

# HAQUE & SONS LTD.

Tel: +880-2-333316214-6, Fax: +880-2-333310530



Accredited By : BMDC

PATIENT CONTROL NUMBER:

H403

Revision Date: 24th July 2022

Accreditation No. A55144

## MEDICAL EXAMINATION CERTIFICATE

	C NO AS	FIRST NA		CAIEUD		MIDDLE NAM	ME	
PLACE AND DATE OF BIRTH		MD. SAIFUR PASSPORT NUMBER				SEAMAN'S BOOK NUMBER		
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	NT HOME ADDRESS :					CT NUMBER :		
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	,							
Have yo	ou ever had any of the following cor	nditions?						
•	Condition	YES	NO_	Conditi	on		YES	NO
1	Eye/vision problem		4	18 Sleep pi				19
2	High blood pressure		8	19 Do you				
3	Heart/vascular disease		9		on/surgery			G.
4	Heart surgery				/seizures			1
5	Varicose veins	П		0.000 TENOTETA	s/fainting			
6	Asthma/bronchitis			SUCCES 100 100 100 100 100 100 100 100 100 10	conscious		0	3
7	Blood disorder			TOTAL TANKS TOTAL			5756	507
8	Diabetes		<u></u>		tric proble	ms		3
9	Thyroid problem	D	5	25 Depress 26 Attempte				
10	Digestive disorder	0			ed suicide			<u>□</u>
11				27 Loss of				8
12	Kidney problem		<u></u>		problem			
	Skin problem	0.00		10003	neadache:	-		
13	Allergies		879797979	The second secon	e/throat p			
14	Infectious/contagious diseases				ed mobility			13-
15	Hernia		9	32 Back pro	blems			9
16	Genital disorders		F0.79900000	33 Amputat	ion			9
17	Pregnancy		app.	34 Fracture	s/dislocati	ions		4
36 37 38	Have you ever been signed off as Have you ever been hospitalised? Have you ever been declared unfi Has your medical certificate ever have you aware that you have any	t for sea duty been restricte	? ed or revoke	ed?				युर द प्रमृ
7.50	Do you feel healthy and fit to p				ition/non	notion?	40	
	Are you allergic to any medication		uties of yo	ur designated pos	auonvoccu	pations		
Commer	nte-				i			10
	FI	I FOR DU	ITY ON E	BOARD SHIP				
42	Are you taking any non-prescription	n or prescrip	tion medica	tions?	2			47
	ease list the medications taken and						-	
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	Una	ided	isual acuit		ded			1	visua	l fields	
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Pupils							C/S, T/S and				
Eye movement			E.				ogic (full brief	)			
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	OOD R/E		SGPT			10	2	URINE R/E		N	MD
DC(differential o		n	SGOT			5	2_		OTHERS		_
HAEMOGLOBIN		3.7		DRUG AN		LCOHOL T		HBsAg			Nonreactiv
ESR (WESTER	SREN)	~	Morphine		_	Positive 🗆	THE PERSON NAMED IN COLUMN 2 I	HIV / AIDS Test			Nonreactiv
WBC	10	300	Amphetan				Negative	VDRL	□ Rea	activ 🖵	Nonreactiv
	LUCOSE LE	2227	Phencyclic		_		Negative	Blood Type		B+(V	E)
RANDOM HBA1C		-	Barbiturate	es	_		Negative	Psychological Exar		M	200
HBATC	5.	8 /.	Cocaine		LJ	Positive	Negative	Others(KUB Ultras	0	NI	1
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## PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

LAST NAME OF APPLICANT  RAHMAN  DATE OF BIRTH  12 31 198  MONTH DAY YEA  EXAMINATION FOR DUTY AS:  MASTER RATING  MATE MOU DE		BANGLADESH COUNTRY MAILING ADDRESS OF	MIDDLE INITIAL SAIFUR SEX MALE FEMALE
DATE OF BIRTH  12 31 198  MONTH DAY YEA  EXAMINATION FOR DUTY AS:  MASTER RATING	PLACE OF BIRT NARSINGDI	BANGLADESH COUNTRY	SEX
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The same of the sa			TS) STATE DETAILS ON REVERSE SIDE
	pressure	7 8 Min RESPIRAT	GENERAL APPEARANCE
VISION: RIGHT EYE	LEFT EX	E	
WITHOUT GLASSES _ 6/6	, 6(1	0 _	
WITH GLASSES	1		
DATE OF LAST COLOR VISION TEST (N	fonth/Day/Year)	PR 2023 Testing	Required every 6 years
COLOR VISION MEETS STANDARDS IN	STCW CODE, TABLE	A-1/9? YES	NO 🗆
COLOR TEST TYPE: BOOK * LANTERN * CH	ECK IF COLOR TEST IS	NORMAL YELLOW M	My RED MAY GREEN MAY BLUE A
HEARING RT. EAR	m	LEFT YEAR	NM)
HEAD AND NECK		HEART (CARDIOVASCULAR	D
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IS APPLICANT SUFFERING FROM ANY OR LIKELY TO ENDANGER THE HEAL EXAMINATION ON PAGE 2.			O RENDER HIM UNFIT FOR SERVICE AT SEA LAIN IN DETAILS OF MEDICAL
Holano		3 0 APR 2023	2 9 APR 2025
SIGNATURE OF APPLICANT		DATE OF EXAM	EXPIRY DATE
THIS SIGNATURE SHO	JLD BE AFFIXED IN T	HE PRESENCE OF THE EXA	MINING PHYSICIAN.
THIS IS TO CERTIFY THAT A PHYSICAL			MD. SAIFUR RAHMAN
	T FOR DUTY ON		4E OF APPLICANT)
			ER, RADIO OFFICER, RATING, MOU DECK,
NAME AND DEGREE OF PHYSICIA	N DR. MIR MD	RAIHAN ; M.B.B.S (D.U)	), REG.NO.A-55144
ADDRESS REDICAL HOSPITAL	S LIMITED. 35, SH	AH MAKHDUM AVENU	E, SECTOR-12, UTTARA, DHAKA-1230,
NAME OF PHYSICIAN'S CERTIFICA	TING AUTHORITY	REGISTRATION NO.: DO	S SHIPPING, BANGLADESH
DATE OF ISSUE OF PHYSICIAN'S C	ERTIFICATE 6	-May-14	
SIGNATURE OF PHYSICIAN	f	- DATE OF E	XAMINATION: 3 0 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 Ex amination for those over 18 years of age and for no more than one (1) year for those under 18 years of age.

RLM-I05M (REV. 06/16) DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Onhth)
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 scafarer'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.
  - 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.
  - Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and (c) 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-1, 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. COMPLETE PHYSICAL EXA	The state of the s
2. PATHOLOGICAL EXAMINA	TION : A) Complete Blood Count., B) Blood Sugar Estimation,
	C) Serological Test(VDR) D) Hepatitis B Sarface Antegen Test (HbsAg),
	E) Urinlysis F) Drug Test G) Alcohol Test.
3. X - RAY EXR PA VIEW	12

4. E.C.G. TEST

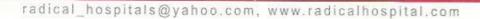
5. EYE EXAMINATION FOR V/A & C/V

3 0 APR 2023

RLM-105M (REV. 06/16)



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





Id No : 0710

Patient's Name: MD SAIFUR RAHMAN

Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/5306

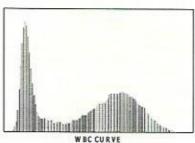
Date: 30-Apr-2023 D.Date: 30-Apr-2023 Age: 39Y 7M 7D

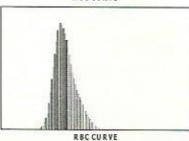
Gender: Male

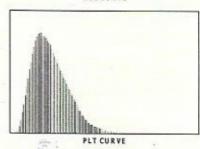
# Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	<b>13.7</b> gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl Child:10-13 gm/dl. Infant: (One year):8-10 gm/dl.
ESR(Westergreen)	<b>07</b> mm/1st hr	Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	<b>10,300</b> /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		7,555
Neutrophils	64 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	32 %	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	206 /cumm	50-450/cumm
Total RBC Count	4.70 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	37.9 %	M: 40-54%, F:37-47%
MCV	80.6 fL	76 - 94 fL
MCH	<b>29.1</b> pg	27 - 32 pg
MCHC	36.1 g/dL	29 - 34 g/dL
RDW	13.4 %	11 - 16 %
PDW	13.6 fL	35 - 56 fl
Total Platelete Count (PC)	3,01,000 /cumm	150,000-450,000/cumm
MPV	7.7 fL	7.0 - 11.0 fL
PCT	0.232 %	0.1 - 0.%
Bledding 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 Notical_hos	P DIA23040770 com, www.radicalhospital.c	Received Date	30/04/2023
Patient's Name	MD SAIFUR RAHMAN		
Patient's Age	39Y 7M 7D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM	),PGT(Eye),DFM	CDC NO:C/O/5306
Sample	BLOOD		

# BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	6.1 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.8 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	32 U/L	Up to 37 U/L
HbA1C	5.8 %	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



radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	IDA23040710	Received Date	30/04/2023
Patient's Name	MD SAIFUR RAHMAN		
Patient's Age	39Y 7M 7D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDE	M),PGT(Eye),DFM	CDC NO:C/O/5306
Sample	BLOOD		

# SEROLOGYCAL REPORT

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

OD GROUPINGResult	
ABO Blood Group	"B" (+ve)
Rh(D)Factor	Positive

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	DIA23040710	Received Date	30/04/2023
Patient's Name	MD SAIFUR RAHMAN		
Patient's Age	39Y 7M 7D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(I	BIRDEM),PGT(Eye),DFM	CDC NO:C/O/5306
Sample	urine		

#### URINE ROUTINE EXAMINATION

#### PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	2-3/HPF
Sediment	Nil	Epithelial	1-2/HPF

## CHEMICAL EXAMINATIONCASTS / 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 Technologis Radical Hospitals Ltd. Dr. Sumaiya Khatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital

RADICAL HOSPITAL

radical\_hospitals@yahoo.com, www.radicalhospital.com

REF: MV. FERRUM AUSTRALIS

DATE: 30/04/2023

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

# EYE EXAMINATION REPORT

NAME: M	SAIFUR RAHMAN		RANK: CH.OFF	CDC NO: C/O/5306
VISUAL AC	UITY:	RIGHT	LEF	Γ
* .		616	616	<b>.</b>
UNAIDED		0/8		

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

State of the state	July	H	. 70 bpm		Diagnosis	Information				
Male Years		Pi	: 114 ms		Sinus rhythm	Sinus rhythm				
JC No.		ORS OT	: 150 ms	ţ	Normal ECG	ECG				
		P/QRS/T RV5/SV1	: 394/426 ms : 54/36/34 ° : 2.770/1.042 mV	mV °			E I I I			
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# DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23040710 Receive:30/04/2023 Print: 30/04/2023

Patient's Name : MD SAIFUR RAHMAN

Age : 40 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 1 of 1

# INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA This is to certify that whose signature follows This is the certification of the certi

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved S	Stamp
I FEB TATE	DR. MTR. MD. RAIHAN M68S (DU). DPM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician Radical Hospitals Timited.	SS, Sheh Makhdum & Avenua Uttera, Ohaka	
30 404 000	DR. MIR. MD. RAIHAN MBBS (DU), DFM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bandladesh Approved General Pri, nician Radical Hospitals Limited.	Seor VACCINA Services	
3		3	4
4			No transfer and the
5		5	6 Service Process
6			
7		7	8
8			10

Continued overleaf Suite our erso

#### INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that

Date of birth 31-DEC-1982 Sex 2000 whose signature follows \ M. SHIFUR DAYMON

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
30 404 200	DR. MIR. MD. RAIHAN MBBS (DU), DFM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician Radical Hospitals Limited.	THEVER AND THE PROPERTY OF THE	St. Shah Makhdum Avenue Uttern, Chakn *
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This certificate is valid on only if the vaccine used has been approved by the World Health Organization and if the vaccinating centre has been designated by the health administration for the territory in which that centre is situated.

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

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