



HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaidanga, Agrabad C/A, Chattogram, Bangladesh.
Tel : +880-2-333316214-6, Fax : +880-2-333310530



Accredited By : BMDC
Accreditation No : A55144

PATIENT CONTROL NUMBER
H1962

MEDICAL EXAMINATION CERTIFICATE

SURNAME MAMUN	FIRST NAME AND ABDULLAH AL	MIDDLE NAME
PLACE AND DATE OF BIRTH DHAKA 27-Jan-1996	PASSPORT NUMBER A01070038	SEAMAN'S BOOK NUMBER CO9755
NATIONALITY : BANGLADESHI SEX : ☒ Male ☐ Female	VESSEL TYPE : BULK CARRIER	TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : KHAGATUA, NABINAGAR, NABINAGAR-3410, BRAHMANBARIA, BANGLADESH	CONTACT NUMBER : 0088 01779-333377	RANK : ORDINARY SEAMAN

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.

Abdullah

Signature of Seafarer

MEDICAL EXAMINATION

Weight 55 kg	Height (cm) 175	BMI 28.0	Blood Pressure: Systolic 110 mm Diastolic 80 mm	PULSE: 78 bpm
Ear	Hearing by Audiometry	Audiometry	Hearing by Whisper Test	
Right	☐ Adequate ☐ Inadequate	500 1000 2000 3000	☒ 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					Visual fields		
Unaided		Aided					
	Right eye	Left eye	Right eye	Left eye	Normal	Defective	
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 ☐ Defective

Date of last colour vision test: Date (day/month/year) 10 AUG 2023

	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	<u>NAD</u>	BIO CHEMICAL (LIVER FUNCTION TEST)	Marijuana	☐ Positive ☐ Negative
ECG	<u>NAD</u>	BILIRUBIN	Alcohol Test	☐ Positive ☐ Negative
BLOOD R/E		SGPT	URINE R/E	<u>NAD</u>
DC (differential count)	<u>NAD</u>	SGOT	OTHERS	
HAEMOGLOBIN (HGB)	<u>14.0</u>	DRUG AND ALCOHOL TEST		HBsAg
ESR (WESTERGREN)	<u>0.6</u>	Morphine	☐ Positive ☐ Negative	HIV / AIDS Test
WBC	<u>3.000</u>	Amphetamine	☐ Positive ☐ Negative	VDRL
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive ☐ Negative	Blood Type
RANDOM	<u>5.6</u>	Barbiturates	☐ Positive ☐ Negative	Psychological Exam
HBA1C	<u>5.9%</u>	Cocaine	☐ Positive ☐ Negative	Others (KUB Ultrasound)

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

<u>Abdullah</u>	ABDULLAH AL MAMUN	10 AUG 2023
Signature of Seafarer	Name of Seafarer	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
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 ☐
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Describe restrictions (e.g., specific position, type of ship, trade area):

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

Fitness Date: 10 AUG 2023	Valid Until: 09 AUG 2025
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Name and Signature of Authorizing Physician

In Accordance with Medical Examination (Seafarers Convention 1946 (No. 6) and STCW 1978/1996 as Amended, MLC 2006
 BMDC A-55144, MMC-BOD-096

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: MAMUN	GIVEN NAME (S): ABDULLAH AL	
DATE OF BIRTH: DAY 27 MONTH 1 YEAR 1996	PLACE OF BIRTH CITY DHAKA COUNTRY BANGLADESH	SEX MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER DECK OFFICER ENGINEERING OFFICER RADIO OPERATOR RATING	MAILING ADDRESS OF APPLICANT: HOUSE NO. 18, ROAD NO. 04, BLOCK-A, SECTION-02, MIRPUR, DHAKA, BANGLADESH. BANGLADESH.	

DECLARATION OF THE AUTHORIZED PHYSICIAN

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

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) **10 AUG 2023**

Date of the last colour vision test: (Day/Month/Year) **10 / 08 / 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.

ABDULLAH AL MAMUN

Abdullah

Signature of Applicant

Name of Applicant

Date

10 AUG 2023

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; M.B.B.S(D.U.)	
ADDRESS: REDICAL HOSPITALS LIMITED, UTTARA, DHAKA-1230	
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: REG NO.: A-55144, BANGLADESH MEDICAL AND DENTAL COUNCIL (B.M.D.C.)	
DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06 MAY-2014	
SIGNATURE OF PHYSICIAN: 	STAMP OF PHYSICIAN: 
EXPIRY DATE OF CERTIFICATE: 09 AUG 2025	DATE: 10 AUG 2023

This certificate is issued in compliance with the requirements

DR. MIR MD. RAIHAN

MBBS (DU), DPM, CCD (Birm), PGD (Ophth)

BMDC A-55144, MMC-BGD-016

SG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited.

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: **MAMUN**

GIVEN NAME (S): **ABDULLAH AL**

DATE OF BIRTH:

DAY **27** MONTH **1** YEAR **1996**

PLACE OF BIRTH

CITY **DHAKA**

COUNTRY

BANGLADESH

SEX

MALE

FEMALE

POSITION ON BOARD:

MASTER

DECK OFFICER

ENGINEERING OFFICER

RADIO OPERATOR

RATING

MAILING ADDRESS OF APPLICANT:

HOUSE NO. 18, ROAD NO. 04, BLOCK-A,

SECTION-02, MIRPUR, DHAKA, BANGLADESH.

BANGLADESH.

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION

COLOR TEST TYPE

HEARING

WITHOUT GLASSES

WITH GLASSES

RIGHT EYE

LEFT EYE

BOOK

LANTERN

YELLOW

RED

GREEN

BLUE

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) **10 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.

ABDULLAH AL MAMUN

10 AUG 2023

Abdullah

Signature of Applicant

Name of Applicant

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:

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ADDRESS: **REDICAL HOSPITALS LIMITED, UTTARA, DHAKA-1230**

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: REG NO.: **A-55144, BANGLADESH MEDICAL AND DENTAL COUNCIL (B.M.D.C.)**

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

SIGNATURE OF PHYSICIAN:

STAMP OF PHYSICIAN:

DATE:

EXPIRY DATE OF CERTIFICATE:

09 AUG 2025

10 AUG 2023

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 (Birmen), PGT (Ophth)

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

General Physician

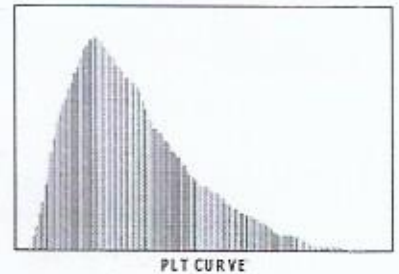
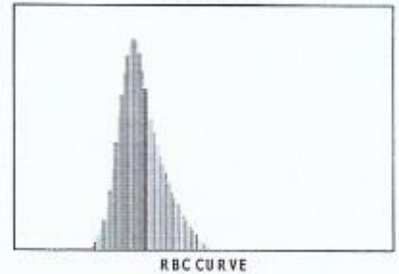
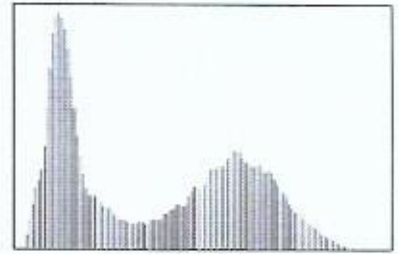
Radical Hospitals Limited.

Id No : 0489 **Date** : 10-Aug-2023 **D.Date** : 10-Aug-2023
Patient's Name : ABDULLAH AL MAMUN **Age** : 27Y 6M 14D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/9755

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	14.0 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)	7,000 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	59 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	35 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	04 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	140 /cumm	50-450/cumm
Total RBC Count	4.63 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	36.7 %	M: 40-54%, F:37-47%
MCV	79.3 fL	76 - 94 fL
MCH	30.2 pg	27 - 32 pg
MCHC	38.1 g/dL	29 - 34 g/dL
RDW	12.9 %	11 - 16 %
PDW	16.0 fL	35 - 56 fL
Total Platelete Count (PC)	1,80,000 /cumm	150,000-450,000/cumm
MPV	10.5 fL	7.0 - 11.0 fL
PCT	0.121 %	0.1 - 0.0 %




Checked By
 Medical Technologist


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

Bill No	DIA23080489	Received Date	10/08/2023
Patient's Name	ABDULLAH AL MAMUN		
Patient's Age	27Y 6M 14D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/9755
Sample	Blood		

BIOCHEMISTRY REPORT

<u>Test Name</u>	<u>Result</u>	<u>Reference Range</u>
Random Blood Sugar (RBS)	5.6 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.8 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	17 U/L	Up to 37 U/L
HbA1C	5.1 %	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 Technologist
Radical Hospitals Ltd.


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

Bill No	DIA23080489	Received Date	10/08/2023
Patient's Name	ABDULLAH AL MAMUN		
Patient's Age	27Y 6M 14D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/9755
Sample	BLOOD		

SEROLOGICAL REPORT

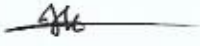
Test Name Result

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

BLOOD GROUPING Result

ABO Blood Group	"B" (+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	DIA23080489	Received Date	10/08/2023
Patient's Name	ABDULLAH AL MAMUN		
Patient's Age	27Y 6M 14D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/9755
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23080489 Receive: 10/08/2023 Print: 10/08/2023
Patient's Name : ABDULLAH AL MAMUN
Age : 27 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

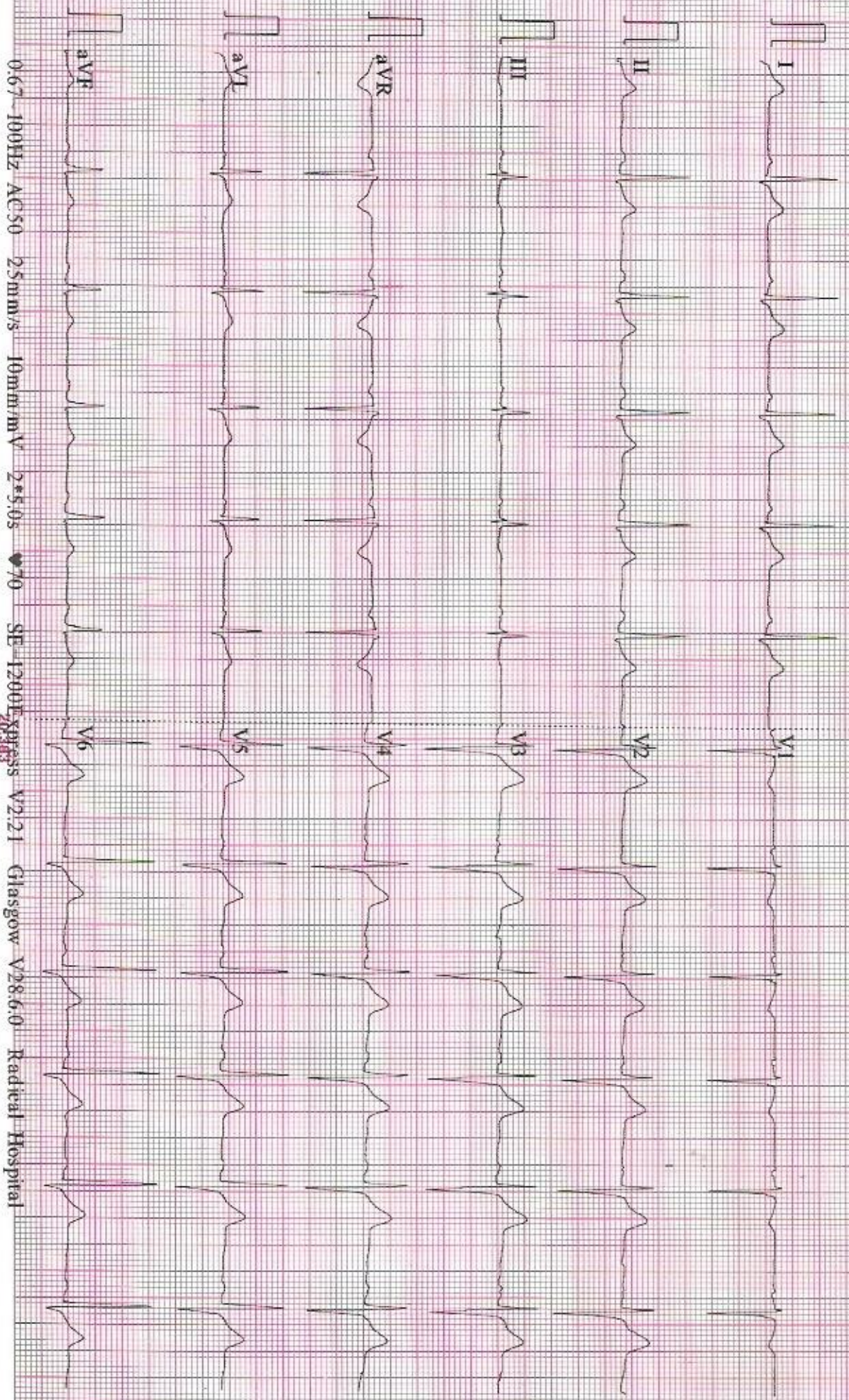
ID: 058
Archie McManis
Male 27 Years

10-08-2023 15:15:50
HR 70 bpm

P : 116 ms
PR : 160 ms
QRS : 94 ms
QT/QTc : 374/404 ms
P/QRS/T : 49/45/30 °
RV5/SV1 : 1.21/1.221 mV

Diagnosis Information:
Sinus rhythm
Normal ECG

Report Confirmed by:



REF:	MV. DAISY GLORY	DATE: 10/08/2023
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M/S. HAQUE & SONS LTD.
RUMMANA HAQUE TOWER
1267/A, GOSHAIL DANGA
AGRABAD C/A, CHITTAGONG.

EYE EXAMINATION REPORT

NAME:	ABDULLAH AL MAMUN	RANK: OS	CDC NO: C/O/9755
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VISUAL ACUTY: RIGHT LEFT

UNAIDED

6/6

6/6

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

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that } Date of birth 27.01.1996 Sex M
whose signature follows }

Abdullah

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
1	<i>Sabrina</i> DR. SABRINA MOSTAFA MBBS (D.U) Reg. No. BMDC, Dhaka A-68208 Seafarer's Medical Practitioner Approved by, D.G. Shipping, Dhaka	
2	<i>Sabrina</i> DR. SABRINA MOSTAFA MBBS (D.U) Reg. No. BMDC, Dhaka A-68208 Seafarer's Medical Practitioner Approved by, D.G. Shipping, Dhaka.	
3	<i>Mir Md. Raihan</i> DR. MIR. MD. RAIHAN MBBS (D.U), DPM, CCD (Geriatr), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.	
4		
5		
6		
7		
8		

Continued overleaf Suite our erso