# HAQUE & SONS LTD.

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

Accredited By : BMDC
Accreditation No. A 55144

PATIENT CONTROL NUMBER
H030880

## MEDICAL EXAMINATION CERTIFICATE

| SURNAME | FIRST NAME | MIDDLE NAME |
|---|---|---|
| HALDER | CHANCHAL | |
| PLACE AND DATE OF BIRTH | PASSPORT NUMBER | SEAMAN'S BOOK NUMBER |
| MANIKGONJ 1-Jan-1986 | B00070493 | CO4871 |

NATIONALITY : BANGLADESHI | SEX : ☑ Male ☐ Female | VESSEL TYPE : CHEM. TANKER | TRADING AREA : WORLD WIDE

PERMANENT HOME ADDRESS :
VILL. SINGAIR, P.O. & P.S. SINGAIR, DIST. MANIKGONJ-1820

CONTACT NUMBER : 01818-341680 (SELF) / 01

RANK : Ch. Eng CHIEF ENGINEER

Have you ever had any of the following conditions?

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

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

**Additional questions**

| | | 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? | ☐ | ☑ |

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 practioner) I also certify that my history contained above is true and any false statement will disqualify me from my employment, benefits and claims.

Signature of Seafarer

MEDICAL EXAMINATION

Weight 65kg Height (cm) 167 BMI 23.3 Blood Pressure: Systolic 120 Diastolic 80 PULSE: 78

| Ear | Hearing by Audiometry | |
|---|---|---|
| Right | ☐ Adequate | ☐ Inadequate |
| Left | ☐ Adequate | ☐ Inadequate |

| Audiometry | | | |
|---|---|---|---|
| 500 | 1000 | 2000 | 3000 |
| | | | |
| | | NA | |

| Hearing by Whisper Test | |
|---|---|
| ☑ Adequate | ☐ Inadequate |
| ☑ Adequate | ☐ Inadequate |

Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☑ NO ☐

Cont'd from page 1

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

| | Visual fields | |
|---|---|---|
| | Normal | Defective |
| Right eye | ☑ | ☐ |
| Left eye | ☑ | ☐ |

Visual acuity meets the standard laid down in STCW Code Section A-I/9 ☑ YES / NO

Colour vision as per STCW CODE Section A-I/9: ☑ Normal ☐ Doubtful ☐ Defective

Date of last colour vision test: Date (day/month/year) 23/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 | ☑ | ☐ |
| Opthalmoscopy | ☑ | ☐ | Upper and lower extremities | ☑ | ☐ |
| Pupils | ☑ | ☐ | Spine (C/S, T/S and L/S) | ☑ | ☐ |
| Eye movement | ☑ | ☐ | Neurologic (full brief) | ☑ | ☐ |
| Lungs and chest | ☑ | ☐ | Psychiatric | ☑ | ☐ |
| Breast examination | N/A | ☐ | General appearance | ☑ | ☐ |
| Heart | ☑ | ☐ | Skin | ☑ | ☐ |

RESULTS OF ANCILLARY EXAMINATIONS

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Chest X-Ray | N/A | BIO CHEMICAL (LIVER FUNCTION TEST) | | | Marijuana | ☐ Positive | ☑ Negative |
| ECG | N/A | BILIRUBIN | 0.57 | | Alcohol Test | ☐ Positive | ☑ Negative |
| BLOOD R/E | | SGPT | 28 | | URINE R/E | Normal | |
| DC(differential count) | N/A | SGOT | 23 | | OTHERS | | |
| HAEMOGLOBIN (HGB) | 13.6 | DRUG AND ALCOHOL TEST | | | HBsAg | ☐ Reactive | ☑ Nonreactive |
| ESR (WESTERGREN) | 05 | Morphine | ☐ Positive | ☑ Negative | HIV / AIDS Test | ☐ Reactive | ☑ Nonreactive |
| WBC | 6,400 | Amphetamine | ☐ Positive | ☑ Negative | VDRL | ☐ Reactive | ☑ Nonreactive |
| BLOOD GLUCOSE LEVEL | | Phencyclidine | ☐ Positive | ☑ Negative | Blood Type | B(+ve) | |
| RANDOM | 5.6 | Barbiturates | ☐ Positive | ☑ Negative | Psychological Exam | N/A | |
| HBA1C | 5.2% | Cocaine | ☐ Positive | ☑ Negative | Others(KUB Ultraso | N/A | |

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

| Signature of Seafarer | CHANCHAL HALDER<br>Name of Seafarer | 23 AUG 2023<br>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: 23 AUG 2023 Valid Until: 22 AUG 2025

Name and Signature of Authorized Physician

DR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-155144, MMC-BGD-(016678)
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited

# MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

| | | |
|---|---|---|
| SURNAME: **HALDER** | GIVEN NAME (S): **CHANCHAL** | |
| DATE OF BIRTH:<br>DAY **1** MONTH **1** YEAR **1986** | PLACE OF BIRTH<br>CITY **MANIKGONJ** COUNTRY **BANGLADES** | SEX<br>MALE FEMALE |
| POSITION ON BOARD:<br>MASTER<br>DECK OFFICER<br>ENGINEERING OFFICER<br>RADIO OPERATOR<br>RATING | MAILING ADDRESS OF APPLICANT:<br>**VILL. SINGAIR, P.O. & P.S. SINGAIR,**<br>**DIST. MANIKGONJ-1820**<br><br>**BANGLADESH.** | |

**DECLARATION OF THE AUTHORIZED PHYSICIAN**

| VISION | | | COLOR TEST TYPE | HEARING |
|---|---|---|---|---|
| | WITHOUT GLASSES | WITH GLASSES | BOOK | |
| RIGHT EYE | 6/6 | — | LANTERN | RIGHT EAR |
| | | | YELLOW RED | |
| LEFT EYE | 6/6 | — | GREEN BLUE | 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) 23 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 |
|---|---|---|
| | **CHANCHAL HALDER** | 23-Aug-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; 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 PHYSICIAN'S CERTIFICATE: 06-05-2014

| SIGNATURE OF PHYSICIAN: | STAMP OF PHYSICIAN: | DATE: 23 AUG 2023 |
|---|---|---|
| EXPIRY DATE OF CERTIFICATE: | 22 AUG 2025 | |

Radical Hospitals Ltd. ★ Approved by Department of Shipping ★ As Per MLC 2006

*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), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.

# HAQUE & SONS LTD.

Rummana Haque Tower, 1267/A, Goshaildanga,
Agrabad C/A, Chattogram, Bangladesh.
Tel: +88 02333316214-6

| Name | CHANCHAL HALDER | Date | 23-Aug-2023 |
|---|---|---|---|
| Age | 37 | Sex | MALE |
| Passport No | B00070493 | CDC No | CO4871 |
| Sample | BLOOD | Rank | CHIEF ENGINEER |

## BIOCHEMISTRY REPORT COMPARE

| Vessel Name: | GINGA LEOPARD | GINGA PANTHER | |
|---|---|---|---|
| | After Sign-Off | Before Sign-On | Reference Range |
| Date of Report | 22-08-2023 | 23-08-2023 | - |
| Serum Bilirubin | 0.9 | 0.57 | 0.2 - 1.1 mg/dl |
| Serum S.G.O.T/A.S.T | 25 | 23 | Up to 37 U/L |
| Serum S.G.P.T. | 29 | 28 | Up to 42 U/L |

| DOCTOR'S REMARKS: | No Restrictions |
|---|---|

Radical Hospitals Ltd. ★ Approved By Department of Shipping ★ As Per-MLC-2006

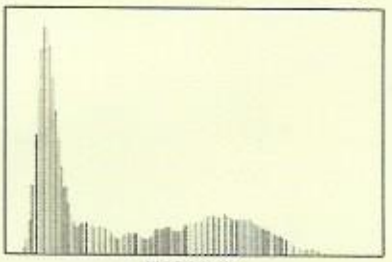
**Doctor Seal & Signature**
DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited

| | | | | | |
|---|---|---|---|---|---|
| **Id No** | : 23081144 | **Date :** 24-Aug-2023 | **D.Date :** 24-Aug-2023 |
| **Patient's Name :** | CHANCHAL HALDER | **Age :** 37Y 7M 8D | **Gender:** Male |
| **Specimen** | : Blood | | |
| **Doctor Name** | : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/4871 | | |

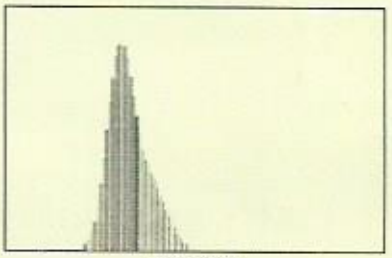
## Haematology Report

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

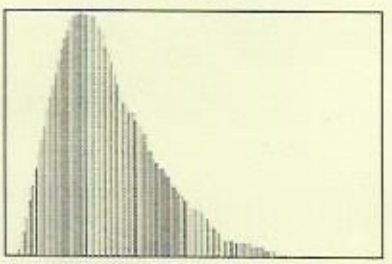
| Parameter Name | Results | Reference Range |
|---|---|---|
| **Hemoglobin (Hb)** | **13.6** gm/dl | M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl. Infant: (One year):8-10 gm/dl. |
| **ESR(Westergreen)** | **05** mm/1st hr | Male:0-10, F:0-20 mm/1st hr. |
| **Total WBC Count(TC)** | **6,400** /cumm | Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm |
| **Differential WBC Count (DC)** | | |
| Neutrophils | **50** % | Child: 25-66 %, Adult: 40-75 % |
| Lymphocytes | **45** % | 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 | **128** /cumm | 50-450/cumm |
| **Total RBC Count** | **4.87** m/ul | M: 4.5-6.5, F:3.8-5.8 m/ul |
| HCT/PCV | **37.5** % | M: 40-54%, F:37-47% |
| MCV | **77.0** fL | 76 - 94 fL |
| MCH | **27.9** pg | 27 - 32 pg |
| MCHC | **36.3** g/dL | 29 - 34 g/dL |
| RDW | **12.4** % | 11 - 16 % |
| PDW | **12.4** fL | 35 - 56 fl |
| **Total Platelete Count (PC)** | **1,95,000** /cumm | 150,000-450,000/cumm |
| MPV | **9.5** fL | 7.0 - 11.0 fL |
| PCT | **0.151** % | 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 | DIA23081144 | Received Date | 24/08/2023 |
| Patient's Name | CHANCHAL HALDER | | |
| Patient's Age | 37Y 7M 8D | Patient's Sex | Male |
| Ref. by | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM | | CDC NO:C/O/4871 |
| Sample | BLOOD | | |

## BIOCHEMISTRY REPORT

| Test Name | Result | Reference Range |
|---|---|---|
| Serum Bilirubin (Total) | 0.57 mg/dl | 0.2 - 1.1 mg/dl |
| Serum ALT (SGPT) | 28U/L | Up to 40 U/L |
| Random Blood Sugar (RBS) | 5.6 mmol/l | 4.2 – 6.4 mmol/l |
| Serum AST (SGOT) | 23 U/L | Up to 37 U/L |
| HbA1C | 5.2 % | 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 HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

| | | | |
|---|---|---|---|
| Bill No | DIA23081144 | Received Date | 24/08/2023 |
| Patient's Name | CHANCHAL HALDER | | |
| Patient's Age | 37Y 7M 8D | Patient's Sex | Male |
| Ref. by | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM | | CDC NO:C/O/4871 |
| Sample | BLOOD | | |

# SEROLOGYCAL REPORT

| Test Name | Result |
|---|---|
| HIV 1 & 2 (Method : (ICT) | Negative |
| HBsAg (Method : (ICT) | Negative |
| VDRL | Non-reactive |

| **BLOOD 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 | DIA23081144 | Received Date | 24/08/2023 |
| Patient's Name | CHANCHAL HALDER | | |
| Patient's Age | 37Y 7M 8D | Patient's Sex | Male |
| Ref. by | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM | | CDC NO:C/O/4871 |
| 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

Medical Technologis
Radical Hospitals Ltd.

Dr. Sumaiya Khatun
MBBS, MD (Microbiology)
Associate Professor
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East West Medical College and Hospital

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RADICAL HOSPITAL LIMITED

| | | | |
|---|---|---|---|
| Bill No | DIA23081144 | Received Date | 24/08/2023 |
| Patient's Name | CHANCHAL HALDER | | |
| Patient's Age | 37Y 7M 8D | Patient's Sex | Male |
| Ref. by | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM | | CDC NO:C/O/4871 |
| 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

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

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

| REF: | MT. GINGA PANTHER | DATE: 23/08/2023 |
|---|---|---|

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

## EYE EXAMINATION REPORT

| NAME: | CHANCHAL HALDER | RANK: CH.ENG | CDC NO: C/O/4871 |
|---|---|---|---|

VISUAL ACUITY: 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

ID: 137

23-08-2023 22:41:43

Male 37 Years

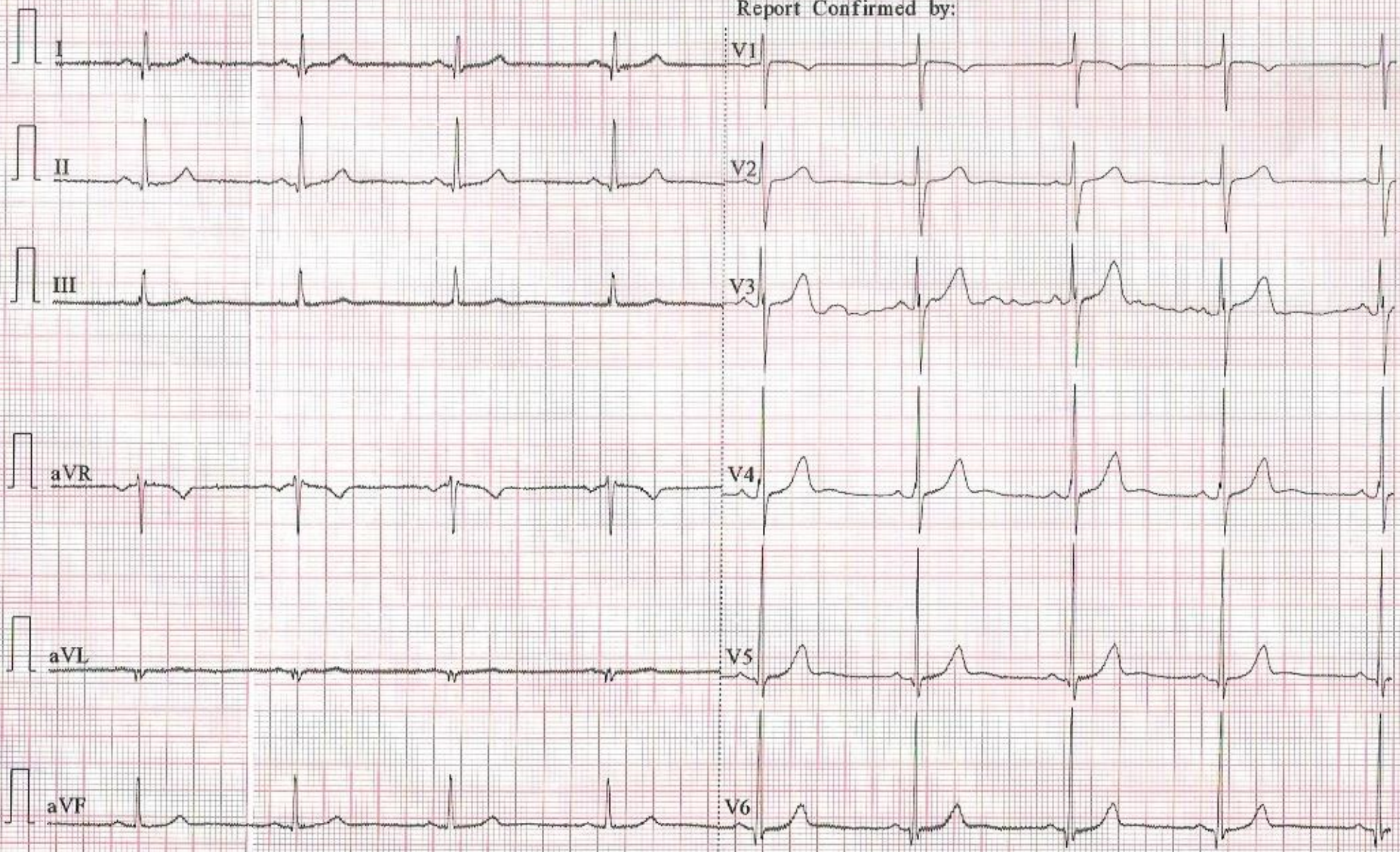
| | | |
|---|---|---|
| HR | : 52 | bpm |
| P | : 110 | ms |
| PR | : 154 | ms |
| QRS | : 88 | ms |
| QT/QTc | : 446/415 | ms |
| P/QRS/T | : 38/72/48 | ° |
| RV5/SV1 | : 2.434/0.861 | mV |

Diagnosis Information:

Sinus bradycardia

Normal ECG except for rate

Report Confirmed by:




0.67-100Hz AC50 25mm/s 10mm/mV 2*5.0s ♥52 SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

radical_hospitals@yahoo.com, www.radicalhospital.com

RADICAL HOSPITAL LIMITED

## DEPARTMENT OF RADIOLOGY & IMAGING

| | | | | |
|---|---|---|---|---|
| *ID. No.* | : | 23081144 | Receive:23/08/2023 | Print: 23/08/2023 |
| *Patient's Name* | : | **CHANCHAL HALDER** | | |
| *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.<br>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.

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

| Patient ID | 23081144 | Voucher No | |
|---|---|---|---|
| Test Name | USG OF KUB | Delivery Date | 23/08/2023 |
| Patient Name | CHANCHAL HALDER | | |
| Age | 37 Yrs | Sex | Male |
| Refd. By | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM | | |

**THANK YOU FOR THE COURTESY OF THIS REFERRAL**

**RT KIDNEY: -** Is normal in size regular in shape and position. Bipolar length –9.7 cm. The cortical echogenicity are normal with clear cortico–medullar differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness. *P-C systems are not dilated.*

**LT KIDNEY: -** Is normal in size regular in shape and position. Bipolar length – 10.3 cm. The cortical echogenicity are normal with clear cortico–medullar differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness. *P-C systems are not dilated.*

**URETER:** There is no dilatation in both ureter.

**URINARY BLADDER:** Is well filled. Wall thickness is regular and within normal limit. No intravesicle lesion is seen

**PROSTATE:** Normal in size, volume is 8.3 cc regular in shape. Echogenicity is homogenous. No area of calcification is seen.

**COMMENT: Normal study.**

23.08.23

Sonologist
Dr. Asma Ahmed
MBBS,CMU,DMU
PGT(Gynae & obs)
Advanced Training on TVS
Consultant Sonologist

Certificate (continued) Certificate (quite)

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|---|---|---|---|
| 9 12 MAY 2023 | DR. MIR. MD. RAIHAN<br>MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)<br>BMDC A-55144, MMC-BGD-016<br>DG Shipping Bangladesh Approved<br>General Physician<br>Radical Hospitals Limited. | 9 | 10 |
| 10 23 AUG 2023 | DR. MIR. MD. RAIHAN<br>MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)<br>BMDC A-55144, MMC-BGD-016<br>DG Shipping Bangladesh Approved<br>General Physician<br>Radical Hospitals Limited. | | |

CENTER FOR VACCINATION
35, Shah Makhdum Avenue
Uttara, Dhaka
BANGLADESH

The Validity of this certificate shall extend for a period of two years beginning six days after the first injection or the vaccine or in event of a revaccination within such period of two years on the date of that revaccination.

The approved stamp mentioned above must be in a form prescribed by the health administration of the territory in which the vaccination is performed.

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

## OTHER VACCINATIONS AUTERS VACCINATION

| Date | Nature of vaccine | | Physician's Signature |
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