



HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaidanga, Agrabad C/A, Chattogram, Bangladesh.
Tel : +880 31 716214-6, Fax : +880 31 710530



Accredited By : BMD
Accreditation No. A 55144

PATIENT CONTROL NUMBER:
HS5066FF

MEDICAL EXAMINATION CERTIFICATE

SURNAME RAHMAN	FIRST NAME MD MOSHUR	MIDDLE NAME
PLACE AND DATE OF BIRTH BARISAL 12-Oct-1985	PASSPORT NUMBER B00233477	SEAMAN'S BOOK NUMBER CO5066
NATIONALITY : BANGLADESHI SEX : ☒ Male ☐ Female	VESSEL TYPE : CHEM/OIL TANKER	TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : VILL-CHARKHAGKATA, PO-CHANPUR, PS-MEHENDIGANJ, DIST-BARISAL, BANGLADESH.		CONTACT NUMBER : 01687150659 (SELF)
		RANK : CHIEF OFFICER

Have you ever had any of the following conditions?

Condition	YES	NO	Condition	YES	NO
1 Eye/vision problem	☐	☒	18 Sleep problems	☐	☒
2 High blood pressure	☐	☒	19 Do you smoke?	☐	☒
3 Heart/vascular disease	☐	☒	20 Operation/surgery	☐	☒
4 Heart surgery	☐	☒	21 Epilepsy/seizures	☐	☒
5 Varicose veins	☐	☒	22 Dizziness/fainting	☐	☒
6 Asthma/bronchitis	☐	☒	23 Loss of consciousness	☐	☒
7 Blood disorder	☐	☒	24 Psychiatric problems	☐	☒
8 Diabetes	☐	☒	25 Depression	☐	☒
9 Thyroid problem	☐	☒	26 Attempted suicide	☐	☒
10 Digestive disorder	☐	☒	27 Loss of memory	☐	☒
11 Kidney problem	☐	☒	28 Balance problem	☐	☒
12 Skin problem	☐	☒	29 Severe headaches	☐	☒
13 Allergies	☐	☒	30 Ear/nose/throat problems	☐	☒
14 Infectious/contagious diseases	☐	☒	31 Restricted mobility	☐	☒
15 Hernia	☐	☒	32 Back problems	☐	☒
16 Genital disorders	☐	☒	33 Amputation	☐	☒
17 Pregnancy	☐	☒	34 Fractures/dislocations	☐	☒

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

Additional questions

Question	YES	NO
35 Have you ever been signed off as sick or repatriated from a ship?	☐	☒
36 Have you ever been hospitalised?	☐	☒
37 Have you ever been declared unfit for sea duty?	☐	☒
38 Has your medical certificate ever been restricted or revoked?	☐	☒
39 Are you aware that you have any medical problems, diseases or illnesses?	☐	☒
40 Do you feel healthy and fit to perform the duties of your designated position/occupation?	☒	☐
41 Are you allergic to any medications?	☐	☒

Comments:

FIT FOR DUTY ON BOARD SHIP

42 Are you taking any non-prescription or prescription medications?	☐	☒
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If yes, please list the medications taken and the purpose(s) and dosage(s)

I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to Dr. Mir Md. Raihan (approved medical practitioner) I also certify that my history contained above is true and any false statement will disqualify me from my employment, benefits and claims.

Md Moshur Rahman
Signature of Seafarer

MEDICAL EXAMINATION

Weight 72 kg	Height (cm) 168	BM 25.35	Blood Pressure: Systolic 120 mm Diastolic 80 mm	PULSE: 78 bpm
Ear	Hearing by Audiometry	Audiometry		Hearing by Whisper Test
Right	☐ Adequate ☐ Inadequate	500	1000	☐ Adequate ☐ Inadequate
Left	☐ Adequate ☐ Inadequate			☐ Adequate ☐ Inadequate
Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☒ NO ☐				

	Visual acuity			
	Unaided		Aided	
	Right eye	Left eye	Right eye	Left eye
Distant	6/6	6/6		
Near				

Visual acuity meets the standard laid down in STCW Code Section A-1/9

Colour vision as per STCW CODE Section A-1/9:

☒ Normal☐ Doubtful☐ DefectiveDate of last colour vision test: Date (day/month/year) **17 APR 2023**

	Visual fields	
	Normal	Defective
	☒	☐
Right eye	☒	☐
Left eye	☒	☐

YES / NO

☐ Doubtful☐ Defective

	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	☒	☐

RESULTS OF ANCILLARY EXAMINATIONS

Chest X-Ray	NAD	BIO CHEMICAL (LIVER FUNCTION TEST)				Marijuana	☐ Positive	☒ Negative
ECG	NAD	BILIRUBIN	0.8		Alcohol Test	☐ Positive	☒ Negative	
BLOOD R/E		SGPT	29		URINE R/E	NAD		
DC(differential count)	NAD	SGOT	22		OTHERS			
HAEMOGLOBIN (HGB)	13.5	DRUG AND ALCOHOL TEST				HBsAg	☐ Reactive	☒ Nonreactive
ESR (WESTERGREN)	9.6	Morphine	☐ Positive	☒ Negative	HIV / AIDS Test	☐ Reactive	☒ Nonreactive	
WBC	4.100	Amphetamine	☐ Positive	☒ Negative	VDRL	☐ Reactive	☒ Nonreactive	
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive	☒ Negative	Blood Type	ADHIE		
RANDOM	5.8	Barbiturates	☐ Positive	☒ Negative	Psychological Exam	NAD		
HBA1C	5.5%	Cocaine	☐ Positive	☒ Negative	Others(KUB Ultraso	ADHIE		

Hereby I declare that I am in knowledge of the contents of the Physical examinations:

Md Moshur Rahman

Signature of Seafarer

MD MOSHUR RAHMAN

Name of Seafarer

17 APR 2023

Date

Assessment of fitness for service at sea:

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



Fit for lookout duties



Not fit for lookout duties

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



Without restrictions



With restrictions

Is the Seafarer free from any medical conditions likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?

Yes ☒No ☐

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

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

Fitness Date:

17 APR 2023

Valid Until:

16 APR 2025

Name and Signature of Authorized Physician

DR. MIR. MD. RAHMAN

In Accordance with Medical Examination of Seafarers Convention 1995 (Annex 1) and STCW 1978/1996 as Amended, MLC 2006

PHYSICAL EXAMINATION REPORT/CERTIFICATE

DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

THE REPUBLIC OF LIBERIA

LAST NAME OF APPLICANT RAHMAN			FIRST NAME MD MOSHUR			MIDDLE INITIAL		
DATE OF BIRTH			PLACE OF BIRTH			SEX		
MONTH OCT	DAY 12	YEAR 1985	CITY: BARISAL			MALE ☒ FEMALE ☐		
COUNTRY: BANGLADESH			MAILING ADDRESS OF APPLICANT:					
EXAMINATION FOR DUTY AS:			VILL-CHARKHAGKATA, PO-CHANPUR, PS-MEHENDIGANJ, DIST-BARISAL, BANGLADESH.					
MASTER ☐ RATING ☐ MATE ☐ MOU DECK ☒ ENGINEER ☐ MOU ENGINE ☐ RADIO OFF ☐ SUPERNUMERARY ☐								

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

HEIGHT 168cm	WEIGHT 72kg	BLOOD PRESSURE 120/80mm	PULSE 78b/min	RESPIRATION 19 b/min	GENERAL APPEARANCE Good
VISION:		RIGHT EYE 6/6 LEFT EYE 6/6 WITHOUT GLASSES WITH GLASSES			
DATE OF LAST COLOR VISION TEST (Month/Day/Year)		17 APR 2023 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 Nonm		LEFT EAR Nonm			
HEAD AND NECK Nonm			HEART (CARDIOVASCULAR) Nonm		
LUNGS Nonm			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? ☒		
EXTREMITIES:					
UPPER Nonm		LOWER Nonm			
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					

Md Moshur Rahman
SIGNATURE OF APPLICANT

17 APR 2023

DATE OF EXAM

16 APR 2025

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 MOSHUR RAHMAN**

(NAME OF APPLICANT)

FIT FOR DUTY ON BOARD SHIP

(HE) (SHE) IS FOUND TO BE (FIT) (NOT FIT) FOR DUTY AS A (MASTER, MATE, ENGINEER, RADIO OFFICER, RATING, MOU DECK, MOU ENGINE or SUPERNUMERARY).

NAME AND DEGREE OF PHYSICIAN		DR. MIR MD, RAIHAN; M.B.B.S (D.U), REG.NO.A-55144	
ADDRESS		REDICAL HOSPITALS LIMITED, 35, SHAH MAKHDUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230, BANGLADESH	
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY		DG SHIPPING BANGLADESH	
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE		06-05-2014	
SIGNATURE OF PHYSICIAN		DATE OF EXAMINATION: 17 APR 2023	

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.

RLM-105M (REV. 06/16)

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



MEDICAL 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 seaman, 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, 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. completed physical examination
2. Radiological
3. Pathological
4. Eye examination for cataract.

RLM-105M (REV. 06/16)
17 APR 2023



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

Id No : 0443 **Date** : 17-Apr-2023 **D.Date** : 17-Apr-2023
Patient's Name : MD MOSHUR RAHMAN **Age** : 37Y 6M 5D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/5066

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	13.5 gm/dl	M:13-18 gm/dl, F:11.5-16.5 gm/dl. Child:10-13 gm/dl.
ESR(Westergreen)	06 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	4,400 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	61 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	35 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	88 /cumm	50-450/cumm
Total RBC Count	4.28 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	36.9 %	M: 40-54%, F:37-47%
MCV	86.2 fL	76 - 94 fL
MCH	31.5 pg	27 - 32 pg
MCHC	36.6 g/dL	29 - 34 g/dL
RDW	12.2 %	11 - 16 %
PDW	14.3 fL	35 - 56 fL
Total Platelete Count (PC)	1,89,000 /cumm	150,000-450,000/cumm
MPV	10.0 fL	7.0 - 11.0 fL
PCT	0.149 %	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	DIA23040443	Received Date	17/04/2023
Patient's Name	MD MOSHUR RAHMAN		
Patient's Age	37Y 6M 5D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS, (DU), CCD(BIRDEM), PGT(Eye), DFM		CDC NO: C/O/5066
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.8 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.8 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	29 U/L	Up to 37 U/L
Serum ALT (SGPT)	21 U/L	Up to 40 U/L
HbA1C	5.5 %	4.2 - 6.7 %

REMARKS (IF ANY)

IN VIEW OF THE LIVER FUNCTION TEST RESULT, HIS BLOOD IS FREE FROM TOXIC EFFECT OF CHEMICALS.

Checked By

Medical Technologis
Radical Hospitals Ltd.

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

Bill No	DIA23040443	Received Date	17/04/2023
Patient's Name	MD MOSHUR RAHMAN		
Patient's Age	37Y 6M 5D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/5066
Sample	BLOOD		

SEROLOGICAL REPORT

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

BLOOD GROUPING Result

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

Checked By

Medical Technologist
Radical Hospitals Ltd.

Dr. Sumaiya Khatun
MBBS, MD (Microbiology)
Associate Professor
Dept. of Microbiology

East West Medical College and Hospital

Bill No	DIA23040443	Received Date	17/04/2023
Patient's Name	MD MOSHUR RAHMAN		
Patient's Age	37Y 6M 5D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/5066
Sample	URINE		

URINE ROUTINE EXAMINATION**PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION**

Quantity	Sufficient	CELLS / HPF	
Color	Straw	R B C	Nil
Appearance	Clear	Pus Cells	2-3/HPF
Sediment	Nil	Epithelial	0-1/HPF

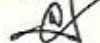
CHEMICAL EXAMINATIONCASTS / LPF

Reaction	Acidic	R B C	Nil
Albumin	NIL	W B C	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 Technologis
 Radical Hospitals Ltd.


 Dr. Sumaiya Khatun
 MBBS, MD (Microbiology)
 Associate Professor
 Dept. of Microbiology

East West Medical College and Hospital

Bill No	DIA23040443	Received Date	17/04/2023
Patient's Name	MD MOSHUR RAHMAN		
Patient's Age	37Y 6M 5D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS, (DU), CCD(BIRDEM), PGT(Eye), DFM		CDC NO: C/O/5066
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 Technologis
Radical Hospitals Ltd.

Dr. Sumaiya Khatun
MBBS, MD (Microbiology)
Associate Professor
Dept. of Microbiology

East West Medical College and Hospital

REF:

DATE: 17/04/2023

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

EYE EXAMINATION REPORT

NAME: MD MOSHUR RAHMAN

RANK: CH.OFF

CDC NO: C/O/5066

VISUAL ACUITY:

RIGHT

LEFT

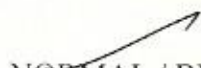
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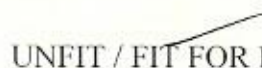
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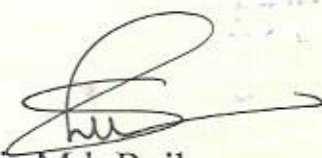
AIDED

COLOUR VISION:


 NORMAL / BLIND

OPINION


 UNFIT / FIT FOR EMPLOYMENT ON BOARD


 Dr. Mir Md. Raihan
 MBBS, PGT (Ophthalmology)
 Assistant Registrar (EX)
 East west Medical College & Hospital

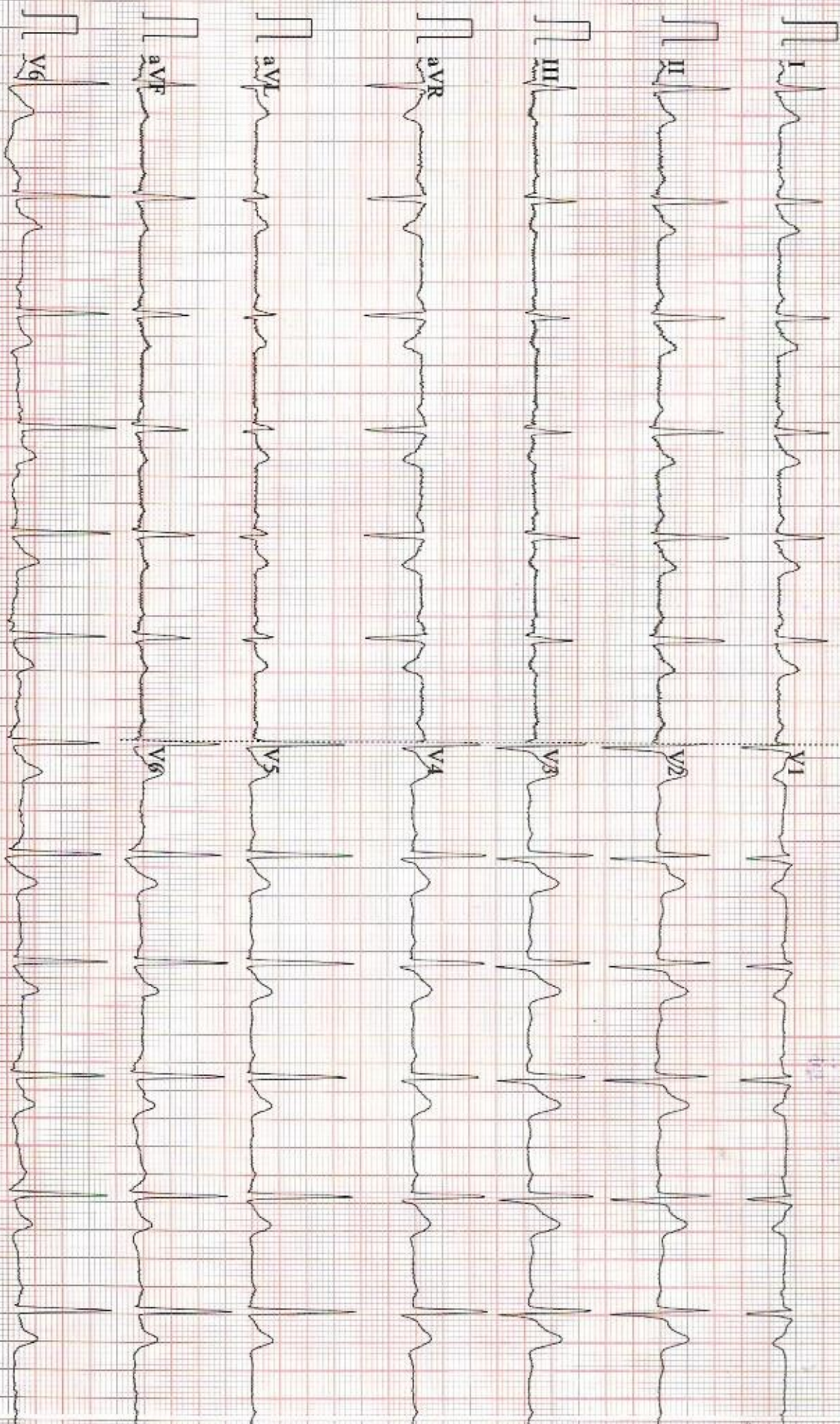
ID: 6
Mr. Moshir Rahman
Male 33 Years

17-04-2023 09:56:52 PM

HR	: 73	bpm
P	: 128	ms
PR	: 170	ms
QRS	: 106	ms
QT/QTc	: 352/388	ms
P/QRS/T	: 42/50/21	°
RV5/SVI	: 1.838/0.713	mV

Diagnosis Information:
Sinus rhythm
Normal ECG

Report Confirmed by:





DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	: 23040443	Receive: 17/04/2023	Print: 17/04/2023
Patient's Name	: MD MOSHUR RAHMAN		
Age	: 37 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.

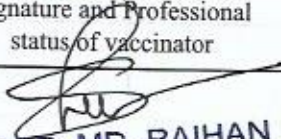
Comments : Normal chest skiagram.

Prof. Dr. Md. Mojibor Rahman
MBBS, DMRD (Radiology & Imaging)
Head of the Department (Radiology & Imaging)
Sylhet Women's Medical College Hospital

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION MD. MOSAHER AGAINST YELLOW-FEVER

This is to certify that RAHMAN } Date of birth 12.10.1985 Sex MALE
whose signature follows

Md Mosleh Rahman
has on the date indicated been vaccinated or revaccinated against yellow-fever

Date	Signature and Professional status of vaccinator	Origin and batch no. of vaccine	Official stamp of vaccination centre
1 17 APR 2023	 DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.		
2			
3			3 4
4			

This certificate is valid on only if the vaccine used has been approved by the World Health Organization and if the vaccinating centre has been designated by the health administration for the territory in which that centre is situated.

The validity of this certificate shall extend for a period of ten years, beginning ten days after date vaccination or in the extent of a revaccination within such period of ten years, from the date of that revaccination.

Any amendment of this certificate, or erasure, or failure to complete any part of it may render it invalid.

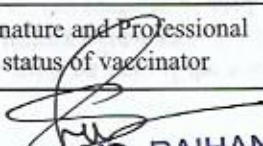
INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION

MD. MOSHUR RAHMAN AGAINST CHOLERA

This is to certify that
whose signature follows

Date of birth 12.10.1985 Sex MALE

Md Moshur Rahman
has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
17 APR 2023	 DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.	
2		

3		3	4
4			
5		5	6
6			
7		7	8
8			

Continued overleaf Suite our erso