

Medical Declaration

As per medical standards of ILO- MLC 2006, as amended STCW 2010

Issue Date: 15th July 2013 Rev. Date: 01st November 2018 Revision No.: 01 Form #: C-44

Medical Examination of Seafarers Examinee's Declaration

Name (last, first, middle):	MONIRUZZAMAN MOHAMMAD
Date of birth (day/month/year):	02/07/1983
Sex: Male / Female	MALE
	H: GA, R: 7B, S:09, UTTARA MODEL TOWN
Home address:	DHAKA-1230 . BANGLADESH
Passport No./Discharge book No.:	0/0/4344
Department (Deck/Engine/Radio/Food handling/other);	ENGINE
Rank:	CHIEF ENGINEER
Routine and emergency duties (if known):	DAY WORK AND WATCHKEEPING ON ER MACHINERIES.
Type of ship (Cargo, Tanker, Passenger):	TANKER
Trade area (coastal, tropical, worldwide):	WORLDWIDE

Seafarer's Personal Declaration

(Assistance should be offered by medical staff)

Have you ever had any of the following conditions?

	Condition	Yes	No		Condition	Yes	No
1	Eye/vision problem			18	Sleep problem		-
2	High blood pressure		1	19	Do you smoke, use alcohol or drugs?		-
3	Heart/vascular disease		_	20	Operation/surgery	77.11	
4	Heart surgery			21	Epilepsy/seizures		-
5	Varicose veins/piles			22	Dizziness/fainting		1 -
6	Asthma/bronchitis		_	23	Loss of consciousness		-
7	Blood disorder		/	24	Psychiatric problems		1
8	Diabetes			25	Depression/Hepatitis		
9	Thyroid problem		1	26	Attempted suicide		
10	Digestive disorder			27	Loss of memory		_
11	Kidney problem			28	Balance problem	ALTE VIE	
12	Skin problem			29	Severe headaches	No.	-
13	Allergies		-	30	Ear (hearing, tinnitus)/nose/throat problem		
14	Infectious/contagious diseases		_	31	Restricted mobility		-
15	Hernia		1	32	Back or joint problem		-
16	Genital disorder		Loal Hos	PVIZA	Amputation		
17	Pregnancy	1	of Hos	345	Fractures/dislocations	17	

04.2023.4625

File No.: L #4 (2nd/O)

Retention: 3 Years / Frequency: As Required

Page 1 of 4



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Revision No. ; 01 Form #: C-44

f you an	swered "yes" to any of t	he above question	s, please give details	s:		
						100 = 1
ddition	al questions					
					Yes	No
35	Have you ever been sig	med off as sick or r	repatriated from a shi	p?		1
36	Have you ever been ho		epatrated from a sir	Ρ.		1
37	Have you ever been de		duty?			1
38	Has your medical certif					1
39	Are you aware that you			or illnesses?		1
37	Do you feel healthy and	d fit to perform the	duties of your design	nated	1	
40	position/occupation?					
41	Are you allergic to any	medication?				_
	Are you taking any nor lease list the medications certify that the personal of	taken, and the purp	oose(s) and dosage(s)):	e	
ignature	of	- X	Day			
xaminee		2	(day/month/year)	2 1 AUG 2023		
Vitnessec signature			Name (Typed or Printed)	DR. MIR. MD. RAI M885 (DU), DFM. CCD (Birdem), PG BMDC A-55144, MMC-BG DG Shipp.ng Bangladesh Al General Physician	D-016 pproved	
hereby a ublic aut	nuthorize the release of all m horities to Dr MASS	y previous medical r	ecords from any health	professionals, health insti	tutions and	
ignature	of Examinee	Da Da	youth (South Near)	2 1 AUG 2	023	
Vitnesse	d by: (signature		n Property Printed)	DR. MIR. MI MBS (DU), DFM, CCD (6 BMDC A-55144. M	Sirdem), PGT (Op AMC-BGD-0	16
	: L #4 (2nd/O)	Patention : 3 Ves	rs As Requi	no Shinn no Banol	adesh Appro	veo



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Issue Date: 15th July 2013 Rev. Date: 01th November 2018 Revision No. : 01 Form #: C-44

	Pre-so	ea			Periodic			Other	
Sight			Visual A	conity			1	Visual	Cialda
	20000	Unaide		Cuity	Aided			Normal	Defective
	Right Eye	Left Eye	Binocular	Right Eye	Left Eye	Binocular	Right Eye	Normal	Defective
Distance	616	616	1	77.	177		Left Eye		
Vear	NS	NS							
Color vi			Not tested	X	Normal		Doubtful	Territ 1500	fective
Hearing	500	1000	2000	3000	4000	6000	Speech and	Normal	t (metres) Whisper
Right Ear	11z	Hz Zo	20	Hz	Hz	Hz	Right Ear		
Left Ear	20	20	20				Left Ear		
Height (cn	n) e: (/minu	te)	167	30-		Weight: (kg)	73	Perta 17
Blood pr			Systolic:(mm	/Ho)	120		(mm/Hg)	SO	- Ciwic
Urinalys		ucose:	Systolic.(IIIII	(115)	Protein:	Diastone	(IIIII/Fig)	Blood:	1117
11 - 1			Normat7	Abnor	rmal	01.		Normal	Abnorma
Head			1			Skin	200	1	
Mouth/te	nose, thro eeth	at				Varicose ve Vascular (ir pulses)		1	
Ears (gei	neral)		1/1			Abdomen a	nd viscera	1	-
	ic membra	ine	1			Hernia	na visceia	1/1	
Eyes			1/2			Anus (not re	ectal evam)		
the state of the s	noscopy		1/2		11	G-U system	Purchase and with the control and the control	1	
Pupils						Upper and I extremities		1	
Eye mov	ement		1/0				T/S and L/S)	1	
Lungs ar			1/1	1		Neurologic		1	
	kamination	1	NA			Psychiatric	(-412 01101)	100	
Heart			1//			General app	earance	1/	
				1		Seneral app	- curumet	-	



File No. ; L #4 (2nd/O)

Retention: 3 Years / Frequency: As Required

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Medical Declaration
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Issue Date: 15th July 2013 Rev. Date: 01st November 2018 Revision No. : 01 Form #: C-44

Other diagnostic	test(s)	and	result	(s)):
------------------	---------	-----	--------	-----	----

Blood tripe			Results			
13/0	act in	pe		Norma		
			_			
edical practitioner	's comments and asse	essment of fitness, w	ith re	asons for any limitatio	ns:	
	TOT FOR DUT	Y ON BOARD SHIP				
	E36 1 OK 5 T					
Vaccination status	recorded:	Yes		□ No		
ssessment of fitner	ss for service at sea			-		
on the basis of the executed above. I dec	xaminee's personal d clare the examinee m	eclaration, my clinica edically:	ıl exa	amination and the diag	nostic test results	
		-	N/	. 6. 6. 7		
Fit for look ou	t duty	_	No	t fit for look out duty		
	Deck service	Engine service	1	Catering service	Other services	
Fit Unfit Without Restr	iction		Wi	th Restrictions		
Unfit Without Restr		ion, type of ship, trac	* 1.25			
Unfit Without Restr		ion, type of ship, trac	* 1.25			
Unfit Without Restr Describe restriction			* 1.25			
Unfit Without Restr Describe restriction	s (e.g., specific posit		* 1.25			
Unfit Without Restr Describe restriction	s (e.g., specific posit		* 1.25			
Unfit Without Restr Describe restriction	s (e.g., specific posit		* 1.25			
Unfit Without Restr Describe restriction ction taken by Medi	s (e.g., specific posit	eferral):	* 1.25		G 2023	
Unfit Without Restr Describe restriction ction taken by Medi	s (e.g., specific posit	eferral):	* 1.25	21 AU	G 2023 AUG 2025	
Unfit Without Restr Describe restriction ction taken by Medi	s (e.g., specific position ical Examiner (e.g. respectively) n: (Day/Month/Year ficate: (Day/Month/Year ficate)	eferral):	* 1.2 4.6	21 AU		
Unfit Without Restr Describe restriction ction taken by Medi Date of examination Expiry date of certi	n: (Day/Month/Year	eferral):	* 1.2 4.6	21 AU	AUG 2025	
Describe restriction ction taken by Medical Expiry date of certi	n: (Day/Month/Year	eferral):	* 1.2 4.6	21 AU 20 DR. MIR. MD. MBBS (DUI) DFM, CCD (Bird	AUG 2025	
Describe restriction Ction taken by Medical Expiry date of certical Name of Medical Esignature of Medical Esignature of Medical	n: (Day/Month/Year	eferral):	* 1.2 4.6	21 AU 20 DR MIR MD	RAIHAN tem), PGT (Ophth) (C-BGD-016 esh Approved sician	



Medical Certificate for Service at Sea

As per medical standards of ILO-MLC 2006, as amended STCW 2010

Issue Date: 15th July 2013 Rev.Date: 01st November 2018 Revision No.; 01

Form #: C-43

Name: (last, first, middle	e)					
MONIR UZZA HAN	MOH	AMM	4 <i>D</i>			Photo
Date of birth: (day/month/year)	02	07	83	Gender: (male/female)	MALE	
Passport / Discharge book No:	dol	434	4	Nationality:	BANGCADESHI	
Rank:	CHIEF	ENGI	NEER	Place of Examination:	DHAKA BANGGOBH .	Signature of Examinee.

I have evaluated the above-named seafarer/ new entrant after establishing his identity as per the documents mentioned above. On the basis of the seafarer's/ new entrant personal declaration, my clinical examination, the diagnostic test results obtained, and in consideration of the essential requirements of the position applied for, my opinion is —

		Yes	No
a.	Hearing meets the standards in STCW Code, section A-I/9:		
b.	Unaided hearing is satisfactory;		1
c.	Color Vision meets the required STCW Code standards section A-I/9 (testing only required every six years)	/	
d.	Date of last color vision test:		,
e	Fit for lookout duty	/	
f	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 to endanger the health of other persons on board:	/	7

This seafarer is UNFIT FOR DUTY ** / FIT FOR DUTY with / without restriction *as mentioned below.

*This Medical Certificate is issued with following restriction

** Reasons for being unfit

File No.: L #3 (2nd/O)

Date of examination: (Day/Month/Year)	2 1 AUG 2023
Expiry date of certificate: (Day/Month/Year)	2 0 AUG 2025
Name of Medical Examiner	
Signature of Medical Examiner	Tub.
Official Stamp	DR. MIR. MD. RAIHAN

AS.Per-Mi. U-2008

DR. MIR. MD.

MBBS (DU), DFM. CCD (Bidem), PGT (Ophth)

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited.

04.2023.4625

PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

THE	REPUBLIC OF LIBERIA	AINIEA 2
LAST NAME OF APPLICANT MONIRUZZAMAN	FIRST NAME MOHAMMAD	MIDDLE INITIAL
DATE OF BIRTH	PLACE OF BIRTH BANG LADBH	SEX
MONTH 07 DAY 02 YEAR 1983	CITY PABNA COUNTRY	MALE FEMALE
EXAMINATION FOR DUTY AS: MASTER RATING MATE MOU DECK ENGINEER MOU ENGINE RADIO OFF SUPERNUMERAR	MAILING ADDRESS OF APPLICANT: H: GA, R: 7B, 3:09 BANGLADEH	177ARA, DHAKA-1230
MEDICAL EXAMINATION (SEE PAGE 2) STA	TE DETAILS ON PAGE 2	
VISION: WITH GLASSES WITH GLASSES	Stopin Sappin	NERAL APPEARANCE
DATEOFLAST COLOR VISION TEST (Month/Day/Year 21	AUG 2023 Testing Required every 6 years	
COLOR VISION MEETS STANDARDS IN STCW CODE, TAB	LEA-1/9? YES NO	
COLOR TEST TYPE: BOOK * LANTERN * CHECK IF COLO	R TEST IS NORMAL YELLOW RED	GREEN BLUE
HEARING: RT. EAR THE	LEFT EAR	90
HEAD AND NECK	HEART (CARDIOVASCULAR)	3-1111
LUNGS VOITIMA		MITTHEE
Watima	SPEECH (DECK/NAVIGATIONAL OF IS SPEECH UNIMPAIRED FOR NOR!	FFICER AND RADIO OFFICER) MAL VOICE COMMUNICATION?
EXTREMITIES:	2201	Comment
UPPER / VOLCA	//// LOWER	VIIIILLE
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BO	O BE AGGRAVATED BY, OR TO RENDER HIM UNFIT ARD? IF YES, EXPLAIN IN DETAILS OF MEDICAL EXA	FOR SERVICE AT SEA OR LIKELY AMINATION ON PAGE 2.
(and)	2 1 AUG 2023	2 0 AUG 2025
TURE OF APPLICANT	DATE OF EXAM	EXPIRY DATE
3/	AFFIXED IN THE PRESENCE OF THE EXAMINING PH	
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION W	AS GIVEN TO:	
	ON BOARD SHIP (NAME OF APPLICANT	
(HE) (SHE) IS FOUND TO BE (FIT) (NOT FIT) FOR DUTY AS	A: (MASTER MATE, ENGINEER, RADIO OFFICER, RATANDER (HE) (SHE) IS FOUND TO BE (EPT) (NOT FIT) FO	TING, MOU DECK, MOU ENGINE or OR LOOKOUT DUTIES?
NAME AND DEGREE OF PHYSICIAN DR	mie mo PAI	MAN
ADDRESS DADIGATION	and immen	C COURT
NAME OF PHYSICIAN'S CERTIFICATING AUTH	HORITY DE SAMPOUY	O BANGLAND
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE	* 0/	2021
SIGNATURE OF PHYSICIAN	DATEGERY	AMINATION: 21 AUG 2023
This certificate is issued by authority of the Departy	Commissioner of Maritime Affairs, R.L. and invention, 2006 for the Medical Examination of Se	n compliance with the
The Medical Certificate shall be valid for no more years of age and for no more than one (1	than two (2) years from the date of the Examin	ation for those over 18
	A LLA NI	A HOSPITA
MBBS (DU), DFM, CCD (Birden BMDC A-55144, MMC	-BGD-016	Barth Coope E
DG Shipp.ng Banglades General Physic Radical Hospitals L	n Approved	

MEDICAL REQUIREMENT

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifications shall be required to have a physical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer certificate, application for seafarer's identity document, or application for certification of special qualifications. This physical examination must be carried out not more than 12 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. Such proof of examination must establish that the applicant is in satisfactory physical condition for the specific duty assignment undertaken and is generally in possession of all body faculties necessary in fulfilling the requirements of the seafaring profession. In addition, the following minimum requirements shall apply:

- (a) All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in the better ear at 15 feet and in the poorer ear at 5 feet.
- (b) Deck officer applicants must have (either with or without glasses) at least 20/20 vision in one eye and at least 20/40 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/160 in both eyes. Deck officer applicants must also have normal color perception and be capable of distinguishing the colors red, green, blue and yellow.
- (c) Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and at least 20/50 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/200 in both eyes. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.
- (d) An applicant's blood pressure must fall within an average range, taking age into consideration.
- (e) Applicants afflicted with any of the following diseases or conditions shall be disqualified: epilepsy, insanity, senility, alcoholism, tuberculosis, acute venereal disease or neurosyphilis, AIDS and/or the use of
- (f) Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (g) Applicants for able scafarer deck, bosun, GP-1, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigational officer's certificate.
- (h) Applicants for fireman/watertender, oiler/motorman, able seafarer engine pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an engineer officer's certificate.

DETAILS OF MEDICAL EXAMINATION (To be completed by examining physician)

2. Padiolopia m 2. Padiolopia m 3. Patralopia m 4 F Decembration for 21 AUG 2023

RLM-105M (REV. 12/17)

PR. WIR. MD. RAIHAN

MBBS (DU), DRM, CCD (Birdem), PGT (Ophth)

A SPACE MAC MAC B GD-016

DG Shipping Bangladesh Appr General Physician Radical Hospitals Limited



HOUSE # 52, GARIB-E-NEWAZ AVENUE, SECTOR-13, UTTARA, DHAKA-1230
 T-1, 93, 49554406 97, 93, 49559999, 490579994, Marling at 99549999547

Tel: 02-48954406-07, 02-48953932, 48953961, Hotline: 09610009612

E-mail : istuttara@gmail.com

www.ibnsinatrust.com

ISO 9001:2015 Certified

IBN SINA D. LAB & CONSULTATION CENTER, UTTARA



URINE ROUTINE EXAMINATION

ID No : U1152567 Voucher Time 14/08/2023, 04:11 PM Reporting Time : 14/08/2023, 07:58 PM

Name : MOHAMMAD MONIRUZZAMAN Age: 40 Y 2 M 15 D Se

Ref.By : UNIVERSAL SHIPING SERVICES.

Specimen : Urine

PHYSICAL EXAMINATION	Result	Reference Value
Quantity	Sufficient	
Colour	Straw	Pale Yellow /Straw
Appearance	Clear	Clear
Specific Gravity	1.026	1.010 - 1.022
CHEMICAL EXAMINATION	Result	Reference Value
Reaction (PH)	6	4.5 - 8.0
Protein	Nil	Nil
Glucose	Nil	Nil
Acetone (Ketone body)	Nil	Nil
Bilirubin	Absent	0.2 mg/dL
Urobilinogen	Nil	0.1 - 1.8 mg/dL
Nitrite	Negative	Nil
MICROSCOPIC EXAMINATION	Result	Reference Value
Epithelial Cells	1-2/HPF	0-5/HPF
Pus Cells	0-1/HPF	1-5/HPF
RBC	Nil	0-2/HPF
Yeast cells	Nil	Nil
Trichomonas	Nil	Nil
Fungus	Nil	Nil
Spermatozoa	Nil	Nil
Cast	Result	Reference Value
Hyaline Cast	Nil	Nil
Granular Cast	Nil	Nil
Cellular Cast	Nil	Nil
RBC Cast	Nil	Nil
WBC Cast	Nil	Nil
Waxy cast	Nil	Nil
Crystal	Result	Reference Value
Cal.Oxalate	Nil	Nil
Amorphous Phosphate	Nil	Nil
Uric Acid	Nil	Nil
Urates	Nil	Nil
Triple Phosphate	Nil	Nil,
Sulphonamide	Nil	Nil

0

Md. Mamun Ar Rashid Rana

DMT (SMF), Lab Medicine Medical Technologist Ibn Sina D.lab Uttara Assoc. Prof.Dr. Sumaiya Khatun

MBBS, MD (BSMMU) (Gold medalist). Laboratory Consultant. Ibn Sina D.Lab, Uttara.

Printed By: Md. Saddam Hossain (saddam) Printed On: 14/08/2023 07:52:55 PM



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BIOCHEMISTRY REPORT

ID No : U1152567

Voucher Time:

14/08/2023, 04:11 PM Reporting Time: 14/08/2023, 07:50 PM

Name

: MOHAMMAD MONIRUZZAMAN

Age: 40 Y 2 M 15 D

Sex: M

Ref.By

: UNIVERSAL SHIPING SERVICES.

Specimen

Estimations are carried out by Attelica Solution/Vitros 5600/Seimens Advia 1800/ Dimention ExL-LM System

Parameter

Test Result

Reference Value

Plasma Glucose Random

6.14 mmol/L

3.33-7.78

HbA1C

5.3 %

4.8-6.0

Md. Nasir Uddin

Biochemist

B.Sc(Hon's.)M.Sc (Biochemistry & MB)

Ibn Sina D-lab, Uttara

Printed By: Md. Belayet Hossain (Belayet) Printed On:

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SEROLOGY REPORT

ID No

: U1152567

Voucher Time:

14/08/2023, 04:11 PM

Reporting Time:

14/08/2023, 07:45 PM

Sex: M

Ref.By

Name

: MOHAMMAD MONIRUZZAMAN

Age: 40 Y 2 M 15 D

Specimen

: UNIVERSAL SHIPING SERVICES. : Blood

Parameter

Test Result

Reference Value

V.D.R.L Test

Non-Reactive

DMT(SMF), BSc(Hon's) Lab Medical Technologist, Ibn sina D-Lab, Uttara. Assoc. Prof.Dr. Sumaiya Khatun

MBBS, MD (BSMMU) (Gold medalist). Laboratory Consultant. Ibn Sina D.Lab, Uttara.

Printed On:

14/08/2023 07:39:54 PM

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IMMUNOLOGY REPORT

ID No

: U1152567

Voucher Time:

14/08/2023, 04:11 PM

Reporting Time:

14/08/2023, 07:07 PM

Name

: MOHAMMAD MONIRUZZAMAN

Age: 40 Y 2 M 15 D

Sex: M

Ref.By

: UNIVERSAL SHIPING SERVICES.

Specimen

Parameter

: Blood

Test Result

Reference Value

HIV1&2Combo

Negative

Cut off rate: 1.0 Sample rate: 0.08

Rabiul Islam Talukder

Biochemist

B.Sc(Hon's) M.Sc (Biochemistry & MB)

Ibn Sina D-Lab, Uttara

Printed By:

Md. Belayet Hossain (Belayet)

Printed On:

14/08/2023 07:02:05 PM



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HAEMATOLOGY REPORT

- u 1 1 5 2 5 6 7 6) A

ID No: U1152567

Voucher Time :

14/08/2023, 04:11 PM

Reporting Time

:14/08/2023, 07:04 PM

Name : N

: MOHAMMAD MONIRUZZAMAN

Age: 40 Y 2 M 15 D

Sex: M Specimen: Blood

Ref.By

: UNIVERSAL SHIPING SERVICES.

Estimations are carried out by CUBE 30 Touch

Result

Referance Value

Parameter ESR

16 mm/1st hour (Auto Analyzer)

Men: 0-10, Women:0-20

Md. Mamun Ar Rashid Rana

DMT (SMF), Lab Medicine Medical Technologist Ibn Sina D.lab Uttara Assoc. Prof.Dr. Sumaiya Khatun

MBBS, MD (BSMMU) (Gold medalst). Laboratory Consultant.

Ibn Sina D.Lab, Uttara.

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14/08/2023 06:59:10 PM

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E-mail : istuttara@gmail.com

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REPORT

I.D. No

U1152567

Received date: 14 Aug 2023

Printed date: 14 Aug 2023 07:32PM

Name of Pt. :

MOHAMMAD MONIRUZZAMAN

Age: 40 y(s), 2 m(s) Sex: Male

Ref. By

UNIVERSAL SHIPING SERVICES.

X-RAY CHEST (P/A VIEW)

- > Lung fields are clear.
- Basal angles are clear.
- > Heart: Normal in TD.
- Diaphragm : Normal in contour and levels.
- > Bony thorax revealed no abnormality.

Comment:

* Normal skiagram of chest.

Dr. A.S.M. Shahidul Hossain

MBBS (DMC), MD (Radiology)
Consultant Radiologist

BSMMU (Ex-PG), Shahbagh, Dhaka

Ibn Sina D-lab, Uttara