



HAQUE & SONS LTD.



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

Accredited By : BMDC
Accreditation No. A55144

PATIENT CONTROL NUMBER:
H1105

MEDICAL EXAMINATION CERTIFICATE

SURNAME DORJOY		FIRST NAME AND NAYMUR	MIDDLE NAME RAHMAN
PLACE AND DATE OF BIRTH BRAHMANBARIA 11-Oct-1995		PASSPORT NUMBER EG0212147	SEAMAN'S BOOK NUMBER CO8608
NATIONALITY : BANGLADESHI	SEX : ☒ Male ☐ Female	VESSEL TYPE : BULK CARRIER	TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : KALAISREE PARA, BRAHMANBARIA SADAR, BRAHMANBARIA SADAR, BRAHMANBARIA, BANGLADESH		CONTACT NUMBER : 0088 01686-060436	
		RANK : 3RD ASST 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	☐	☒	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? ☐ YES ☒ NO

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.

Naymur

Signature of Seafarer

MEDICAL EXAMINATION											
Weight	69 kg	Height (cm)	167	BMI	24.7	Blood Pressure: Systolic	110 mm	Diastolic	80 mm	PULSE	78 bpm
Ear	Hearing by Audiometry										
Right	☐ Adequate	☐ Inadequate									
Left	☐ Adequate	☐ Inadequate									
			Audiometry				Hearing by Whisper Test				
			500	1000	2000	3000	☒ Adequate ☐ Inadequate				
			<i>N/A</i>				☒ Adequate ☐ Inadequate				
Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☒ NO ☐											

	Visual acuity				Visual fields	
	Unaided		Aided		Normal	Defective
	Right eye	Left eye	Right eye	Left eye		
Distant	6/6	6/6			☒	☐
Near					☒	☐

Visual acuity meets the standard laid down in: TCW Code Section A-1/9
 Colour vision as per STCW CODE Section A-1/3: ☒ Normal ☐ Doubtful ☐ Defective

Date of last colour vision test: Date (day/month/year) **10 JAN 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	NAD	BIC CHEMICAL (LIVER FUNCTION TEST)	Marijuana	☐ Positive ☐ Negative
ECG	NAD	BILIRUBIN	Alcohol Test	☐ Positive ☐ Negative
BLOOD R/E		SGPT	URINE R/E	NAD
DC (differential count)	NAD	SGO	OTHERS	
HAEMOGLOBIN (HGB)	13.4	DRUG AND ALCOHOL TEST		HBsAg
ESR (WESTERGREN)	10	Morphine	☐ Positive ☐ Negative	HIV / AIDS Test
WBC	9800	Amphetamine	☐ Positive ☐ Negative	VDRL
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive ☐ Negative	Blood Type
RANDOM	5.6	Barbiturates	☐ Positive ☐ Negative	Psychological Exam
HBA1C	5.2%	Cocaine	☐ Positive ☐ Negative	Others (KUB Ultrasound)

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

Signature of Seafarer: Naymur Rahman Dorjoy Name of Seafarer: NAYMUR RAHMAN DORJOY Date: 10 JAN 2023

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: 10 JAN 2023 Valid Until: 09 JAN 2025

Name and Signature of Authorized Physician

MBBS (DUL DFM, CCD, Birm), PGD (Ophth)

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited.

In Accordance with Medical Examination Seafarers Convention 1958/1960 and STCW 1978/1996 as Amended, MLC 2006

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: DORJOY	GIVEN NAME (S): NAYMUR RAHMAN	
DATE OF BIRTH: DAY 11 MONTH 10 YEAR 1995	PLACE OF BIRTH CITY BRAHMANBA COUNTRY BANGLADESH	SEX MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER DECK OFFICER ENGINEERING OFFICER RADIO OPERATOR RATING	MAILING ADDRESS OF APPLICANT: KALAISREE PARA, BRAHMANBARIA SADAR, BRAHMANBARIA SADAR, BRAHMANBARIA, BANGLADESH	

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION		COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	
RIGHT EYE	6/6	—	RIGHT EAR mm
LEFT EYE	6/6	—	LEFT EAR mm

COLOR TEST TYPE: ~~BOOK~~ LANTERN
 YELLOW **mm** RED **mm**
 GREEN **mm** BLUE **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)

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

NAYMUR RAHMAN DORJOY

Naymur
Signature of Applicant

Name of Applicant

Date **10 JAN 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.), REG NO.: A-55144	
ADDRESS: REDICAL HOSPITALS LIMITED, UTTARA, DHAKA-1230	
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: BANGLADESH MEDICAL AND DENTAL COUNCIL (B.M.D.C.), BANGLADESH.	
DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06-MAY-2014	
SIGNATURE OF PHYSICIAN: <i>Mir Md. Raihan</i>	STAMP OF PHYSICIAN: 
EXPIRY DATE OF CERTIFICATE: 09 JAN 2025	DATE: 10 JAN 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), DFM, CCD (Birdem), PGT (Ophth)

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

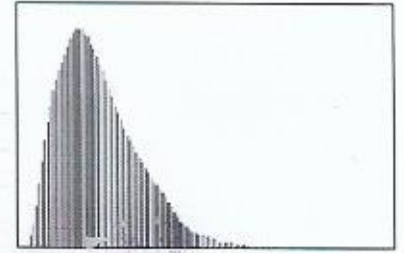
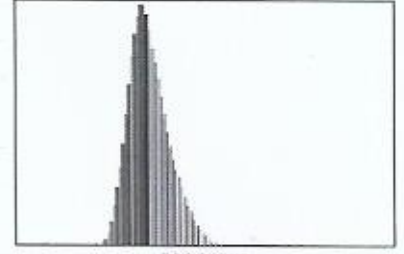
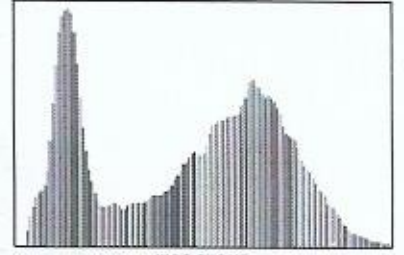
General Physician

Id No : 0177 **Date** : 10-Jan-2023 **D.Date** : 10-Jan-2023
Patient's Name : NAYMUR RAHMAN DORJOY **Age** : 27Y 2M 30D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO : C/O/8608

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	13.4 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. Male:0-10, F:0-20 mm/1st hr.
ESR(Westergreen)	11 mm/1st hr	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Total WBC Count(TC)	9,800 /cumm	
Differential WBC Count (DC)		
Neutrophils	69 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	26 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	03 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	294 /cumm	50-450/cumm
Total RBC Count	4.49 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	37.6 %	M: 40-54%, F:37-47%
MCV	83.7 fL	76 - 94 fL
MCH	29.8 pg	27 - 32 pg
MCHC	35.6 g/dL	29 - 34 g/dL
RDW	11.9 %	11 - 16 %
PDW	16.0 fL	35 - 56 fL
Total Platelete Count (PC)	3,11,000 /cumm	150,000-450,000/cumm
MPV	7.8 fL	7.0 - 11.0 fL
PCT	0.243 %	0.1 - 0.6 %
Bleeding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %




Checked By
Medical Technologist


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

Bill No	DIA23010177	Received Date	10/01/2023
Patient's Name	NAYMUR RAHMAN DORJOY		
Patient's Age	27Y 2M 30D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC :C/O/8608		
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	ReferenceRange
Serum Bilirubin (Total)	0.7mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	23 U/	Up to 37 U/L
Blood Sugar Random (RBS)	5.6 mmol/L	<7.8 mmol/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 Technologis
Radical Hospitals Ltd.


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



Bill No	DIA23010177	Received Date	10/01/2023
Patient's Name	NAYMUR RAHMAN DORJOY		
Patient's Age	27Y 2M 30D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC :C/O/8608
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	"O" (-ve)
Rh(D)Factor	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



Bill No	DIA23010177	Received Date	10/01/2023
Patient's Name	NAYMUR RAHMAN DORJOY		
Patient's Age	27Y 2M 30D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC :C/O/8608		
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	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 Technologist

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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	: 23010177	Receive: 10/01/2023	Print: 10/01/2023
Patient's Name	: NAYMUR RAHMAN DORJOY		
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: 2

Nestor, R
Male 27 Years

10-01-2023 03:52:23 PM

HR 92 bpm

P 84 ms

PR 126 ms

QRS 92 ms

QT/QTc 356/441 ms

PQRS/T 51/39/28

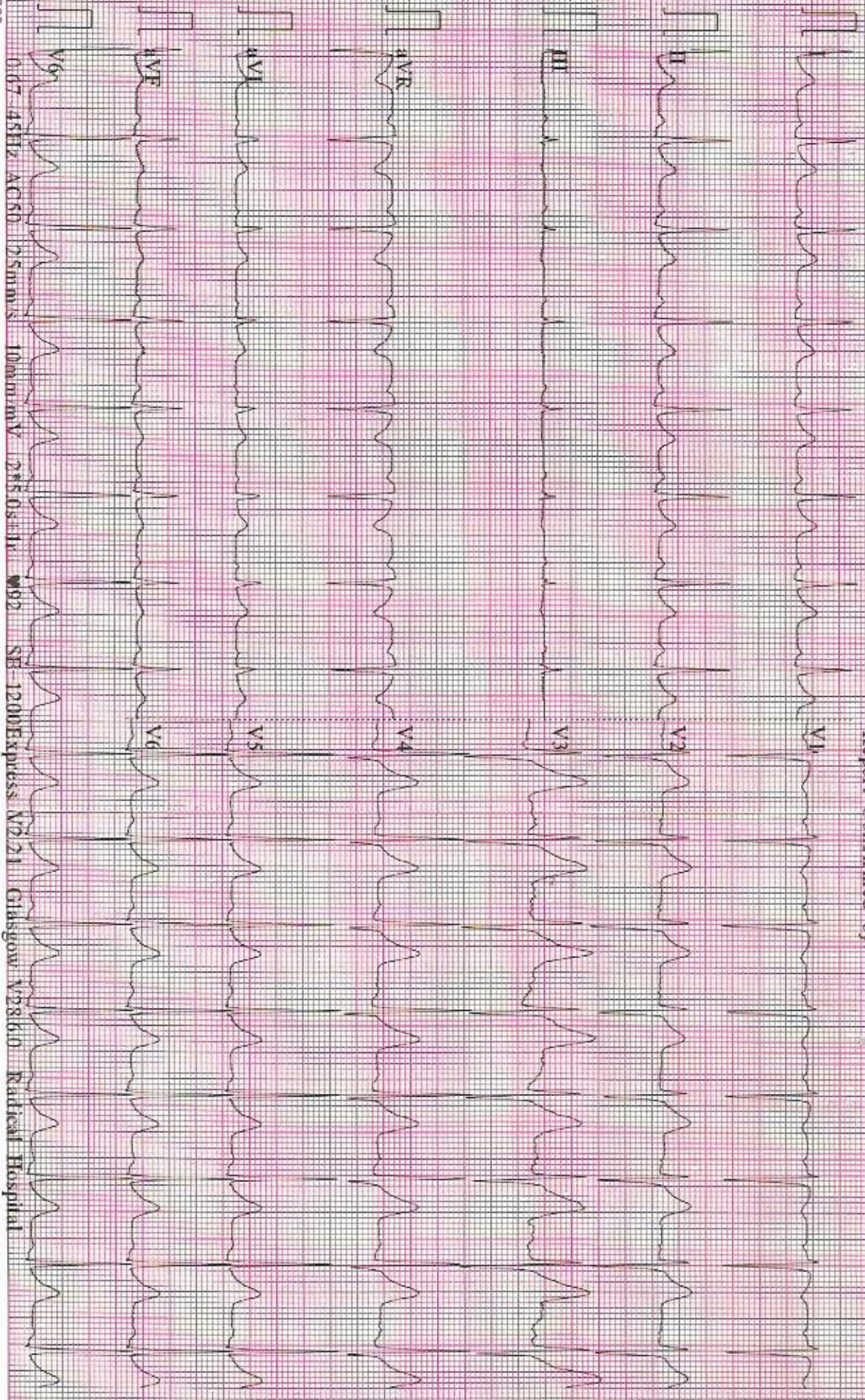
RV/SV1 1.993/1.541 mV

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



REF: MV. RED LILY

DATE: 10/01/2023

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

EYE EXAMINATION REPORT

NAME: NAYMUR RAHMAN DORJOY

RANK: 3A/ENG

CDC NO:C/O/8608

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

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OTHER VACCINATIONS AUTERS VACCINATION

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