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			A TORRESTA VICTOR		100000000	PASSECTION.	TAL LIN	UTE	D				_		-
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TEL: +8802792	2011	6, +88 01	955	5670	00.	EM	AIL: rad	dical	ho	spita	5@v	ahoo d	om		
Name:	CH	OWDHUR	Y/70	WEH	2/1	400	HED	Sex: /	M		al No:	uoo	70111		1
Sumarre Date of Birth:	01,	021 19	82		/CDC	Middle	COLA	19	•		ank:	2/1	2		
Vessel: χ - ρ	RESI	IRRAWA	DDY)	Туре	:	CONTA	NED			loute:	-2/2	_		
Home Address:	3	2, TONU	401	J	LAN	Æ,	SUTER	PUR,	K	ATH	ERPL	IL, D	HAKA	1 -/	100
Company Name :	EH	STAWAY		SHIP	PIN	16	LTD								
Medical History			F	Please	answ	er th	e followin	g to ti	he be	est of y	our kno	wledge.	2 1		1-1
Is there any past / pre the foll		story of any of	Deck	didate aration	Re	miner cord						Candida Declarat		1000000000	miner cord
Severe one-sided headaches (Migraine)		Yes	No	Yes	No	Hemia / Hyd	mcoele /	Annen	dicitis		Yes	No	Yes	No
Head Injury / Concussion / Lo Fits / Epilepsy / Dizziness / Fa	oss of Mer ainting	mmory		5		5	High / Low b	lood pres	ssure /	Heart dise	ase		-		5
Eye / Vision Problems (Glasse Hearing Impairment				-		-	Allergy / Skir	i disease					-	0 7	5
Ear / Nose / Throat problems Stomach / Bowel disorders						-	Infection / C Addicition to	alcohol /	/ drugs	/ tobacco			-		-
Gall stones / Kidney disorders	S			-		-	Fracture / Di Major / Mino	slocation	/ Injur	y / Amput	ition		5		
Jaundice / Liver Disease Piles / Varicose veins				4			Diabetes Nervous / Me			leep dison	ler		-		
Biood Disorder Female Disorder				3		5	Mallignant d Signed off or	sease (C	Cancer)				-		- 0
Notes Medical Examinat	ion			ZERON.			Torgrad on O	· medical	groun	GST (ACCIDI	ed Office				
Height Weight		Chest Insp-Exp	Blood	Pressure	in mm	ol Hg	PulseBea	ets / pain	I R	esp.Rate/	min T	Gene	eral Cond	ition	ar promote
172em 81	19.	43-91	13	3 0/80	37		78	8/2		193	1~1	CCIT	Cu	1	1,
Distant Vision Unco	rected	Corrected	Fic	eld of Vis	sion		Audiometr Right Ear		500	1000	2000 30	00 4000	5000	6000	,8000
Left Eye Ishihara	7	Normal		Abnorma			Left Ear	dB dB	W	2	2			-	No.
Other Other		Normal			ormal		Hearing			Right Ea			Left	ear	
Systemic Examina Head & Neck	ation	Normal Abnorm	al			No	otes						Norma	d Abn	ormal
Eyes Ears / Nose / Throat				IT F	OR	SEA	SERV	ICE		Respirator Cardiovas	cular syste	m		-	7
Teeth / Oral Cavity			$\exists I$	AS				A SPECIAL PROPERTY.		Per Abdon Genito-uri		m	-		
Musculo-Skeletal system Nervous system			100	-	ERI	VILC	2006			Others Hemia / H	vdrocoele	12-	-		
Reflexes Skin		2					Medicals	done	9	Varicose V Fissure/Fis	eins		-		-
Investigations											coray i sicus				
Blood Hemoglobin	14	Result	14-	No 16 gm %	rmal		Urine	2	0	$ \sim $			SHI		
Total WBC count Neu 66 % Lymp	9.	200 cu.mm % Eos 02	400	00-11000	/ cu.mr		Specific Grav	ity	0		1	. (-	
Malarial parasite ESR		NOT F	oon	2		2 70	Albumin			J.U.		A	-	-	
SGPT	NIE	mm / 1st ho	9	15 mm / 43 U / L			Sugar Bile pigment			10	-	V	25	-	
S.Cholesterol S.Triglycerides	NIE	mg/dl		260 mg to 200 mg			Bile salts Occult blood				7	9	-	1	
Blood Sugar HbsAg	RBS	E HOUS	upti	o 125 mg	%		RBC cells Leucocytes		_	51			NAME OF THE OWNER, OWNE		
HIV [& I] VDRL	1	verace	200				Others		-				1		
Others Blood Group				G	GTP U	L	Spirome	try:	7/	W)	AIR)	ID FOR			
ECG: Non	77	TMT:	r	AIL)	-	Drugs of Abuse:	N	eo	Jehn	SR	OLDY 7.5			
X-Ray Chest:		-	nw	1	-		USG:	N	2	no 1	-	LID /3	-		1 5 7 10
Result of Medical	Exam		1(10	-			osa.	10	0 1/1	100	11.0	O. N.S.		-	-
On the basis of the exami	nee's his	tory, clinical exam				c tests,	I,Dr. 1	MIR MD	Raiha	n , here	by declar	e the exami	nee me	dically.	21-7
Fit Unfit Remarks /	Temp	orarily unfit	Pern	nanently	unfit	5	Should be re-	examine	ed in	(lays / we	eks / mont	hs.)	
Recommendations	Matheat	cortifu that all info	mation -	non-isand -			F0 5 - 1 M 5 -					1	5		100
I, Doctor's Name: DR.MIR MO This certificate is valid	till:	12 AUG	7075	equired u	ever An	i iexure	E & F Of M.S. (medical E	xamin	ation) Rule	s 2000 is	Comprated	un this C	ertificate	
Candidate's Signature	14/19	W				Officia	al Stamp				DP E	octor's sign	nature:	A 11 1	K 6.1
Date: /3/08/2	012				-11	000					MBBS (DU	MIR. M). DFM. CCD	(Birdom)	PGT /O	nlytin)
	/			1	jealir	(USP)	36				RIMIDIC	A-55144, n.ng Rang	MMC-l	BGD-0	116
13 AUG 2023				14	620	ekter o	nog 2					General P dical Hosp	hysicia	n	
220 20 2000				*Appro	Hone:	-WLU-Z	WP) (S)								
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														177.000	AND DESCRIPTION



MARITIME AND PORT AUTHORITY OF SINGAPORE

SEAFARER'S MEDICAL CERTIFICATE

This certificate is issued by the undersigned recognized medical practitioner to the named seafarer on behalf of the Maritime and Port Authority of Singapore and meets both the requirements of the International Convention on Standards of Trainings, Certification and Watchkeeping for Seafarers, 1978, as amended (STCW Convention) and the Maritime Labour Convention, 2006.

Seafarer's Name :(Last, first, mid	Idle) CHOWDHURY, TOWFIE, N	HORSHED	Gender: C
Date of Birth: (Day/month/year)	Nationality: BANGLADESHI	Place of Birth:	- SANG LADESH

Declaration of the recognized medical practitioner:

		Yes	No
1	Identification documents were checked at the point of examination?	/	-+ t
2	Hearing meets the standards in STCW Code Section A-I/9?		U III
3	Unaided hearing satisfactory?	4	
4	Visual acuity meets the standards in STCW Code Section A-I/9?		15
5	Colour vision meets the standards in STCW Code Section A-I/9?	-	tle*
	Date of last colour vision test: 13 AUG 2023		
6	Fit for look-out duty?		-
7	Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or endanger the life of person onboard?	-	100
8	No limitations or restrictions on fitness?		
	If "no" specify limitations or-restrictions		710
		ur se	
9	Date of examination: (day/month/year) 13 AUG 2023		Jie"
10	Expiry of certificate: (day/month/year) ** Maximum two years from date of examination unless the seafarer is under the age of 18	2025	100

13 AUG 2023

Date

Signature of Authorised Medical Practitioner DR. MIR. MD. RAIHAN MBBS (DU), DFM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved

DG Shipp ng Bangladesh Approved General Physician Radical Hospitals Limited

Medical Practitioner's Official stamp (name, licence number, address etc)

I have been informed of the content of the certificate and of the right to a review.

Signature of Seafarer







MARITIME AND PORT AUTHORITY OF SINGAPORE SHIPPING DIVISION



RECORD OF MEDICAL EXAMINATIONS OF SEAFARER

Part A - to be completed by the Seafarer who is responsible for answering each question accurately

Seafarer's Name :(Last, first, middle) CHON (BLOCK CAPITALS)	VOHURY /TOWFIR/ M	loesite)	Gender: Male/Female*
Date of Birth: day/month/year	Place of Birth:	Nationality:	BANGLADESHI &
*Type of ID documents: NRIC No. for Singaporeans and PRs (e.g. SXXXX567A) / Passport No. for Foreigners:	Dept: Deck / Engine / C Rank:	atering / others	Type of ship:
Home Address: 31, TONUhONJ LANE, SUTRAPUR, DIHATA -1100	Routine and emergency	/ duties:	Trading area: e.g. coastal / worldwide

Seafarer's Declarations (please tick)

Have you ever had any of the following conditions?

14	Yes	No		Yes	No
Eye/vision problem			18. Sleep problem	1	-
High blood pressure		-	19. Do you smoke, use alcohol or drugs?		-
Heart/vascular disease		U	20. Operation/surgery	+ - 6	-
Heart Surgery		-	21. Epilesy/seizures		-
Varicose veins/piles		J	22. Dizziness/fainting		U
Asthma/bronchitis		U	23. Loss of consciousness	1	-
7. Blood disorder		_	24. Psychiatric problems		U
8. Diabetes			25. Depression	1	-
Thyroid problem			26. Attempted suicide		-
10. Digestive disorder		_	27. Loss of memory	1	No
11. Kidney problem		_	28. Balance problem		
12. Skin Problem		V	29. Severe headaches		
13. Allergies			30. Ear(hearing, tinnitus/nose/throat problem	-	
14. Infectious / contagious diseases		ン ク	31. Restricted mobility		
15. Hernia			32. Back or joint problem	_	-
16. Genital disorder		/	33. Amputation		-
17. Pregnancy	N	13	34. Fracture/dislocations		-

If you answer "yes" to any of the above questions, please provide details:



For identity verification purpose

Additional questions	Yes	No
35. Have you ever been signed off as sick or repatriated from a ship?		-
36. Have you ever been hospitalized?	1	V
37. Have you ever been declared unfit for sea duty?	-	-
38. Has your medical certificate even been restricted or revoked?	The state of	
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?		1
41. Are you allergic to any medication?		
42. Are you using any non-prescription or prescription medication?		

If you answer "yes", please list the medications taken, the purpose(s) and the dosage:

I hereby declare that the personal declaration above is a true statement to the best of my knowledge.

13/08/2023

ite Signati

Signature of Seafarer

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

Name and Signature of Witness

I hereby authorize the release of all my previous medical records (including my last Seafarer Medical Certificate) from any health professional, health institutions and public authorities to

Dr. MIR MP. RHIHAN.

13 AUG 2023

Date

Signature of Southern

Signature of Seafarer

MR. 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.

Name and Signature of Witness



000000000000000000000000000000000000000						
resight se of glasses	s or contact len	ises				
No						
Yes	Гуре		F	urpose		
sual Acuity	,					
	Unaided			Tatilica - sa-li	Aided	
Right eye	Left eye	Binocular	Rig	ht eye	Left eye	Binocula
Distant	6/6	CIDO	Dis	tant		
Near	N5	N5	Ne	ar		
isual fields			Defe	ctive	1	
0200000	Norm	al	Dete	cuve		
Right eye					-	
Left eye					_	
learing		Normal		Doubtful	Det	ective
With deposit the line	ure tone and a	audiometry	(thresho	old values i	in dB)	ective
	500 Hz	audiometry 1,000 H	(thresho	old values i 2,000 Hz		ective
		1,000 H	(thresho	old values i	in dB)	ective
Pi	500 Hz	audiometry 1,000 H	(thresho	old values i 2,000 Hz	in dB)	ective
Right ear Left ear	500 Hz	1,000 H	(thresho	old values i	in dB)	ective
Right ear Left ear	500 Hz	1,000 H	(thresho	old values i	in dB)	ective
Right ear Left ear	500 Hz	1,000 H	(thresho	old values i	in dB) 3,000 Hz	ective
Right ear Left ear Speech and Right ear	500 Hz	1,000 H	(thresho	old values i	in dB) 3,000 Hz	ective
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Right ear Left ear Right ear Left ear Left ear	S00 Hz SW Whisper test	mudiometry 1,000 H 2 J (metres) ormal	(thresho	old values i	in dB) 3,000 Hz	ective
Right ear Left ear Right ear Left ear Left ear	whisper test	mudiometry 1,000 H 2 (metres) ormal (cm)	(thresho	weight	in dB) 3,000 Hz	
Right ear Left ear Right ear Left ear Left ear Left ear Height Pulse rate	whisper test N dings	mudiometry 1,000 H 2 (metres) ormal (cm) er minute)	7 8	Weight	in dB) 3,000 Hz hisper	Pegil
Right ear Left ear Right ear Left ear Clinical Fin Height Pulse rate Blood Pre	whisper test N dings (pe	mudiometry 1,000 H 2 (metres) ormal (cm) er minute) (mm Hg)	7 8 130	Weight National Diastolic	in dB) 3,000 Hz nisper (kg) c (mm Hg)	Regil
Right ear Left ear Right ear Left ear Left ear Height Pulse rate	whisper test N dings (pe	mudiometry 1,000 H 2 (metres) ormal (cm) er minute) (mm Hg)	7 8	Weight	in dB) 3,000 Hz hisper	Pegil
Right ear Left ear Right ear Left ear Clinical Fin Height Pulse rate Blood Pre	whisper test N dings (pe	mudiometry 1,000 H 2 (metres) ormal (cm) er minute) (mm Hg) Nt Pro	7 8 130	Weight National Diastolic	in dB) 3,000 Hz isper (kg) c (mm Hg) Blood:	Regul

RECORD OF MEDICAL EXAMINATIONS OF SEAFARERS - Septembor 2021

Sinus, nose, throat

Mouth/teeth

Ears (general) Tympanic membrane	(T.) ()	
Tympanic membrane		
Eyes Onbthalmananu		
Ophthalmoscopy Pupils		
Eye movement		
Lungs and chest	270	
Breast examination	14/14	
Heart		
Skin		
Varicose Vein		
Vascular (inc. pedal pulse)		
Abdomen and viscera		
Hernia		
Anus (not rectal exam)		
G-U system		
Upper and lower extremities		
Spine (C/s, T/S, L/S)		
Neurologic (full/brief)	_	
Psychiatric		
General appearance		
Not performed [Results: .	d on (day/month/year): 13 AUG 2023
Other diagnostic test(s) and re-	Results: . sult(s):	d on (day/month/year)
Other diagnostic test(s) and restant test Blood Across Medical practitioner's comment	Results: . sult(s): is and assessi	Results: Normal. ment of fitness, with reasons for any limitations. N BOARD SHIP
Medical practitioner's comment Assessment of fitness for serv On the basis of the seafarer's peresults recorded above, I declared Fit for look out duty Deck Service Fit Deck Service Fit Deck Service Fit	Results: sult(s): sult(s): ss and assessing for DUTY Or ice at sea (plants) resonal declarate the seafarer in Unfit for I	Results: Name of fitness, with reasons for any limitations. N BOARD SHIP Pease tick) Intion, my clinical examination and diagnostic test medically: Cookout duty Into not required Other Service
Assessment of fitness for serve service Service Deck Service	Results: . sult(s): sult(s): s and assessing for DUTY Or ice at sea (ple resonal declaration the seafarer in Unfit for I	Results: Normal ment of fitness, with reasons for any limitations. NBOARD SHIP ease tick) ation, my clinical examination and diagnostic test medically: ookout duty d not required
Medical practitioner's comment Assessment of fitness for serv On the basis of the seafarer's peresults recorded above, I declared Fit for look out duty Deck Service Fit Deck Service Fit Deck Service Fit	Results: sult(s): sult(s): ss and assessing for DUTY Or ice at sea (plants) resonal declarate the seafarer in Unfit for I	Results: Name of fitness, with reasons for any limitations. N BOARD SHIP Pease tick) Intion, my clinical examination and diagnostic test medically: Cookout duty Into not required Other Service

Without restrictions With restrictions	6	
Description of restrictions (e.g. specific position, type of ship, trading area etc.)		
CO DALLAN		

13 AUG 2023

Date

Signature of Medical Practitioner

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

Medical Practitioner's name, licence number, address







: 0632 Id No

Date: 13-Aug-2023

D.Date: 13-Aug-2023

Patient's Name: TOWFIQ MORSHED CHOWDHURY

Age: 41Y 6M 12D

Gender: Male

Specimen

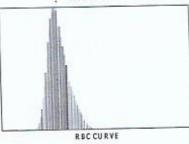
: Blood

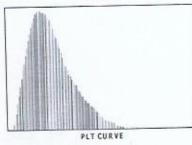
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/4081

Haematology Report

to Haematology Analyzer & checked manually)

Parameter Name	Results	ic-One Auto Haematology Analyzer & Reference Range	
Hemoglobin (Hb)	14.3 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)	06 mm/1st hr	Male:0-10, F:0-20 mm/1st hr.	
Total WBC Count(TC)	9,300 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm	
Differential WBC Count (DC)			1
Neutrophils	60 %	Child: 25-66 %, Adult: 40-75 %	Manager and Manager
Lymphocytes	36 %	Child: 52-62 %, Adult: 20-50 %	W BC CURVE
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %	
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %	
Basophils	00 %	Adult: 00-01 %	All.
Total Cir. Eosinophils	186 /cumm	50-450/cumm	
Total RBC Count	5.60 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul	
HCT/PCV	39.9 %	M: 40-54%, F:37-47%	
MCV	71.3 fL	76 - 94 fL	
MCH	25.5 pg	27 - 32 pg	R B C CURVE
MCHC	35.8 g/dL	29 - 34 g/dL	
RDW	14.4 %	11 - 16 %	All
PDW	17.2 fL	35 - 56 fl	4111
Total Platelete Count (PC)	3,14,000 /cumm	150,000-450,000/cumm	
MPV	8.5 fL	7.0 - 11.0 fL	
PCT	0.267 %	0.1 - 0.%	
Bledding Time(BT)	%	10 - 18 %	
Cloting Time(CT)	%	0.1- 0.2 %	PLT CURVE





Checked By Medical Fech

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



Bill No	DIA23080632		Z 13
Patient's Name	TOWFIQ MORSHED CHOWDHURY	Received Date	13/08/2023
Patient's Age	41Y 6M 12D		
Ref. by	Dr. Mir Md. Raihan MRRS (DL) COS (Time	Patient's Sex	Male
Sample	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDE	M),PGT(Eye),DFM	CDC NO:C/O/4081

BIOCHEMISTRY REPORT

Test Name

Result

Reference Range

Random Blood Sugar (RBS)

5.8 mmol/I

4.2 - 6.4 mmol/l

REMARKS (IF ANY)

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

RADICAL

Checked By

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



DIA23080632	T-	
1,100,000,000,000,000,000	Received Date	13/08/2023
TOW FIG MORSHED CHOWDHURY		
41Y 6M 12D		
	Patient's Sex	Male
Dr. Mir Md. Raihan MBBS.(DU).CCD(BIR	DEM) PCT/Euro DEM	
BLOOD	DEM), FOT (Eye), DFM	CDC NO:C/O/4081
	DIA23080632 TOWFIQ MORSHED CHOWDHURY 41Y 6M 12D Dr. Mir Md. Raihan MBBS,(DU),CCD(BIR BLOOD	TOWFIQ MORSHED CHOWDHURY 41Y 6M 12D Patient's Sex Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye).DFM

SEROLOGYCAL REPORT

Test Name

Result

VDRL Non-reactive



Checked By

Medical Technologis Radical Hospitals Ltd. Dr. Sumai & Khatun
MBBS, MD (Microbiology)
Associate Professor
Dept. of Microbiology
East West Medical College and Hospital



Bill No	DIA23080632	Dani-ID :	1
Patient's Name	TOWFIQ MORSHED CHOWDHURY	Received Date	13/08/2023
Patient's Age	41Y 6M 12D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raiban MRRS (DLI) COD/DIDDENT SOTIA		
Sample	URINE	(S. (Eye), DFIVI	CDC NO:C/O/4081

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	1-2/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 16

Checked By

Medical Tournologis Radical Hospitals Ltd. Dr. Suma Khatun
MBBS, MD (Microbiology)
Associate Professor
Dept. of Microbiology
East West Medical College and Hospital

RADICAL HOSPITAL

radical_hospitals@yahoo.com, www.radicalhospital.com

Toot Nome

Bill No	DIA23080632	I B 1	
Patient's Name		Received Date	13/08/2023
. diches Maine	TOWFIQ MORSHED CHOWDHURY		
Patient's Age	41Y 6M 12D	William Townson	1.2
	411 0W 12D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MRRS (DLI) COD	/DIDDELL SATI	
Comple	- Wid: Mainan Wibbs,(DO),CCD	. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	
Sample	URINE		CDC NO:C/O/4081

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

Test Name	Result
Drug Level of Urine	
Cocaine	Negative
Morphine	Negative
Marijuana	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



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23080632 Receive:13/08/2023 Print: 13/08/2023

Patient's Name : TOWFIQ MORSHED CHOWDHURY

Age : 41 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

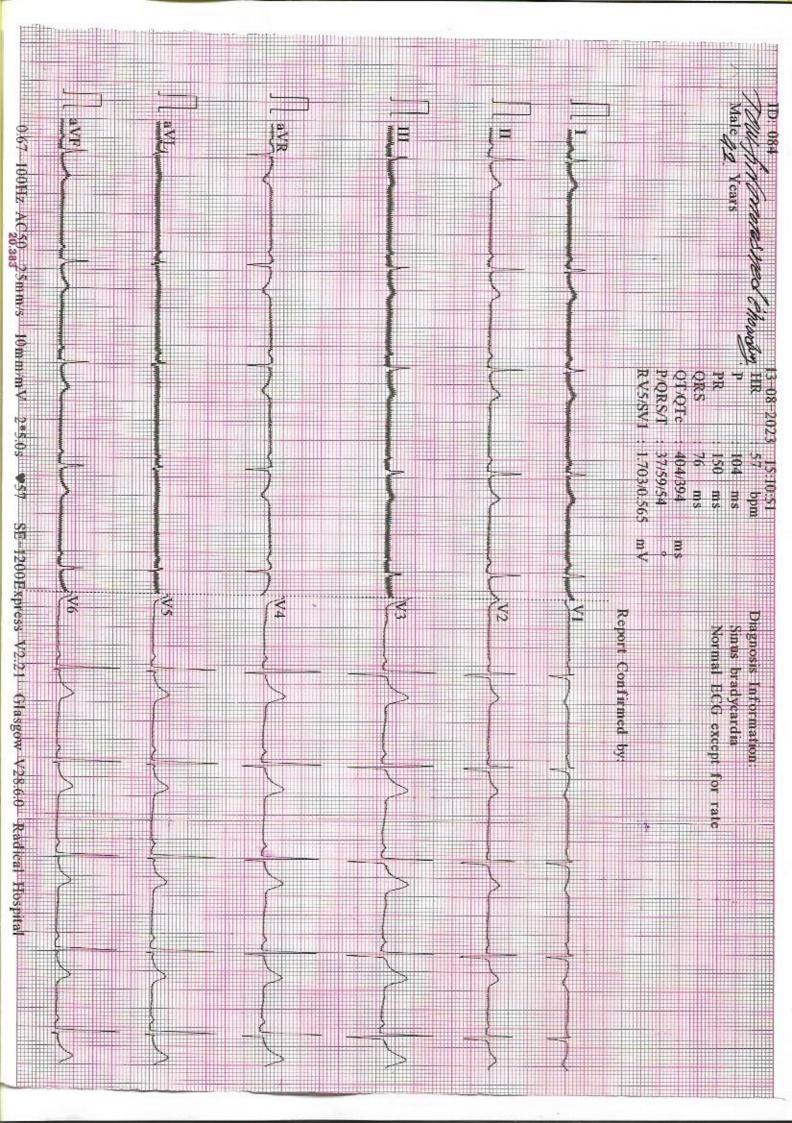
Normal chest skiagram.

Prof. Dr. Md. Mojibor Rahman

MBBS, DMRD (Radiology & Imaging) Head of the Department (Radiology &

Head of the Department (Radiology & Imaging)

Sylhet Women's Medical COllege Hospital





DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23080632 Receive: Print: 13/08/2023

Patient's Name : TOWFIQ MORSHED CHOWDHURY

Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 57 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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