasses/ Contact lenses)		✓		✓	Hernia / Hydrocoele / Appendicitis		✓		✓
Balance Problem		✓		✓	Piles / Varicose Veins		✓		✓
Sinuses/ Nose/ Throat Problems		✓		✓	Allergies / Rash/ Skin Disease		✓		✓
Thyroid Problem		✓		✓	Female Disorders		✓		✓
High / Low Blood Pressure/ Blood Disorder		✓		✓	Major / Minor Operation/ Surgery		✓		✓
Heart Disease, Surgery / Chest Pain/ Vascular Disease (inc. Pedal Pulses)		✓		✓	Contagious Diseases/ Gastrointestinal infection / Other Infections		✓		✓
Chronic Cough/ Asthma / Bronchitis / Tuberculosis/		✓		✓	Sexually Transmitted Disease/ Infections		✓		✓
Shortness of Breath		✓		✓	Addiction to Alcohol/Drugs/Cigarettes /Tobacco.		✓		✓
Rheumatic Fever		✓		✓	Diabetes				
for Male Examinee	Yes	No	If "Yes", give details		for Female Examinee	Yes	No		
Prostate Problems/ Testicular Lumps		✓			Breast Lumps/ Menstrual Problems		✓		
Penile Discharge		✓			Pregnancy		✓		
Multiple Partners		✓			Multiple Partners		✓		

If "Yes", to any of the above, please explain:

Additional questions :

	Yes	No
Have you ever been signed off on medical grounds, declared unfit or repatriated from a ship?		✓
Have you ever been hospitalized?		✓
Have you ever been declared unfit for sea duty?	✓	
Has your medical certificate ever been restricted or revoked?		✓
Are you aware that you have any medical problems, diseases or injuries?		✓
Do you feel healthy and fit to perform the duties of your designated position/occupation?	✓	
Are you currently under a doctor's care/ medication?		✓
Are you allergic to any medications?		✓
Malaria, Typhoid, Viral fever (Dengue, Chikungunya, etc), Chikungunya		✓
Liver diseases (Hepatitis A,B,C,D & E, Amoebic Abscess)		✓

WALLEM

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER

In accordance with:
STCW Convention, 1978, as amended, MLC 2006,
ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and
Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

Form: OHF 48
Version: 01
Date: 18 Aug 21
Page: 3 of 7

Arthritis, Spondylosis (Osteoarthritis, Rheumatoid) & Gout			✓
In the last one week have you consumed any of these Drugs/ Medication			✓
Cough Syrup, Sleeping Tablets, Cold, Action 500 etc.			✓
Pain Killers, If Yes, Please State name of Drug Crocin/ Aspirin/ Fortwin etc.			✓
Corticosteroids, Anti-epileptic Drugs, Nasal Drops etc.			✓
Any Medicine/ Injections from your family Doctor			✓
To What Extent Do You Use: Alcohol: <u>NO</u> , Cigarettes: <u>NO</u>			
Tobacco: <u>NO</u> , Drugs: <u>NO</u>			
Are you taking any non-prescription or prescription medications?			✓
If yes, please list the medications taken and the purpose(s) and dosage(s).			
Date and contact details for previous medical examination (if known):			
Are you coming from or have travelled through high risk areas? If yes, please mention the names of countries that you have been to (including ports of call in your last vessel).			
Family History :			
Diabetes	Yes	No	✓
Blood Pressure/ Heart Disease			✓
Mental Illness/ Epilepsy/ Seizure			✓
Cancer			✓
If "Yes", to any of the above, please explain:			

Any other major conditions?			
Would you say that your health is: Excellent * Good * Fair *			
I, <u>MOHAMMAD SHAHJAHAN</u> holding Passport/Seaman Book no <u>96/2130</u> 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 will 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 also certify that the personal declaration above is a true statement to the best of my knowledge and I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to			
Dr. <u>MARIMD. HANMAN</u> (the approved medical practitioner carrying out the medical examinations).			
Signature of Examinee:		Date (day/month/year): <u>26 MAR 2024</u>	

Height in cms: <u>168</u>	Weight in Kg: <u>72</u>	Blood Pressure	Systolic <u>130</u> (mmHg)	Diastolic <u>80</u> (mmHg)
BMI: <u>25.5</u>	Temperatures: <u>98.1</u>	Pulse Rate:	<u>78</u> /min	Respiratory rate: <u>19</u> /min
Chest:	Insp: <u>43</u>	Rhythm:	<u>Reg</u>	General Condition: <u>Good</u>
	Exp: <u>41</u>	Oral Health:	<u>Good</u>	

Part II – Medical Examination

The Company has set the following BMI limits:
A seafarer with a BMI: 18 or below; or 30 or above is considered temporarily unfit.
For seafarers from Northern Europe, the Indian subcontinent, Russia, Ukraine & Romania with a BMI of between 30 and 35 and where this, in the Government (DGS) approved medical examiner's opinion, is attributable solely to physique with broad shoulders/large muscle bulk with main muscles clearly defined and not obscured by subcutaneous fat and no co-morbid complications (eg. Diabetes, Hypertension, Dyslipidemia etc), then the seafarer in question MUST undergo a stress/ treadmill test.

If the results of the stress/ treadmill test are average or above, seafarer can be considered "fit to work", however, the seafarer MUST always be counselled on weight loss and ways/means to improve their health.

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER

In accordance with:
STCW Convention, 1978, as amended, MLC 2006,
ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and
Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

Form: OHF 48
Version: 01
Date: 18 Aug 21
Page: 4 of 7

BMI MUST also be taken into consideration during the seafarer's pre-employment medical examination and it is the responsibility of each manning centre to instruct their accredited clinic(s) to ensure that a seafarer's BMI is taken during the medical examination, the Company standards applied and if outside the limits, the manning centre must be notified, who will then seek further guidance from the Crewing Dept.

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

Are glasses or contact lenses necessary to meet the required vision standard? Yes / No

If yes, specify which type and for what purpose:

Colour vision:

Date of last colour vision test:	Type:	Book *	Lantern *	Ishihara *	CIE-43-2001 *			
Check if colour test is Normal:	Yellow	*	Red	*	Green	*	Blue	*
Colour Vision:	Not tested	*	Normal	*	Doubtful	*	Defective	*

Hearing:

Pure tone and audiometry (threshold values in dB)							Speech and Whisper Test (Meters)		
Audiometry	500 Hz	1,000 Hz	2,000 Hz	3,000 Hz	4,000 Hz	6,000 Hz		Normal	Whisper
Right ear	20	20	20				Right ear	4	4
Left ear	20	20	20				Left ear	4	4

Speech (Deck/Navigational Officer): Is speech unimpaired for normal voice communication?

	Normal	Abnormal		Normal	Abnormal
Head	✓		Varicose Veins	✓	
Eyes	✓		Vascular (Inc. Pedal Pulses)	✓	
Eye Movement/Pupils	✓		Abdomen and Viscera	✓	
Ophthalmoscopy	✓		Hernia	✓	
Ears, Tympanic Membrane	✓		Anus (Not Rectal Exam.)	✓	
Sinuses, Nose, Throat	✓		G-U System	✓	
Mouth/Teeth/Gums	✓		Upper & Lower Extremities	✓	
Nervous System	✓		Spine (C/S, T/S and L/S)	✓	
Heart	✓		Neurologic (Full Brief)	✓	
Lung and Chest	✓		Psychiatric	✓	
Breast Examination	✓		Pupils	✓	
Skin	✓		Musculoskeletal System	✓	

Cardiovascular System:

	Normal	Abnormal		Normal	Abnormal
Ischaemic Heart Disease	✓		Hypertension	✓	
Dysrhythmia/ Pacemaker	✓		Congenital Heart Disease	✓	
Valvular Heart Disease	✓		Peripheral Circulation	✓	
Cardiomyopathy	✓		Pulmonary Circulation/ TB	✓	
Aneurysms	✓			✓	

Chest X-ray (PA)

Not performed *

Performed * on (day/month/year):

Result :

Normal



Normal

Abnormal

**SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED
BY AN APPROVED EXAMINER**

In accordance with:
STCW Convention, 1978, as amended, MLC 2006,
ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and
Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

Form: OHF 48
Version: 01
Date: 18 Aug 21
Page: 5 of 7

WALLEM

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

Test:

Result:

Investigation:

Blood			Urine		Additional Tests		
Result	Normal		Result		Result	Normal	
Haemoglobin "Hb" g/dl	13 - 18 gm/dl	15.2	Colour		(HbA1c)	5.2	4.0 % - 6.5 %
Total WBC count	4,000 - 11,000 / cu.mm	6000	Specific Gravity		RBS/ FBS (Blood test)	5.9	
Neu 64 %, Lymph 28 %, Eos 05 %, Bas 03 %, Mo %			pH		Total Bilirubin	0.57	0.1 - 1.0 mg/dl
Blood Group & Rh factor (tested only once, need not be repeated)			Albumin	Nil	Direct Bilirubin	ND	0.0 - 2.5 mg/dl
BI ESR	1 - 15 mm / hr	05	Sugar	Nil	Indirect Bilirubin	ND	0.0 - 0.75 mg/dl
Platelets	1.50-4.00 Lakh/ul	2610W	Bile Pigment		SGPT	25	9 - 43 U/L
Fasting Lipid Profile			Bile Salt		SGOT	16	0 - 40 IU/L
S. Triglycerides	25-200 mg/dl	159	Occult Blood		SGGT	41	0 - 49 IU/L
Cholesterol Serum	130-220 mg/dl	175	RBC Cells	Nil	Blood Urea	ND	10 - 50 mg/dl
HDL Cholesterol Serum	35-65 mg/dl	46	Leucocytes		S. Creatinine	0.95	0.8 - 1.4 mg/dl
LDL Cholesterol Serum	85-150 mg/dl	82	Stool Test	Result	BUN	22	5-23mg/dl
VLDL Cholesterol Serum	07-35 mg/dl	ND	Bacteriological	N-F	PSA	ND	Less than 4.00 ng/ml
Total / HDL Cholesterol	3.0-5.0	ND	Parasitical	N-F	Malarial Parasite	ND	
LDL / HDL Cholesterol	2.5-3.5	ND	Others		Uric Acid	4.5	2.4 - 7.5 mg/dl
Hepatitis B	Positive	Negative	HIV I & II	Negative			
Hepatitis C	Positive	Negative	VDRL	Non Reactive			

Drugs: Method:

Results:

Detected	Amphetamines/ Urine *	Barbiturate/ Urine *	Marijuana, THC, Cannabinoids Urine *	Cocaine / Urine *	Opiates & Morphine *
Cut Off Limit	(1000 ng/ ml)	(200 ng/ ml)	50 ng/ ml	(300 ng/ ml)	
Not Detected	Amphetamines/ Urine *	Barbiturate/ Urine *	Marijuana, THC, Cannabinoids / Urine *	Cocaine / Urine *	Opiates & Morphine *
Spirometry	ND	TMT	ND	Drugs of Abuse	Negative
ECG	ND	ECHO	ND	Ultrasound (USG) of the Abdomen & Pelvis	ND

Part III - Result of Medical Examination

Is applicant vaccinated in accordance with WHO requirements? Yes / No

Vaccination status recorded: Yes / No Satisfactory * to be renewed

WALLEM

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER

In accordance with:
STCW Convention, 1978, as amended, MLC 2006,
ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and
Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

Form: OHF 48
Version: 01
Date: 18 Aug 21
Page: 6 of 7

Details:

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

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

Examination	Results of the examination		Examination	Results of the examination	
	Pass	Fail		Pass	Fail
Medical History	✓		Fecalysis (food service/ handlers only)	✓	
Physical Examination	✓		Hep B Antigen	✓	
Dental Examination	✓		Hep C Antibodies	✓	
Psychological Test	✓		Stress Test	✓	
Visual Test	✓		Diabetes	✓	
Colour Vision	✓		Ultrasound Examination (Presence of gall & Kidney Stones)	✓	
Audiometry	✓		Alcohol/ Drug Test	✓	
EKG	✓		2D echo Doppler study (for heart patient) Psychometric evaluation	✓	

If failed in any above mentioned examinations and examinations report attached to this form, please provide reasons with examination number:

This examinee is certified free of communicable disease (or viruses for cooks) : Yes / No

I have evaluated the above-named seafarer after establishing his identity as per the documents mentioned above and in compliance with the medical standards of STCW Convention, 1978, as amended, MLC 2006, ILO/IMO/JMS/2011/12- Guidelines on the Medical Examinations of Seafarers and also Merchant Shipping (Medical Examination) Rules by the Government (DGS), as amended from time to time. On the basis of the examinee's history, personal declaration, my clinical examination, the diagnostic test results obtained, and in consideration of the essential requirements of the position applied for, my opinion is

- (a) that the hearing meets the required standards for his / her rank and detect any audible alarms/ Unaided hearing is satisfactory
- (b) Visual acuity meets the required standards for his/her rank /Colour Vision meets the required standard (testing only required every 6 years unless considered necessary)/ that he / she is fit / unfit for look out duty
- (c) that he / she needs / does not need visual aids / informed to carry spares
- (d) that he/she is/is not taking regular medication & seafarer does /does not require to take same during his tenure onboard vessel that he/she is/is not taking any medication that has side effects that will impair judgment, balance, or any other requirements for effective and safe performance of routine and emergency duties onboard?
- (e) that the seafarer is not suffering from any disease, medical condition, disorder or impairment which renders him/her that will prevent the effective and safe conduct or likely to be aggravated by, or unfit for, routine and emergency service at sea or likely to endanger the health of other persons onboard ships.

Deck service

Engine service

Catering service

Other services (training/
examination)

Fit:

Unfit:

*

*

*

*

*

*

this seafarer is **UNFIT FOR DUTY**/ FIT FOR DUTY with/ without restrictions*** as mentioned below,

* This Medical Certificate is issued with following restrictions (e.g. specific position, type of ship, trade area & other as applicable):

** Reasons for being unfit



WALLEM

**SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED
BY AN APPROVED EXAMINER**

In accordance with:
STCW Convention, 1978, as amended, MLC 2006,
ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and
Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

Form: OHF 48
Version: 01
Date: 18 Aug 21
Page: 7 of 7

This is to certify _____ was physically examined and he/she is found to
be FIT for sea service/ look-out duty for the period from _____ To _____ Place of medical
examination _____ Date of medical examination: 26 MAR 2024 Medical
certificate validity date (day/month/year): 25 MAR 2025 Name of Examiner (Please Print): _____

(Validity should not be more than 2 years)

Degree: _____

Address: _____

Tel./Fax/Email: _____

RADICAL HOSPITAL LIMITED

Uttara, Dhaka, Bangladesh

Name of Medical Examiner/ Physician Certificate /License Issuing Authority: _____

Date of issue of Medical Examiner/Physician Certificate/ License: _____ Registration No.: _____

Examinee's Signature

(This signature is affixed in the presence of the Medical Examiner
(print name of medical examiner if not legible) and I acknowledge, that
I have been advised of the content of the medical certificate & of the
right to a review in accordance with paragraph (6) of section A-I/9 of STCW
Code and my obligations.)

Date: 26 MAR 2024

Original: Master & Crewing Dept
cc: Seafarer

Official Stamp & Signature with Govt. (DGS) Approval/
No.....of Medical Examiner

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

Remark: This form is to be uploaded in Crew Management System, Medical tab by the Manning centre.



ID NO : 24030737

Date : 26/03/2024

Patient's Name : MOHAMMAD SHAHJAHAN

Age : 61Y 5M 14D

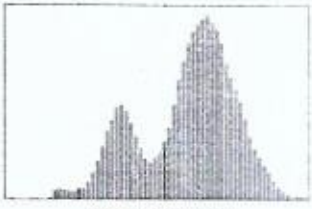
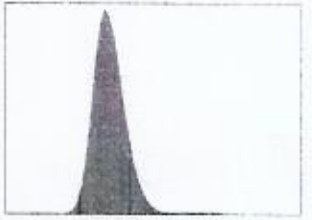
Ref. By : DR.MIR MD.RAIHAN MBBS,(DU),CCD(BIRDEM),PGT(EYE),DFM-C/O/-2130

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)	15.2 g/dl	M:12-16, F:10-14.0 g/dl	
ESR(Westergren)	05 mm/1st hr	M:0-10, F:0-20 mm/1st hr	
TOTAL WBC COUNT	6,000 /cumm	4,000 - 11,000 /cumm	
<u>DIFFERENTIAL COUNT</u>			
Neutrophils	64 %	(40 - 75)%	
Lymphocytes	28 %	(20-45)%	
Monocytes	05 %	(2-10)%	
Eosinophils	03 %	(1-6)%	
Basophil	00 %	0-1 %	
TOTAL CIR. EOSINOPHIL COUNT	180 /cumm	40 - 450 /cumm	
TOTAL PLATELET COUNT(PC)	261,000 /cumm	1,50,000-4,50,000 /cumm	
MPV	10.4 fL	7.0 -11.0 fL	
PDW-CV	16.4 %	10 - 18 %	
PCT	0.27 %	0.10 - 0.28	
P-LCR	29.5 %	9.00 - 45.00%	
P-LCC	77 x10 ³ /uL	13 - 129 x10 ³ /uL	
RBC COUNT	5.88 m/uL	M: 4.5-6.5, F: 3.8-5.8 m/uL	
HCT/PCV	50.7 %	M: 40-54%, F: 37-47%	
MCV	86.2 fL	76-94 fL	
MCH	25.8 pg	27-32 pg	
MCHC	29.9 g/dL	29-34 g/dL	
RDW SD	46 fL	30.0-57.0 fL	
RDW CV	16.4 %	10-16%	

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

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

Bill No	DIA24030737	Received Date	26/03/2024
Patient's Name	MOHAMMAD SHAHJAHAN		
Patient's Age	61Y 5M 14D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC C/O	2130
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.9 mmol/L	4.2 – 6.4 mmol/L
Serum Creatinine	0.95 mg/dl	0.3 - 1.3 mg/dl
Serum (BUN)	22 mg/dl	7- 23 mg/dl
Uric Acid	4.5 mg/dl	3.8 - 8.0 mg/dl
GGT	41 U/L	Adult Male : <55
Total Protein	7.0 g/dl	6.3-7.9 g/dl
Serum Bilirubin (Total)	0.57 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	25.0 U/L	Up to 40 U/L
Serum AST (SGOT)	16.0 U/L	Up to 37 U/L
Serum Alkaline Phosphate	183 U/L	98 - 279 U/L
HbA1C	5.2 %	4.0- 6.0 %

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.

Bill No	DIA24030737	Received Date	26/03/2024
Patient's Name	MOHAMMAD SHAHJAHAN		
Patient's Age	61Y 5M 14D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC C/O	2130
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name

Result

Reference Range

Lipid profile

Serum Cholesterol	175 mg/dl	up to 200 mg/dl
Serum HDL- Cholesterol	46 mg/dl	>35 mg/dl
Serum Triglyceride	159 mg/dl	upto 220 mg/dl
Serum LDL- Cholesterol	87 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.

Bill No	DIA24030737	Received Date	26/03/2024
Patient's Name	MOHAMMAD SHAHJAHAN		
Patient's Age	61Y 5M 14D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC C/O	2130
Sample	BLOOD		

SEROLOGICAL REPORT

Test Name
Result

HIV 1 & 2 (Method : (ICT)	Negative
HBsAg (Method : (ICT)	Negative
HCV (Method : (ICT)	Negative
HAV (Method : (ICT)	Negative
Malaria Parasite (ICT)	Negative
VDRL	Non-reactive
Hepatitis A(IgG + IgM)	Negative

BLOOD GROUPING Result

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

Checked By

Medical Technologist,
Radical Hospital Ltd.

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

Bill No	DIA24030737	Received Date	26/03/2024
Patient's Name	MOHAMMAD SHAHJAHAN		
Patient's Age	61Y 5M 14D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS, (DU), CCD(BIRDEM), PGT(Eye), DFM	CDC C/O	2130
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromatographic 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.

Bill No	DIA24030737	Received Date	26/03/2024
Patient's Name	MOHAMMAD SHAHJAHAN		
Patient's Age	61Y 5M 14D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC C/O	2130
Sample	URINE		

URINE ROUTINE EXAMINATION**PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION**

Quantity	Sufficient	CELLS / HPF	
Color	Straw	RBC	Nil
Appearance	Clear	Pus Cells	0-1/HPF
Sediment	Nil	Epithelial	1-2/HPF

CHEMICAL EXAMINATION CASTS / LPF

Reaction	Acidic	RBC	Nil
Albumin	Nil	WBC	Nil
Sugar	Nil	Epithelial	Nil
Ex.Phosphate	Nil	Granular	Nil
		Hyaline	Nil

ON REQUESTCRYSTALS & OTHERS

Bile Salt	Not Done	Urates	Nil
Bile Pigment	Not Done	Uric Acid	Nil
Ketones	Not Done	Calcium oxalate	Nil
Urobilinogen	Not Done	Amor. Phos	Nil
B.J. Protein	Not Done	Hippurate crystal	Nil

Checked By


Medical Technologist.
Radical Hospital Ltd.


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

AUDIOLOGICAL REPORT

Patient Name : MOHAMMAD SHAHJAHAN

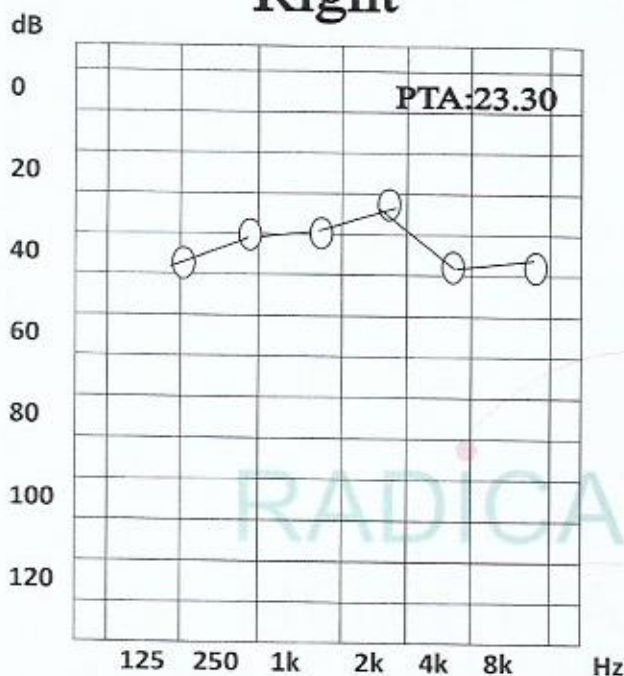
26/03/2024

Age : 61 Yrs

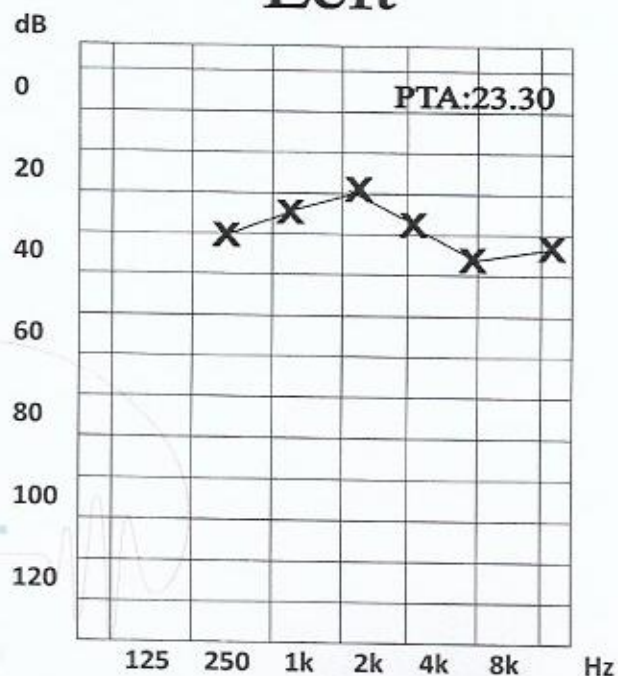
s Address : RHL, UTTARA

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		
Air Masking OX		
Bone Masking ΔΔ		

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.



Patient's Name	:	MOHAMMAD SHAHJAHAN	ID NO	:	24030737
Age	:	61 Yrs	Date	:	26/03/2024
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 (ophth)
Reg- A55144 BGD-016(MMC)
DG Shipping Bangladesh Approved
Malaysian Medical Council Approved
General Physician
Radical Hospitals Limited

Patient's Name	: MOHAMMAD SHAHJAHAN	Date	: 26/03/2024
Age	: 61 Yrs	CDC NO:	C/O/2130
Sex	: Male		
Referred by	: Dr. Mir Md. Raihan - MBBS, (DU), DFM		

Psychometric Test

Test Name	Remarks
1.APTITUDE TEST	
Numerical Reasoning test	Poor /Good /very good /excellent
Verbal Reasoning test	Poor /Good /very good /excellent
Inductive reasoning test	Poor /Good /very good /excellent
Diagrammatic Reasoning test	Poor /Good /very good /excellent
Logical Reasoning test.	Poor /Good /very good /excellent
Error checking test	Poor /Good /very good /excellent
2.Skill Test	Poor /Good /very good /excellent
3.Personality Test	INFJ / ENFJ / ISFJ / ENTP/ ESFJ/ESFP
4.Watson Glaser test(Critical Thinking Test)	
Arguments	Poor /Good /very good /excellent
Assumptions	Poor /Good /very good /excellent
Deductions	Poor /Good /very good /excellent
Interpreting Information's	Poor /Good /very good /excellent
Inferences	Poor /Good /very good /excellent
5.Situational Judgment Test.	Poor /Good /very good /excellent
Poor: <6 Good: 6-7 very good: 7-8 excellent: 8-10	

COMMENTS: HE IS MENTALLY FIT FOR SHIP JOB



Dr. Mir Md. Raihan

MBBS (DU), DFM, CCD (Birdem), PGT (ophth)

Reg- A55144 BGD-016(MMC)

DG Shipping Bangladesh Approved

Malaysian Medical Council Approved

General Physician

Radical Hospitals Limited

Patient ID	24030737	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	26/03/2024
Patient Name	MOHAMMAD SHAHJAHAN		
Age	61 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 normal in size 13.5cm, regular in shape and normal position. The echogenicity of the parenchyma is normal. Intrahepatic biliary channel are not dilated. No focal lesion is seen.

GALL BLADDER : Contracted (postprandial) , Visible lumen appears clear.

PANCREAS :- Normal size regular in shape. Echogenicity is homogenous. PD not dilated.

SPLEEN :- Is normal in size (9.6X2.8)cm and uniform in echo-texture.

BOTH KIDNEYS :- Are normal in size RK-10.0cm, LK-10.9cm 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: Enlarged in size volume is 35.9cc ,regular in shape. Echogenicity is homogenous.
No area of calcification is seen.

IMPRESSION: Enlarged prostate gland.

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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24030737 Receive: Print: 26/03/2024
Patient's Name : MOHAMMAD SHAHJAHAN
Age : 61 YRS Sex : M
Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 62 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

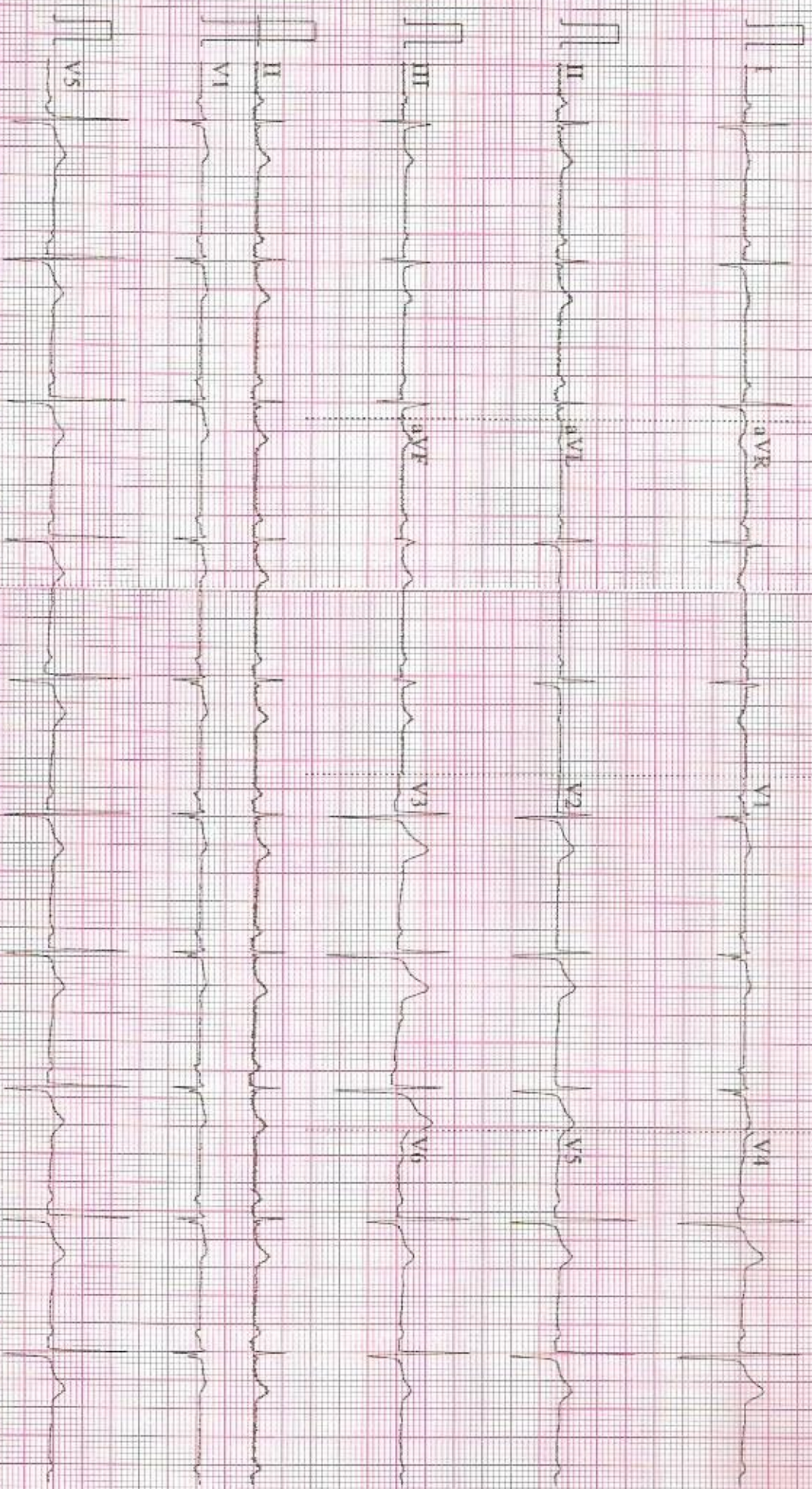
Page 1 of 1

Mr. 24020528
 Mr. 24020528
 62 years

HR	62	bpm
P	106	ms
PR	168	ms
QRS	84	ms
QT/QTc	392/398	ms
PQRST	45/41/65	ms
RV5/SV1	1.36/0.45	mV

Diagnosis Information:
 Sinus rhythm
 Normal ECG

Report Confirmed by:



0.67 100Hz AC 50 7.5mm/s 10mm/mV 4*2.5s+3r W62 SE-1200Express V2.21 Glasgow V2.8.6.0 Radical Hospital

Patient's Name	:	MOHAMMAD SHAHJAHAN	ID NO	:	24030737
Age	:	61 Yrs	Date	:	26/03/2024
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

Date: 26/03/2024

EYE EXAMINATION REPORT

NAME:	MOHAMMAD SHAHJAHAN		
AGE:	61 YRS	RANK: CH.ENG	CDC NO:C/O/2130

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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 24030737 Receive: 26/03/2024 Print: 26/03/2024
Patient's Name : **MOHAMMAD SHAHJAHAN**
Age : 61 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.

Page of 1

IBN SINA DIAGNOSTIC & CONSULTATION CENTER, UTTARA

ISO 9001:2015 Certified

TREADMILL STRESS TEST



I.D. No	: U122953	Received date	: 26 Mar 2024	Printed date	: 26 Mar 2024 09:13PM
Name of Pt.	: MOHAMMAD SHAHJAHAN	Age	: 61 y(s)	Sex	: Male
Ref. By	: RADICAL HOSPITAL LTD				
Ref. By	: ETT				

Total Exercise Time : 09:20 Min

% of max. pred. HR : 84 %

Maximum BP : 140/90 mmhg.

Indication : Screening for IHD.

Risk Factors : Nil.

Reason for Termina. : Attainment of THR.

Test Profile : BRUCE

Symptoms : Nil.

Max.HR attained : 134 Bpm.

Max. Pred HR : 159 Bpm.

Max. work load attained : 11.20 METS

Summary Result ⇒ **NEGATIVE**

Comments:

- ☐ MOHAMMAD SHAHJAHAN 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 provokable myocardial ischaemia.

Dr. Md. Aminur Razzaque

MBBS. MD (Cardiology) NICVD,

Assistant Professor (Cardiology), NICVD

Advance training on Echocardiography JROP (India)

Consultant, IBN SINA D.Lab & Consultation center, Uttara.

Prepared By: Tahmina

MOHAMMAD SHAHJAHAN

Patient ID: U122953

26.03.2024

8:50:08pm

12-LEAD REPORT

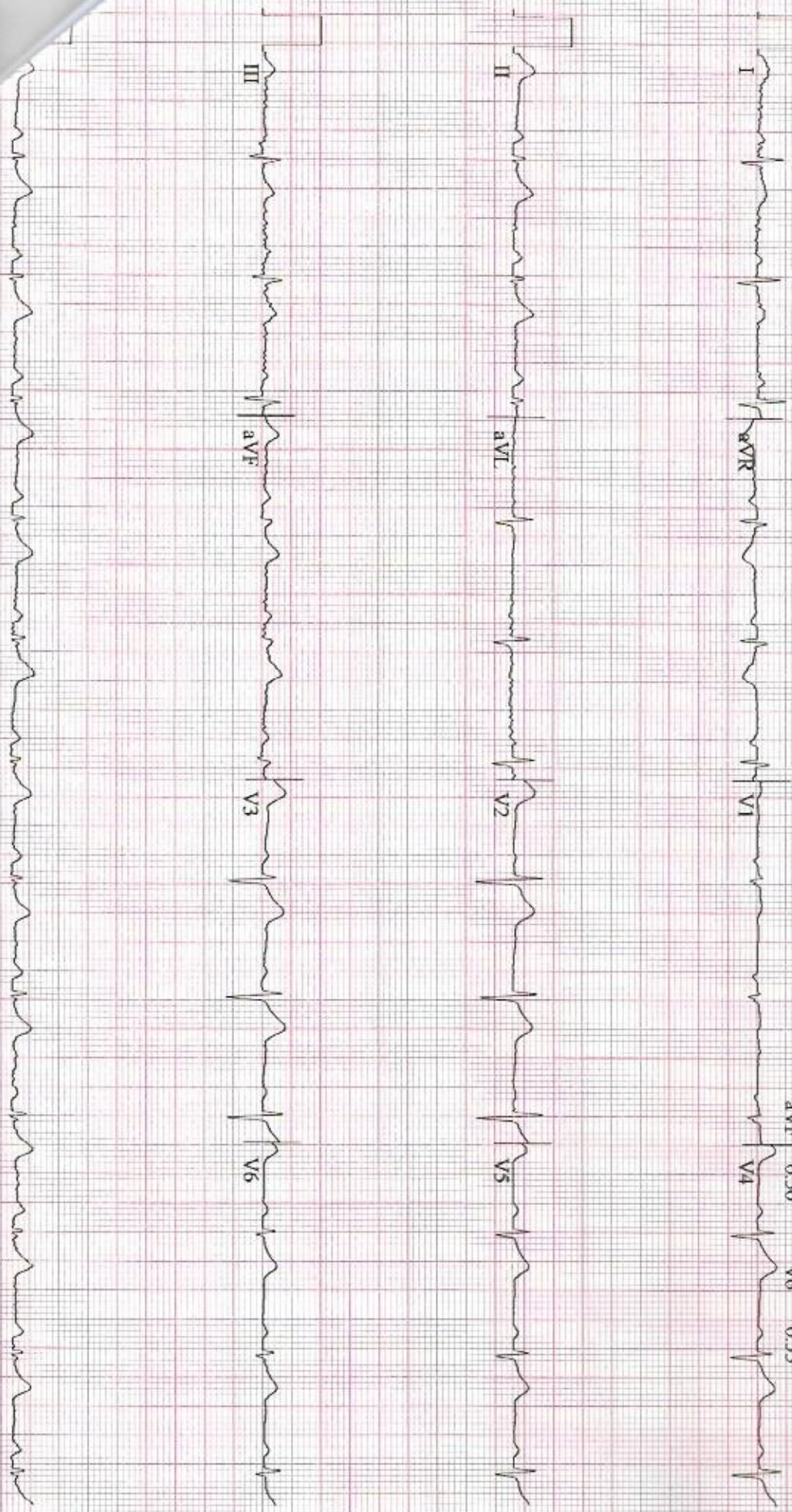
71 bpm
120/80 mmHg

PRETEST
SUPINE
00:08

BRUCE
0.0 mph
0.0 %

Ibn Sina Diagnostic Center Ullora
Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.40	V1	0.35
II	0.75	V2	1.30
III	0.30	V3	1.20
aVR	-0.55	V4	0.90
aVL	0.05	V5	0.70
aVF	0.50	V6	0.55



25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S_E HR(V2,V3)

Start of Test: 8:49:59pm

REF:2104758-001

CE

ECHO-CARDIOGRAPHY REPORT

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



I.D. No	:	U122953	Received date	:	26 Mar 2024	Printed date	:	26 Mar 2024 08:05PM
Name of Pt.	:	MOHAMMAD SHAHJAHAN	Age	:	61 y(s)	Sex	:	Male
Exam	:	ECHO 2D						
Ref. By	:	RADICAL HOSPITAL LTD						

PROCEDURES: 2D & M-MODE STUDY

Measurement:

AOD	:	33	mm	20-37 mm	LVIDd	:	41	mm	37-56 mm
LAD	:	33	mm	19-40 mm	LVIDs	:	26	mm	22-40 mm
ACS	:	17	mm	15-26 mm	FS	:	38	%	
RVIDd	:		mm	<30	LVEF	:	68	%	
IVSd	:	09	mm	06-11mm	MPA	:			
LVPWd	:	09	mm	06-11mm	MV area	:			>3 cm ²
TAPSE	:	22	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 – 68%).
- Normal cavity dimension.
- Normal valve morphology.

Handwritten signature

Dr. Khurshed Ahmed

MBBS, FCPS (Med), MD (Cardiology)
 Associate Professor, Department of Cardiology
 Bangabandhu Sheikh Mujib Medical University, Dhaka
 Consultant
 IBN SINA D-Lab, Uttara, Dhaka

IBN SINA DIAGNOSTIC & CONSULTATION CENTRE. Uttara, Dhaka.

Name: **MOHAMMAD SHAJAHAN 61YR,**
Date: **26/03/2024**

Patient Id: **UE122953**
Gender:

