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

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

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

RADICAL HOSPITAL LIMITED,
35 SHAH MAKDUM AVENUE, UTTARA, DHAKA-1230.
TEL: +88027920116, +88 01955567000. EMAIL: radical_hospitals@yahoo.com

Name: BHUIYAN (Surname) ALI (First Name) AZAM (Middle Initial) Sex: — Serial No:

Date of Birth: 11/06/1988 PP/CDC: C0155580 Rank: 3rd/OFF

Vessel: SA EQUATORIAL Type: OIL TANKER Route: FSU

Home Address: HOUSE-12, ROAD-01, SECTOR-10, UTTARA, DHAKA-1230

Company Name: BEYOND SHIPMANAGEMENT PTE. LTD.

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 Yes	Candidate Declaration No	Examiner Record Yes	Examiner Record No
Severe one-sided headaches (Migraine)		✓		✓
Head Injury / Concussion / Loss of Memmory		✓		✓
Fits / Epilepsy / Dizziness / Fainting		✓		✓
Eye / Vision Problems (Glasses, etc)		✓		✓
Hearing Impairment		✓		✓
Ear / Nose / Throat problems		✓		✓
Stomach / Bowel disorders		✓		✓
Gall stones / Kidney disorders		✓		✓
Jaundice / Liver Disease		✓		✓
Piles / Varicose veins		✓		✓
Blood Disorder		✓		✓
Female Disorder		✓		✓
Notes				

	Candidate Declaration Yes	Candidate Declaration No	Examiner Record Yes	Examiner Record No
Hernia / Hydrocoele / Appendicitis		✓		✓
High / Low blood pressure / Heart disease		✓		✓
Asthama / Bronchitis / Tuberculosis		✓		✓
Allergy / Skin disease		✓		✓
Infection / Contagious Disease		✓		✓
Addicition to alcohol / drugs / tobacco		✓		✓
Fracture / Dislocation / Injury / Amputation		✓		✓
Major / Minor Operation		✓		✓
Diabetes		✓		✓
Nervous / Mental disease / Sleep disorder		✓		✓
Mallignant disease (Cancer)		✓		✓
Signed off on medical grounds / Declared Unfit		✓		✓

Medical Examination

Height	Weight in Kgs	Chest Insp-Exp	Blood Pressure in mm of Hg	Pulse--Beats / min	Resp.Rate / min	General Condition
173cm	78kg	40cm-10	120/80mmHg	78/min	18/min	Good

Distant Vision	Uncorrected	Corrected
Right Eye	6/6	
Left Eye	6/6	

Colour Vision		Normal	Abnormal
	Ishihara	✓	
	Other	Normal	Abnormal

Field of Vision: Normal / Abnormal

Audiometry	Hz	500	1000	2000	3000	4000	5000	6000	8000
Right Ear	dB	20	20	20					N.D
Left Ear	dB	20	20	20					

Hearing	Right Ear	Left ear
	✓	✓

Systemic Examination

	Normal	Abnormal
Head & Neck	✓	
Eyes	✓	
Ears / Nose / Throat	✓	
Teeth / Oral Cavity	✓	
Musculo-Skeletal system	✓	
Nervous system	✓	
Reflexes	✓	
Skin	✓	

Notes

FIT FOR SEA SERVICE
AS 3RD OFF
AS PER MLC 2006
Enhanced GARD Medicals done

	Normal	Abnormal
Respiratory system	✓	
Cardiovascular system	✓	
Per Abdomen	✓	
Genito-urinary system	✓	
Others	✓	
Hernia / Hydrocoele	✓	
Varicose Veins	✓	
Fissure/Fistula/Piles		✓

Investigations

Blood	Result	Normal
Hemoglobin	15.0 gm%	14-16 gm %
Total WBC count	5,700 cu.mm	4000-11000 / cu.mm
Neu 62 % Lymp 33 % Eos 02 Ba 00 % Mo 02 %		
Malarial parasite	Not Found	
ESR	05 mm / 1st hour	1- - 15 mm / hr
SGPT	22 U/L	9--43 U / L
S.Cholesterol	N/E mg/dl	145--260 mg / dl
S.Triglycerides	N/E mg/dl	upto 200 mg /dl
Blood Sugar	RBS 5.2 PPBS	upto 125 mg %
HbsAg	Negative	
HIV I & II	Negative	
VDRL	Non Reactive	
Others		GGTP U/L
Blood Group		

Urine	
Colour	Straw
Specific Gravity	N/E
pH	N/E
Albumin	N
Sugar	N
Bile pigment	N
Bile salts	N
Occult blood	N
RBC cells	N
Leucocytes	N
Others	

ECG : Normal TMT: N/E

X-Ray Chest: Normal

Spirometry: Normal

Drugs of Abuse: Negative

USG: N/E

DR. MIR MD. RAIHAN RADICAL HOSPITALS LTD. REG. NO. A-55144

Result of Medical Examination

On the basis of the examinee's history, clinical examination and diagnostic tests, I,Dr. MIR MD Raihan , hereby declare the examinee medically

Fit Unfit Temporarily unfit Permanently unfit Should be re-examined in days / weeks / months.

Remarks / Recommendations

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

This certificate is valid till: 18 AUG 2025

Candidate's Signature

Date: 19.08.2023

Official Stamp: Radical Hospitals Ltd. As Per-MLC-2006 Approved by DG Department of Shipping

Doctor's signature:

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.

04.2023.4605

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD
REPUBLIC OF PANAMA

SURNAME: BHUIYAN	GIVEN NAME (S): ALI AZAM
DATE OF BIRTH: DAY 11 MONTH 06 YEAR 1988	PLACE OF BIRTH CITY KISHOREGANJ COUNTRY BANGLADESH / SEX MALE ☑ FEMALE ☐
POSITION ON BOARD: MASTER ☐ DECK OFFICER ☑ ENGINEERING OFFICER ☐ RADIO OPERATOR ☐ RATING ☐	MAILING ADDRESS OF APPLICANT: HOUSE-12, ROAD-01, SECTOR-10, UTTARA, DHAKA-1230.

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION	WITHOUT GLASSES	WITH GLASSES	COLOR TEST TYPE	HEARING
RIGHT EYE	6/6	—	☐ BOOK ☑ LANTERN YELLOW RED GREEN BLUE	RIGHT EAR
LEFT EYE	6/6	—		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 APLICABLE ☐

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) 19 AUG 2023.

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

Able for watchkeeping? YES ☐ NO ☐

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

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

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

Signature of Applicant	Name of Applicant	Date
	ALI AZAM BHUIYAN	19.08.2023

CIRCLE APPROPIATE CHOICE: (HE / SHE) IS FOUND TO BE (FIT / NOT FIT) FOR DUTY AS A (MASTER / DECK OFFCIER / 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,(DU), DFM REG: A-55144

ADDRESS: RADICAL HOSPITAL LIMITED SECTOR-12, UTTARA, DHAKA-1230

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: DG SHIPPING BANGLADESH

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06-MAY-2014

SIGNATURE OF PHYSICIAN: | STAMP OF PHYSICIAN: Radical Hospitals Ltd. As Per-MLC-2006 Approved Seafarers Department | DATE: 19 AUG 2023

EXPIRY DATE OF CERTIFICATE: 18 AUG 2025

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

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

RADICAL HOSPITAL LIMITED

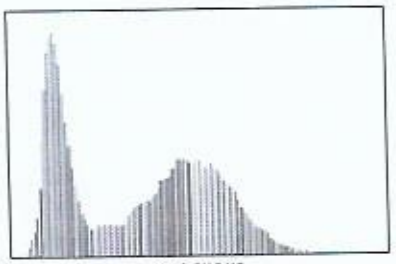
radical_hospitals@yahoo.com, www.radicalhospital.com

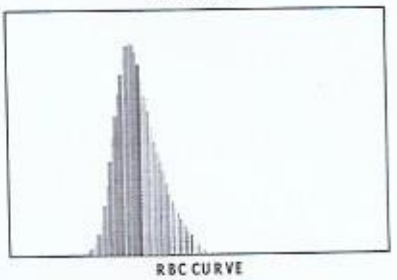
Id No : 23080905	**Date :** 19-Aug-2023	**D.Date :** 19-Aug-2023
Patient's Name : ALI AZAM BHUIYAN	**Age :** 35Y 2M 8D	**Gender:** Male
Specimen : Blood		
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/5580		

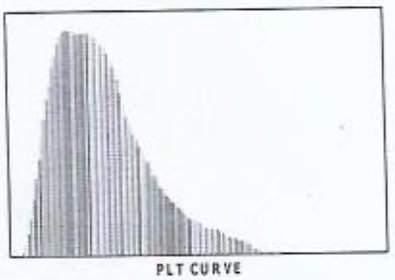
Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	**15.0** 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)	**05** mm/1st hr	Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	**5,700** /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	**62** %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	**33** %	Child: 52-62 %, Adult: 20-50 %
Monocytes	**03** %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	**02** %	Child: 01-03 %, Adult: 01-06 %
Basophils	**00** %	Adult: 00-01 %
Total Cir. Eosinophils	**114** /cumm	50-450/cumm
Total RBC Count	**4.75** m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	**38.6** %	M: 40-54%, F:37-47%
MCV	**81.3** fL	76 - 94 fL
MCH	**31.6** pg	27 - 32 pg
MCHC	**38.9** g/dL	29 - 34 g/dL
RDW	**13.7** %	11 - 16 %
PDW	**17.3** fL	35 - 56 fl
Total Platelete Count (PC)	**1,98,000** /cumm	150,000-450,000/cumm
MPV	**8.9** fL	7.0 - 11.0 fL
PCT	**0.176** %	0.1 - 0.%
Bledding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %


WBC CURVE


RBC CURVE


PLT CURVE

Checked By
Medical Technologist

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

Bill No	DIA23080905	Received Date	19/08/2023
Patient's Name	ALI AZAM BHUIYAN		
Patient's Age	35Y 2M 8D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/5580
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Serum Bilirubin (Total)	0.64 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	28U/L	Up to 40 U/L
Random Blood Sugar (RBS)	5.2 mmol/l	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.

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

RADICAL HOSPITAL LIMITED

Bill No	DIA23080905	Received Date	19/08/2023
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Patient's Age	35Y 2M 8D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/5580
Sample	BLOOD		

SEROLOGYCAL REPORT

Test Name	Result
HBsAg (Method : (ICT)	Negative

Checked By

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East West Medical College and Hospital

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Bill No	DIA23080905	Received Date	19/08/2023
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Patient's Age	35Y 2M 8D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/5580
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

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

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Bill No	DIA23080905	Received Date	19/08/2023
Patient's Name	ALI AZAM BHUIYAN		
Patient's Age	35Y 2M 8D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/5580
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

RADICAL HOSPITAL LIMITED

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DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	:	23080905	Receive: Print: 19/08/2023		
Patient's Name	:	**ALI AZAM BHUIYAN**			
Age	:	35 YRS	*Sex*	:	M
Refd. by	:	**Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM**			

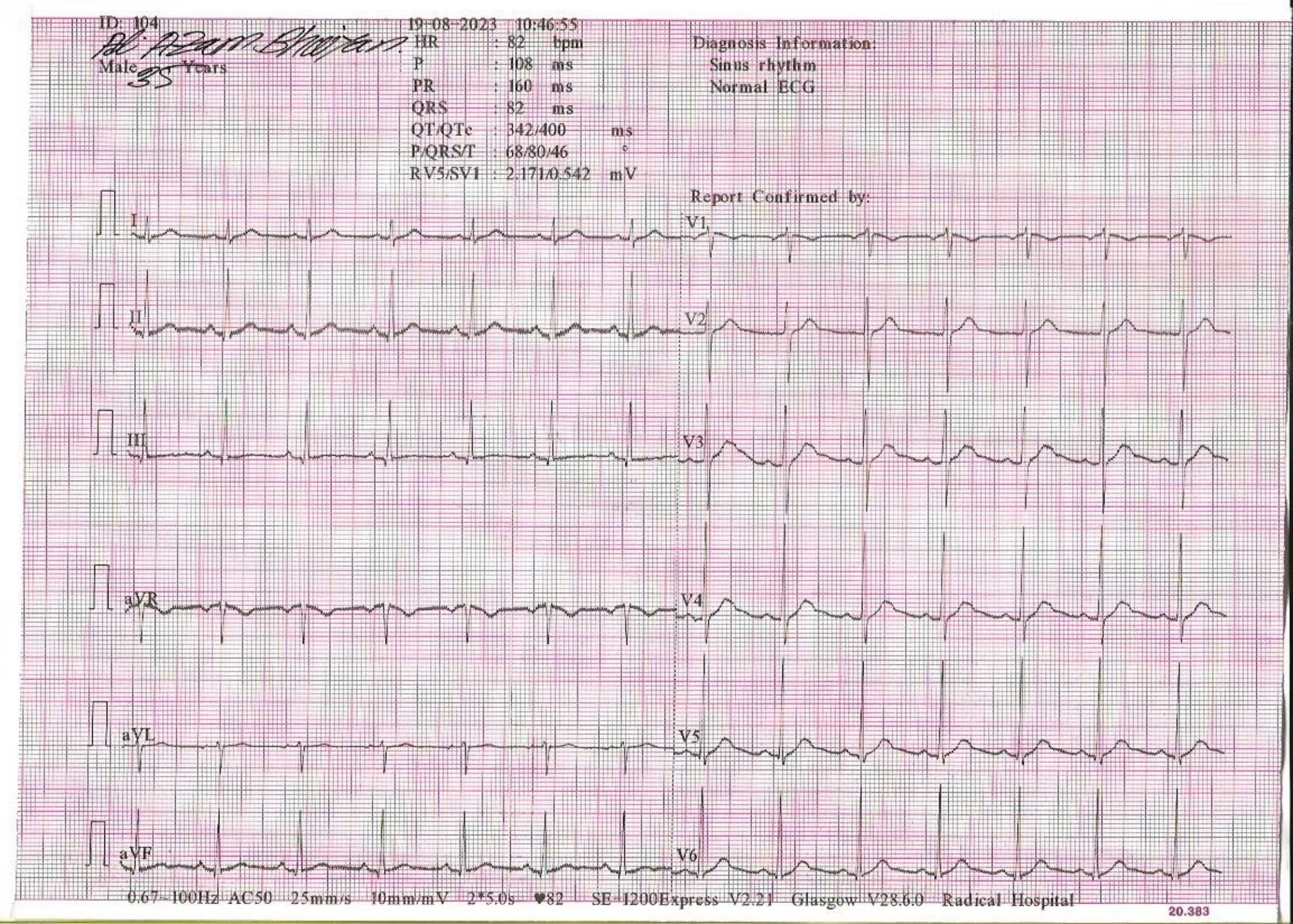
ELECTROCARDIOGRAM (E.C.G) REPORT

Rate	:	82 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


ID: 104
Male 35 Years
19-08-2023 10:46:55
HR : 82 bpm
P : 108 ms
PR : 160 ms
QRS : 82 ms
QT/QTc : 342/400 ms
P/QRS/T : 68/80/46 °
RV5/SV1 : 2.171/0.542 mV
Diagnosis Information:
Sinus rhythm
Normal ECG
Report Confirmed by:
I
II
III
aVR
aVL
aVF
V1
V2
V3
V4
V5
V6
0.67-100Hz AC50 25mm/s 10mm/mV 2*5.0s ♥82 SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital
20.383

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	: 23080905	Receive:19/08/2023	Print: 19/08/2023	
Patient's Name	: **ALI AZAM BHUIYAN**			
Age	: 35 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.

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINEST CHOLERA
CERTIFICAT INTERNATIONUAX DE VACCINATION OU DE REVACCINATION CONTRE LA CHOLERA

This is to certify that / JE Soussigne (e) certifie que | ALI AZAM BHUIYAN | date of brith / no (e) le | 11.06.1988 | Sex / sexe | MALE

Whose signature follows / dont la signature suit | .....

has on the Date indicated been vaccinated or revaccinated against Cholera
a etc vaccine (e) ar revaccine (e) contre lc Cholera a la date indiquee.

Date	Signature and professional Status of Vaccinator Signature et qualite professionelle Vaccineteure	Approved Stamp Cechet d'authentification	
18 SEP 2022	Sabrina DR. SABRINA MOSTAFA MBBS (B.U) Reg. No. BMDC, Dhaka A-68208 Seafarer's Medical Practitioner Approved by, D.G. Shipping, Dhaka	ORAL CHOLERA "DUKORAL" Valid Upto 2 Yrs.	CENTRE FOR VACCINATION AGRABAD C/A CTG. BANGLADESH
19 AUG 2023 2	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	CENTER FOR VACCINATION 35, Sheh Mukbdum Avenue Uttara, Dhaka BANGLADESH	ORAL CHOLERA "DUKORAL" Valid Upto 2 yrs

The validity of this certificate shall extend for a period of Two Years, beginning six days after the first injection of vaccine or in the event of a revaccination within such period of six months, on the date of that revaccination.

Notwithstanding the above provision in the case of a pilgrim, this certificate shall indicate that two injections have been given at an interval of seven days and its validity shall commence from the date of the second injection.

The approved stamp mentioned above must be in a from prescribed by the health adminstration of the territory in which the vaccination is perfomed.

Any amendment of this certificate or erasure or failure to complete any part, of it, may render in invalid. La validity dece certificate couvre une period de six mois commencent six Jours a pres is premiere injection du vaccin ou, dans le cas d'une revaccination au cours de cette period de six mois jour de cette revaccination.

Nonobstant les despositions ci-dessus dans le cas d'un pelerin le present certificate doitlaire mention de duex injections partiquees a sept jours d intervalle et sa validire commence le jour de la seconde injection.

De cachet d authentification doit etre canforme au modele present perl administration sanitaite du territoire ou la vaccination est effectuee.

Toute correction ou rature sur le certificate ou l o. mission d' une quelconque des mentions qu il comporte pe u.t cffecter sa validite.

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINEST YELLOW FEVER
CERTIFICAT INTERNATIONU AX DE VACCINATION OU DE REVACCINATION CONTRE LA FIEVRE JAUNE

This is to certify that / JE soussigne' (e) certifie que } ALI AZAM BHUIYAN Date of brith / no' (e) le } 11-06-1988 Sex / sexe } MALE

Whose signature follows / dont la signature suit } .....

has on the Date indicated been vaccinated or revaccinated against yellow fever
a c' tc' vaccine (e) ou revaccine' (e) contre le fievre jaune a la date indiquee.

Date	Signature and professional Status of Vaccinator Signature et titre du vaccinateur	Manufacturer and batch no of vaccine Fabricant du vaccin et nunne' ro du lot	Official stamp of vaccinating centre Cachet officiel du centre de vaccination
1 11 SEP 2022	Sabrina DR. SABRINA MOSTAFA MBBS (D.U) Reg. No. BMDC, Dhaka A-68208 Seafarer's Medical Practitioner Approved by: D.G. Shipping, Dhaka.	YELLOW FEVER VACCINATION L. NO DAKAR 13/3	CENTRE FOR VACCINATION AGRABAD C/A, CTG. BANGLADESH
2			

This certificate is valid only if the vaccine used has been approved by the world Health Organization and vaccinating centre has been disignated 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 the date of vaccination or, in the event of a revaccination within such period of ten years, from the date of that revaccinatio.

This certificate must be signed by a medical practitioner in his own hand; his official stamp is not an accepted substitute for the signature.

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

Ce certificate n' est valable que si le vaccin employe' a e' tc" a approve" par I' Organisation Mondiale de la Sante" et sile centre de vaccination ae' tc' habilite parl' adminstration sanitaire du territoire dans lequel' ce centre est siture'

La validite' de ce certificat couvre une pe' riodc de dix ans commencant dix joursapres la date de la vaccinatio ou. dans le cas dunce revaccinatio au cours de cette pe' riodc dc dix ans, le jour de cette revaccination.

Ce certificate do it etre signc' par un me' decin dc sa propre main. son cachet official ne pouvant ctre conside' re' comme lcnant lieu de signature.

Toute correction ou rature sur le certificate ou l ' omission d' une quelconque des mentions qu' il comporte peut affecter sa validite.