HAQUE & SONS LTD.

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

Accredited By : BMDC
Accreditation No: A-55144

PATIENT CONTROL NUMBER
201349

RAIHAN MEDICAL HOSPITALS LTD REG. NO. A-55144

MEDICAL EXAMINATION CERTIFICATE

SURNAME	FIRST NAME	MIDDLE NAME
KABIR	H.M.	HUMAYUN
PLACE AND DATE OF BIRTH	PASSPORT NUMBER	SEAMAN'S BOOK NUMBER
BARISAL 1-Jul-1980	A08063935	CO4084

NATIONALITY: BANGLADESHI | SEX: [X] Male [ ] Female | VESSEL TYPE: CHEM. TANKER | TRADING AREA: WORLD WIDE

PERMANENT HOME ADDRESS: VILL: BOROW ZALIA, P.O: OSMAN MONJIL, P.S: HIZLA, DIST: BARISAL.

CONTACT NUMBER: 01740567832 (SELF)/0174

RANK: CHIEF ENGINEER

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	[ ]	N/A	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: 71 kg Height (cm): 163 BMI: 26.7 Blood Pressure: Systolic: 120 mm Diastolic: 80 mm PULSE: 78 bpm

Ear	Hearing by Audiometry	
Right	[ ] Adequate	[ ] Inadequate
Left	[ ] Adequate	[ ] Inadequate

Audiometry			
500	1000	2000	3000
	N/A		

Hearing by Whisper Test	
[ ] Adequate	[ ] Inadequate
[X] Adequate	[ ] Inadequate

Hearing meets the standards as laid down in STCW Code Section A-I/9 ? YES [X] 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 acuity meets the standard laid down in STCW Code Section A-I/9 YES / NO

	Visual fields	
	Normal	Defective
Right eye	✓	
Left eye	✓	

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

Date of last colour vision test: Date (day/month/year) 04 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	NAD	BIO CHEMICAL (LIVER FUNCTION TEST)				Marijuana	☐	Positive	✓ Negative
ECG	NAD	BILIRUBIN	0.8			Alcohol Test	☐	Positive	✓ Negative
BLOOD R/E		SGPT	19			URINE R/E	NAD		
DC(differential count)	NAD	SGOT	22			OTHERS			
HAEMOGLOBIN (HGB)	16.1	DRUG AND ALCOHOL TEST				HBsAg	☐	Reactive	✓ Nonreactive
ESR (WESTERGREN)	05	Morphine	☐	Positive	✓ Negative	HIV / AIDS Test	☐	Reactive	✓ Nonreactive
WBC	8300	Amphetamine	☐	Positive	✓ Negative	VDRL	☐	Reactive	✓ Nonreactive
BLOOD GLUCOSE LEVEL		Phencyclidine	☐	Positive	✓ Negative	Blood Type			ABO(+ve)
RANDOM	5.3	Barbiturates	☐	Positive	✓ Negative	Psychological Exam			NAD
HBA1C	4.7%	Cocaine	☐	Positive	✓ Negative	Others(KUB Ultraso			NAD

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

Signature of Seafarer — H.M. HUMAYUN KABIR, Name of Seafarer — 04 AUG 2023, 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: 04 AUG 2023 — Valid Until: 03 AUG 2025

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

Name and Signature of Authorized Physician

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: KABIR	GIVEN NAME (S): H.M. HUMAYUN
DATE OF BIRTH: DAY 1 MONTH 7 YEAR 1980	PLACE OF BIRTH: CITY BARISAL COUNTRY BANGLADES; SEX: MALE / FEMALE
POSITION ON BOARD: MASTER / DECK OFFICER / ENGINEERING OFFICER ✓ / RADIO OPERATOR / RATING	MAILING ADDRESS OF APPLICANT: HOUSE NO: 112/B, ROAD NO: 8A NEW FLOOR-7D, DHANMONDI # 15, DHAKA, BANGLADESH.

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION	WITHOUT GLASSES	WITH GLASSES	COLOR TEST TYPE	HEARING
RIGHT EYE	6/6	—	BOOK / PANTERN	RIGHT EAR ✓
LEFT EYE	6/6	—	YELLOW ✓ RED ✓ 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) 04 AUG 2023

Date of the last colour vision test: (Day/Month/Year) / /

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.

H.M. HUMAYUN KABIR — 4-Aug-2023

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 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: RADICAL 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: Radical Hospitals Ltd. ★ As Per-MLC-2006 ★ Approved by DG Department of Shipping | DATE: 04 AUG 2023

EXPIRY DATE OF CERTIFICATE: 03 AUG 2025

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.

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: KABIR	GIVEN NAME (S): H.M. HUMAYUN
DATE OF BIRTH: DAY 1 MONTH 7 YEAR 1980	PLACE OF BIRTH: CITY BARISAL COUNTRY BANGLADES; SEX: MALE FEMALE
POSITION ON BOARD: MASTER / DECK OFFICER / ENGINEERING OFFICER ✓ / RADIO OPERATOR / RATING	MAILING ADDRESS OF APPLICANT: HOUSE NO: 112/B, ROAD NO: 8A NEW FLOOR-7D, DHANMONDI # 15, DHAKA, BANGLADESH.

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION	WITHOUT GLASSES	WITH GLASSES	COLOR TEST TYPE	HEARING
RIGHT EYE	6/6	—	BOOK / LANTERN	RIGHT EAR: ✓
LEFT EYE	6/6	—	YELLOW ✓ RED ✓ 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 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) 04 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.

H.M. HUMAYUN KABIR — 4-Aug-2023

Signature of Applicant — Name of Applicant — Date

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: RADICAL 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: 08-05-2014

SIGNATURE OF PHYSICIAN: | STAMP OF PHYSICIAN: Radical Hospitals Ltd. As Per: MLC-2006 Approved by DG Department of Shipping | DATE: 04 AUG 2023

EXPIRY DATE OF CERTIFICATE: 03 AUG 2025

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)
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HAQUE & SONS LTD.

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

Name	H.M. HUMAYUN KABIR	Date	4-Aug-2023
Age	43	Sex	MALE
Passport No	A08063935	CDC No	CO4084
Sample	BLOOD	Rank	CHIEF ENGINEER

BIOCHEMISTRY REPORT COMPARE

Vessel Name:	NAEBA GALAXY	GINGA LEOPARD	
	After Sign-Off	Before Sign-On	Reference Range
Date of Report	20/06/2022	04/08/2023	-
Serum Bilirubin	0.6	0.8	0.2 - 1.1 mg/dl
Serum S G O T/A S T	23	22	Up to 37 U/L
Serum S G P T	25	19	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

RADICAL HOSPITAL LIMITED

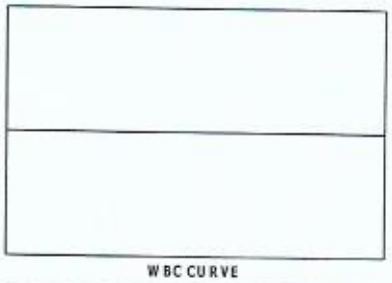
radical_hospitals@yahoo.com, www.radicalhospital.com

Id No : 0204		**Date :** 04-Aug-2023	**D.Date :** 04-Aug-2023
Patient's Name : H.M.HUMAYUN KABIR		**Age :** 42Y 8M 19D	**Gender:** Male
Specimen : Blood			
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM			CDC NO:C/O/4084

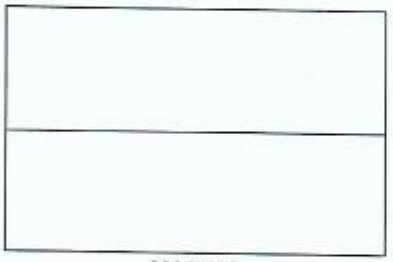
Haematology Report

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

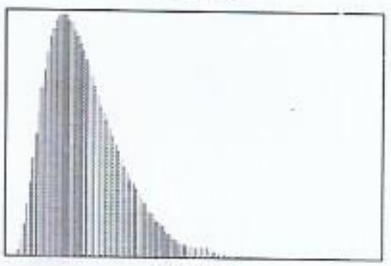
Parameter Name	Results	Reference Range
Hemoglobin (Hb)	**16.1** gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl. Infant: (One year):8-10 gm/dl.
ESR(Westergreen)	**05** mm/1st hr	Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	**8,300** /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	**80** %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	**16** %	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	**166** /cumm	50-450/cumm
Total RBC Count	**4.64** m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	**33.6** %	M: 40-54%, F:37-47%
MCV	**72.4** fL	76 - 94 fL
MCH	**26.1** pg	27 - 32 pg
MCHC	**36.0** g/dL	29 - 34 g/dL
RDW	**13.8** %	11 - 16 %
PDW	**16.3** fL	35 - 56 fl
Total Platelete Count (PC)	**1,71,000** /cumm	150,000-450,000/cumm
MPV	**9.2** fL	7.0 - 11.0 fL
PCT	**0.093** %	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	DIA23080204	Received Date	04/08/2023
Patient's Name	H.M.HUMAYUN KABIR		
Patient's Age	42Y 8M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/4084
Sample	Blood		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.3 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.8 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	22 U/L	Up to 37 U/L
Serum ALT (SGPT)	19 U/L	Up to 40 U/L
HbA1C	4.7 %	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	DIA23080204	Received Date	04/08/2023
Patient's Name	H.M.HUMAYUN KABIR		
Patient's Age	42Y 8M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/4084
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	"AB" (+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	DIA23080204	Received Date	04/08/2023
Patient's Name	H.M.HUMAYUN KABIR		
Patient's Age	42Y 8M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/4084
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	R B C	Nil
Appearance	Clear	Pus Cells	0-1/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
Dept. of Microbiology
East West Medical College and Hospital

radical_hospitals@yahoo.com, www.radicalhospital.com

RADICAL HOSPITAL LIMITED

Bill No	DIA23080204	Received Date	04/08/2023
Patient's Name	H.M.HUMAYUN KABIR		
Patient's Age	42Y 8M 19D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/4084
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

radical_hospitals@yahoo.com, www.radicalhospital.com

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	:	23080204	Receive:04/08/2023	Print: 04/08/2023
Patient's Name	:	**H M HUMAYUN KABIR**		
Age	:	42 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.

ID: 031

H. M Humayun Kabir

Male 42 Years

04-08-2023 13:21:11

HR	: 75	bpm
P	: 116	ms
PR	: 156	ms
QRS	: 90	ms
QT/QTc	: 386/432	ms
P/QRS/T	: 6/-21/42	°
RV5/SV1	: 1.957/0.389	mV

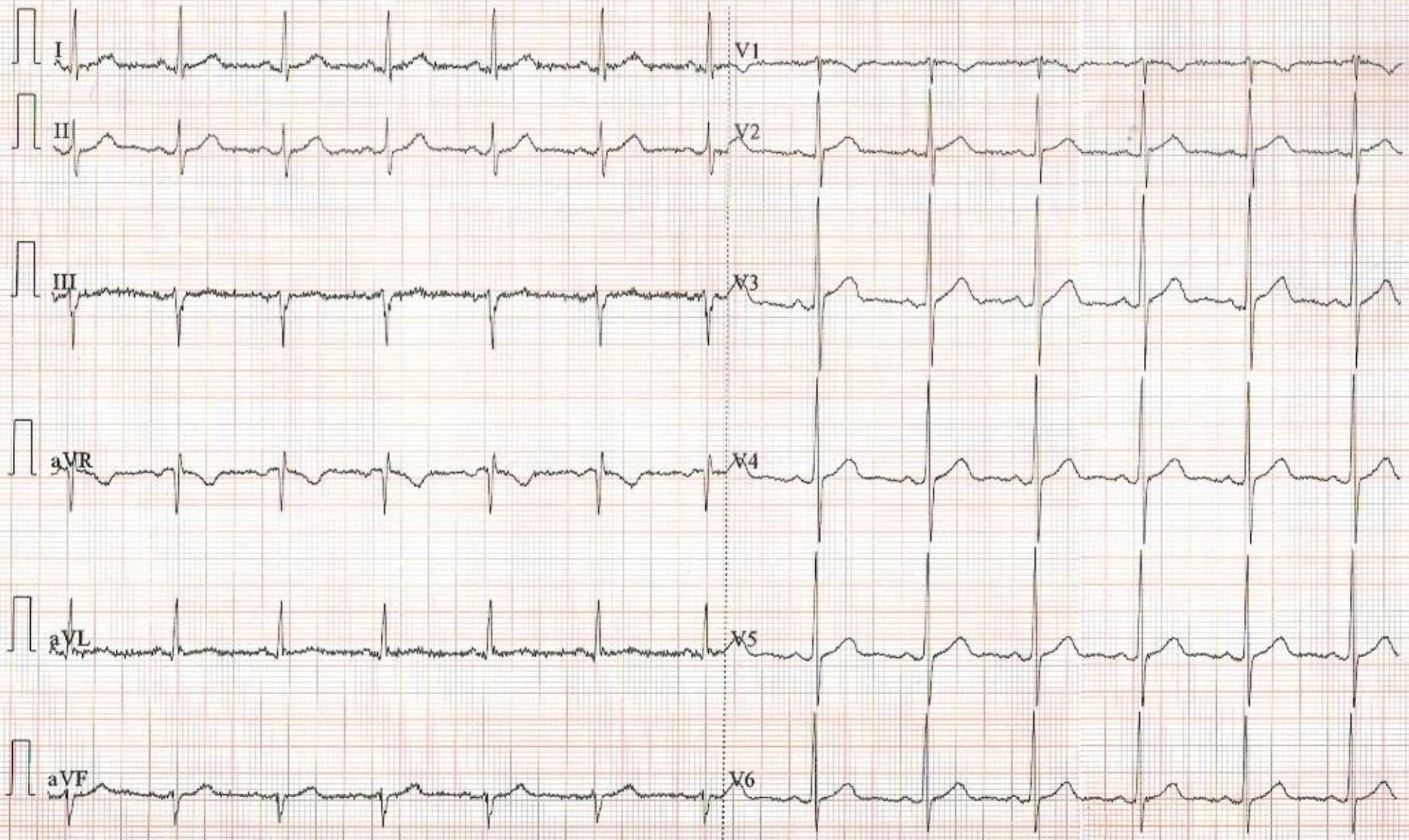
Diagnosis Information:

Sinus rhythm

Leftward axis

Borderline ECG

Report Confirmed by:



0.67~100Hz AC50 25mm/s 10mm/mV 2*5.0s ♥75 SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

RADICAL HOSPITAL LIMITED

radical_hospitals@yahoo.com, www.radicalhospital.com

REF:	MT. GINGA LEOPARD	DATE: 04/08/2023

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

EYE EXAMINATION REPORT

NAME:	H M HUMAYUN KABIR	RANK: CH.ENG	CDC NO: C/O/4084

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

radical_hospitals@yahoo.com, www.radicalhospital.com

RADICAL HOSPITAL LIMITED

Patient ID	23080204	Voucher No	
Test Name	USG OF KUB	Delivery Date	04/08/2023
Patient Name	H. M. HUMAYUN KABIR		
Age	42 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 10.7**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.*

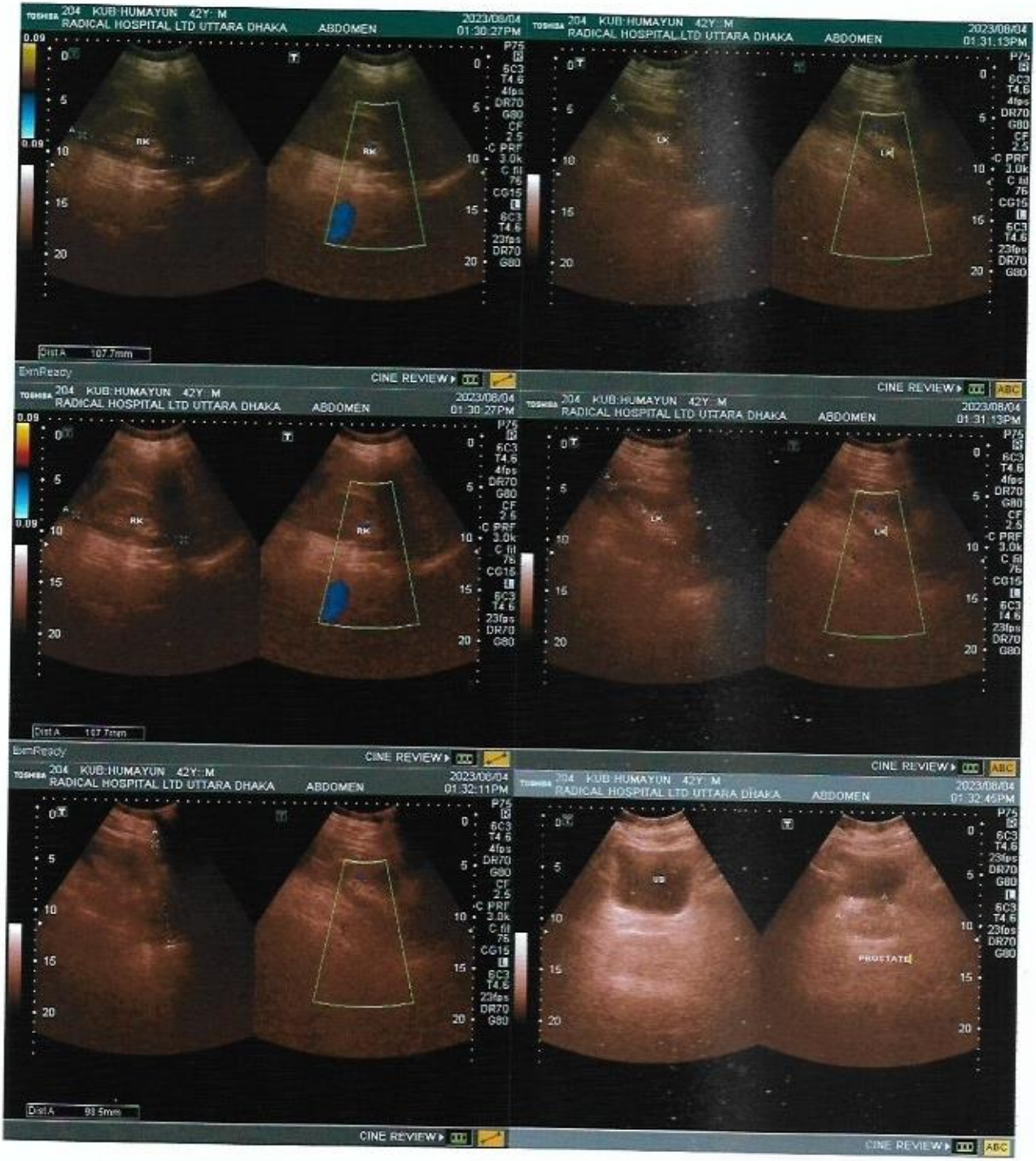
LT KIDNEY: - Is normal in size regular in shape and position. Bipolar length 9.8**cm**. The cortical Echogenicity are normal with clear cortico–medullar differentiation. The cortical Thicknesses are normal. The renal sinus shows normal echogenicity and thickness. *P-C systems are not dilated.*

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

PROSTATE: Enlarged in size & volume is 55.0cc regular in shape. Echogenicity is homogenous. No area of calcification is seen.

COMMENT: Enlarged prostate gland.

Dr. Farzana Rahman
MBBS CMU, DMU,PGT(Radiology & Imaging)
Consultant Sonologist KC hospital


204 KUB:HUMAYUN 42Y: M
RADICAL HOSPITAL LTD UTTARA DHAKA
ABDOMEN
2023/08/04
01:30:27PM
01:31:13PM
01:32:11PM
01:32:45PM
RK
LK
PROSTATE
Dist A 107.7mm
Dist A 98.5mm
CINE REVIEW

Certificate (continued) Certificate (quite)

9	05 SEP 2021 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	9 CENTER FOR VACCINATION 35, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH	10
10	21 SEP 2022 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	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.

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

H M HUMAYUN KABIR

This is to certify that whose signature follows } Date of birth 01-JULY-1980 Sex MALE

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
04 AUG 2023	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.	CENTER FOR VACCINATION 35, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH
2		

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that whose signature follows } Date of birth 01.07.1980 Sex MALE

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
1	03 AUG 2017 DR. MIR MD. RAIHAN MBBS (DU), Reg. No. A-55144 (BMDC) Reg. No. BGD-016 (MMC) DG Shipping Approved (BD) General Physician Radical Hospitals Ltd.	CENTER FOR VACCINATION 35, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH	
2	05 JUL 2018 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, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH	
3	25 NOV 2019 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, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH	3 4
4			
6	16 NOV 2020 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, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH	6
7	10 AUG 2021 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, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH	8
8			

Continued overleaf Suite our erso

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that whose signature follows } Date of birth 01.07.1980 Sex MALE

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
1 03 AUG 2017	DR. MIR MD. RAIHAN MBBS (DU), Reg. No. A-55144 (BMDC) Reg. No. BGD-016 (MMC) DG Shipping Approved (BD) General Physician Radical Hospitals Ltd.	YELLOW FEVER VACCINE L NO DAKAR	CENTER FOR VACCINATION 35, Shah Makhdum Avenue Uttara, Dhaka BANGLADESH
2			
3			3 4
4			

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.