REPORT OF MEDICAL EXAMINATION OF SEAFARER BY AN APPROVED MEDICAL EXAMINER. As per Merchant Shipping (Medical Examination) Rules 2000 and ISM / STCW code 1/9 and ILO convention 147 (MLC 2006)

DR. MIR MD. RAIHAN MBBS, (DU), DFM

RADICAL HOSPITAL LIMITED,

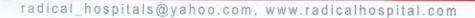
35 SHAH MAKDUM AVENUE, UTTARA, DHAKA-1230,

I	EL: +8802	27920116, -	+88 C	1955	5670	000.	EMAIL: r	adical_l	nospitals@	yahoo.co	m		
	ND	AM	7112	2_		141	7M2AS	ex: M	Serial No:		-		
Suma Date of Birth:	15/	10 / First Na	me	PP/	CDC.	Middle	1/316	200	Rank:	5-7	2		
Vessel:				n12	Type:		11 110	- 0 7	Route:	2020	016	10/1	de
Home Address:	Bazun	MEGENA Tenk, Bal	ugit	rat, 1	ma	ka	Chanto	ment	. 1		Dett	-00	-
Company Name		HPS	•			-							
Medical Histo				Please :	answ	er the	e following	to the b	est of your k	nowledge	-		_
Is there any pas		story of any of	Can	didate	Exan	niner	Tonowing	to the b	est of your k	Candida		Exa	mine
	he following	story or any or	Yes Yes	No.	Yes	No				Declarati			cord
Severe one-sided head	daches (Migraine)		163	-	165	1	*Hemia / Hydro			Yes	No	Yes	No
Head Injury / Concus Fits / Epilepsy / Dizzi		mmory			7		*High / Low blo				1		
Eye / Vision Problems				-			Asthama / Bror Allergy / Skin		rculosis		1		-
Hearing Impairment Ear / Nose / Throat p	roblome			/		1	Infection / Cor				1		
Stomach / Bowel disc				1		1	Addication to a	ocation / Inju	ry / Amputation		4		-
Gall stones / Kidney o				1	- 8		-Major / Minor		77. ****		4		
Jaundice / Liver Disea Piles / Varicose veins				1	- 3	1	, Diabetes , Nervous / Men	tal dispaso /	Sleen disorder		11		
Blood Disorder				1		1	Mallignant dis	ease (Cancer)		1		
Female Disorder Notes					- 3		Signed off on	medical grour	nds / Declared Unf	it			
Medical Exar	mination					_							_
Height	Weight in Kgs	Chest Insp-Exp	Blood	Pressure	in mm	of Hg	PulseBeat	s/min	Resp.Rate / min	Gen	eral Cond	ition	
1620m	6719	41 20	22	0/7	den	2	78011	in &	Abinn	1501	200	/	
Distant Vision	Uncorrected	Corrected	Fic	eld of Vie			Audiometry	Hz 500		3000 4000	5000	6000	800
Right Eye Left Eye	665			Abnorma			Right Ear	1d820	20 20		777		
Colour Water Ishih		Normal	12		ormal	_	Left Ear	08 E2	Right Ear		Left	ear	
Other	r	Ngrenal	•	Abn	ormal		Hearing		4	-	1		
Systemic Exa	amination	Normal Abnorm	al			No	tes	Manufest C	/	/	Norma	Abn	orma
Head & Neck Eyes		1	- 17	TIT F					Respiratory syste Cardiovascular s			-	
Ears / Nose / Throat			_ '	-111 1-1	UK.	SEA	SERVI	CE	Per Abdomen	istem.	1	1	
Teeth / Oral Cavity Musculo-Skeletal syst	tem	//	-11	AS /	-17	72	R		Genito-urinary sy	vstem	/	1	77
Nervous system		1/1		AS PI	FRI	ALC:	2006		Others Hemia / Hydroco	oele	1	1	
Reflexes Skin							Medicals		Varicose Veins		1		
Investigation	ıs		E	III SHIES	U UP	KD	Medicals	done	Fissure/Fistula/P	iles	100		
Blood		Result	-1	No	rmal		Urine			_	1		
Hemoglobin		3.5 gm%		-16 gm %			Colour		now	1			A
Total WBC count Neu 73 9	% Lymp 24	% Eos 0_3		00-11000			Specific Gravit pH		ri/				A
Malarial parasite	2,110	NOT F			Me	70	Albumin		9		page .	-	-
ESR SGPT	28			- 15 mm / -43 U / L	hr		Sugar		V .	1		1	17
S.Cholesterol		mg/dl		260 mg	/ dl	-	Bile pigment Bile salts		6	-	le le	2	P
S.Triglycerides Blood Sugar	NYZ	ang/dl	up	to 200 mg	J/dl		Occult blood	1	7			- 1	1.0
HbsAq	KDS.	VE TIER	upt	to 125 mg	90	-	RBC cells Leucocytes	- 6		VIR MD &	100	11	Mus
HIV1&II	- 1	Well	ee				Others				30	100	100
VDRL Others		von Ke	se.	al a	GTP U	/L	Spirome	try: 1	roma	S KADICAL HOSPITALS		57.99	
Blood Group	2000	7 7117		~ -	-		Drugs of	ne	Muid	EL LTD	\$		
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Result of Me													
On the basis of the		story, clinical exa: porarily unfit		n and dia manently			, I,Dr. M Should be re-e	IIR MD Raih		clare the exam		edically	
Remarks /		porarily drint	ren	maneriuy	unit		silouiu be re-e	xamined in	days /	weeks / mon	uns.		
Recommendations I, Doctor's Name: DR	S LMIR MD. RAIHAI	77 JAN 2025	rmation	required	inder Ar	nnevo eo	F& FOFMS (Medical Evans	nation) Pulse 200) is incomposited	in this c	'artificat	0
This certificate is	s valid till:	UT JAN 2025)	- equitor b	- Total Pil	C	and the state (I	-coroai CAdiffi	nation) Nuits 200	o io incorporaceo	an uns C	za uncati	500
Candidate's Signa		'			-	A 100 miles				Doctor's sig		1	
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Date: 08 J/	AN 2023			. (2		1/2/			MINI	No.		1
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				-			2006		DR. N	MIR. MD	RA	IHAI	N

Or Department of

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

04.2023.3098





Id No : 0146

Patient's Name: MD AMIR HAMZA

Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:T/31084

D.Date: 08-Jan-2023

Gender: Male

50)/668(BINDEN)/, GT(EYE)/, DTM CDC NO. 1/3106

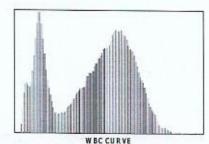
Date: 08-Jan-2023

Age: 30Y 2M 23D

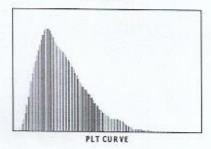
Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	15.5 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)	10 mm/1st hr	Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	9,500 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		0,000-10,000/carmin
Neutrophils	73 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	24 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	01 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	95 /cumm	50-450/cumm
Total RBC Count	5.04 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	38.8 %	M: 40-54%, F:37-47%
MCV	77.0 fL	76 - 94 fL
MCH	30.8 pg	27 - 32 pg
MCHC	39.9 g/dL	29 - 34 g/dL
RDW	12.4 %	11,- 16 %
PDW	14.2 fL	35 - 56 fl
Total Platelete Count (PC)	1,94,000 /cumm	150,000-450,000/cumm
MPV	9.4 fL	7.0 - 11.0 fL
PCT	0.182 %	0.1 - 0.%
Bledding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %



RBC CURVE



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Checked By

Medical Technologist

~

Dr. Sumaiya Khatun

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



Bill No	DIA23010146	Received Date	08/01/2023
Patient's Name	MD AMIR HAMZA	received Date	06/01/2023
Patient's Age	30Y 2M 23D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(B	BIRDEM),PGT(Eve),DFM	CDC NO:T/31084
Sample	BLOOD	,, - (-,,,-,	00011011004

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Liver Function Test		
Serum Bilirubin (Total)	0.8 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	20 U/L	Up to 40 U/L
Serum AST (SGOT)	28 U/L	Up to 37 U/L
Serum Alkaline Phosphatase	160 U/L	98 - 279 U/L

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 MBBS, MD (Microbiology) Assistant Professor Dept. of Microbiology

East West Medical College and Hospital



Bill No	DIA23010146	Received Date	08/01/2023
Patient's Name	MD AMIR HAMZA		0.0112020
Patient's Age	30Y 2M 23D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CO	D(BIRDEM),PGT(Eye),DFM	CDC NO:T/31084
Sample	BLOOD	STATE OF CONTROL OF THE STATE O	2000 AND AND THE STATE OF STREET

SEROLOGYCAL REPORT

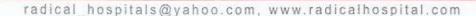
Test Name

Result

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

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	DIA23010146	Received Date	08/01/2023
Patient's Name	MD AMIR HAMZA		
Patient's Age	30Y 2M 23D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIR	DEM),PGT(Eye),DFM	CDC NO:T/31084
Sample	URINE		T. II

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

Test Name Result

Drug Level of Urine

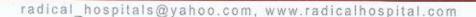
Cocaine	Negative
Morphine	Negative
Marijuana	Negative
Barbiturates	Negative
Amphetamines	Negative
Phencyclidine	Negative
Alcohol	Negative
Benzodiazepines	Negative
Methadone	Negative
Propoxyphene	Negative

Checked By

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Medical Technologis Radical Hospitals Ltd. Dr. Sumaiya Khatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology

East West Medical College and Hospital





Bill No	DIA23010146	Received Date	08/01/2023
Patient's Name	MD AMIR HAMZA		
Patient's Age	30Y 2M 23D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO:T/31084
Sample	URINE		*

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	1-3/HPF
Sediment	Nil	Epithelial	1-2/HPF

CHEMICAL EXAMINATIONCASTS / LPF

Reaction	Acidic	RBC	Nil
Albumin	NIL	WBC	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

16_

Medical Technologis Radical Hospitals Ltd. Dr. Sumaiya Khatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology

East West Medical College and Hospital



Date: 08/01/2023

EYE EXAMINATION REPORT

NAME:	MD AMIR HAMZA		
AGE:	30 YRS	RANK: FITTER	CDC NO: T/31084

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

616

616

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



AUDIOLOGICAL REPORT

Patient Name : MD AMIR HAMZA

08/01/2023

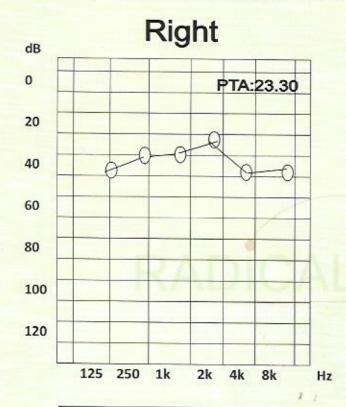
Age

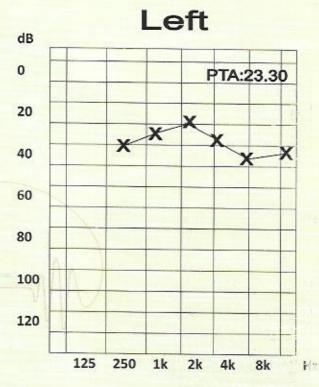
:30 Yrs

Address

: RHL, UTTARA

Referred By : Dr. Mir Md. Raihan , MBBS,(DU), DFM





0-25= Normal Hearing.

26-40= Mild Hearing Loss.

41-55= Moderate Hearing Loss.

56-70= Moderately Severe Hearing Loss.

71-90= Severe Hearing Loss.

91-120= Profound Hearing Loss.

Right Ear Left Ear Air Unmasking OX Bone Unmasking Right Ear Left Ear Air MaskingOX Bone Masking AA

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23010146 Receive:08/01/2023 Print: 08/01/2023

Patient's Name : MD AMIR HAMZA

Age : 30 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 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

Certificate (co	antinued) Certificate (quite)	COMMUNICA	verled Suite ou go
OB PHIS	DR: MTR. MD. RAIHAN MB8S (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved	S5, Shah Maldhdum Avenue Witters, Utilates	ORAL CHOLERA 10 "DUKCRAL" Valid Upto 2 yrs
10	General Physician Radical Hospitals Limited.	ANGLADES!	WP.
first injection date of that re	of this certificate shall extend for a perior of the vaccine or in event of a revaccine vaccination.	ation within such per	iod of two years on the
1	y in which the vaccination is performed ent of this certificate, or erasure, or fail		oart of it, may render it
15 a	OTHER VACCINATIONS	AUTERS VACCINA	ATION
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Date	Nature of vaccine	Physician's Signature
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INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that whose signature follows

Date of birth 15-10-1992

Sex

made.

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
CORD -	DR. M. AYUBUR RAHMAN M.B.B.S; P.G.T (Medicine) Taher Chamber 10, Agrabed C/A, Chittagong. Regn. No. A-11820	(313)	1 2 STOR WACO GREEN MACO STORY MACO ST
2 8	DRAMAAYUBUR BAHMAN MB.B.S. R.G.T IMagnormaj Tahler Chamba: 10. Agrabad C.A. Chamao.mg Twight, Nov. A. 1111 43		
3	No algracian Colo Challes and Colo		3 4
4	and white their conseque	() (Carried)	

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.