		As	REPORT per Merchan	t Shipp	oing (M	ledical E	kamina	tion' Am	endmer	t Rules, 20	OVED MEDICAL 300 and ILO IMO, 0, Code 1/9)	EXAMINER /345/2011	/2012			125
	KHAN	M	OHAM	ME	OA	SHR	AF I	4055A	NSex:	MA	LE Serial	No.:			-	
Date of Bir	th: 30) — I	0-196	NAME	PI	P/CDC N	0.:	A 00	97.	3678	Nation K-L, BAS LIMITE	ality: 13 A	WGL	ADES	HI	
Rank:	ETO	-	Vess	et GA	LVE	STON	1+14	HWM	Y Type:	PC	2	Route:	WOR	LDN	JDE	
Home Add	ress: FLA	1-	ASI H	OUS	E-7	447	MA	MO-	11 /	Loci	Z-L, BAS	HUND	HARA	+ RYA	, D 1+1	RKA
Medical I	distory :	Pi	ease ansy	ver th	e folk	ngiwo	to the	hest of	- IV	knowled	LIMITE	D				
	iny past/pr				Cano	ridate	F-0-1	er Record		and the second second	st/present histo	ery of nov		ficiate	Faamin	er Record
	of the fol			-	Yes	No	Yes	No.	-	of t	he following?	ny ut any	Yes	No	Yes	No
	ide headaches Concussion / t					1			Hernia /	Hydrocoele /	Appendictis		162	-	149	1
	/ Dizziness /			-		1		12:			ure / Heart Disease / Tuberculosis			1		6
Eye / Vision / Hearing Impa	Problems (Gla	eses e	Htc)	-		1		1		Skin Disease / Contagiou				1		1
Ear / Nose / 1	Phroat Problem					1			Addiction	n to alchehol	/ drugs / tobacco			1		5
	wei Disorders Kidney Disorde	ers.		-		1		1/		/ Dislocation Amor Operati	/ Injury / Amputati	10		1		1
Jaundice / Liv	er Disease					1		-	Diabetes					1/2		
Plies / Vericos Blood Disorde	er .					1		1		/ Mental disc nt Disease (C	sase / Sleep disorder ancer)			1		12
Female Dison Notes :	ders					/		1/			ground/Declared Ur	sfit		1		
Cate:	end other medi	cal be	nefits.	Program.	Assista					Econy.	nce that any omissio	e Seatone			M	an
THE RESIDENCE OF THE PARTY OF T	in cms		Weight in K	gs	Blood	f Pressu	re in mr	n of Hg	Pulse	beats/min	Resp. Rate/	min I	Gen	eral Appe	arance	
16	3		54		22	0/80	m	2_	720	Bhin	2am	10		HEALTH	ſΥ	
Compilant with	Distant Vis		Uncorrected	Corre	F	eld Of V	/ision	Audiom			000 2000 3000	4000 5	000 60	00 800	O Comp	diant
MLC2006, STCW 2010	(Snellen's C	-		-		7001	hal -	Right E	-	202	020	- No	t Indica	ted	With MLC2	
STANDARD A- 1/9	Left Eye	_		60	2	Abno	rmal -	Left E	-		O CO	100		Faller		7 2010 DARD
Colour	Ishihara	_	Norm		01	Abnorm	al	Right	-		4 METER	-	spered \ 2 METER	-	A-1/	9
Vision	Others		Norm	ial	-	Abnorn	ial l	Left	Ear		4 METER	~\$	2 METER	Control of the Contro	1_	
Systemic Head & Neck	Examinat	ion		Norm	Abr			-	tes		Description of the					Abnor
Eyes		-		7	1	TFIT	FO	RSE	A SE	RVICE	Respiratory System Cardiovascular Sy			-	-	
Teeth / Oral C				4	-	AS		17			Per Abdomen				1	
Musculo-Skele	etal System			1		_	-	RMLC	200	16	Genito-urinary Sys Others	cem			·	
Nervous Systi Reflexes	em			4	-						Hernia / Hydrocoe	e			1	
Skin				1		Enna	inced	GAKI) Med	icals do	Vericose Veins Fissure / Fistula /	Piles			/	
Investiga		dia.		Person						// C		TO TO SERVE	Name of Street	A LINE SERVICE		
Heamoglobin	lood	+	Resi	Discharge Manager	- 1	1:13-17 F	Normal		Colour	Urine	Result	-		-		
Total WBC Co	Market Sales S		8.02	0	[4	000 - 100			Specific	Gravity	10/10				1	
ESR	Lymp/9%	Ole I	0/	Mo %	-	- 10 mm	The		Albumir	1	1 7					
SGOT SGPT		-	38			- 35 IU / 0 - 60 IU			Sugar Bile Pigr		9			1	-	
Cholesterol		1	143		11	30 - 220 (ng / dì		18de Sat	t	4			45	8	
 Triglyceride Blood Sugar 	ms .	+	137			pto 200 m pto 140 m			RBC Cer		1 %		1			
Creatinine GGTP		-	0.90		· e	pto 1.5 m	g / di		Leucocy	tes	14		11/		A	
HbsAg			me	wi		pto 55 IU	12		Spiror Drug	of Abuse	W. Com	0	ME		/ (6)	No.
VDRL		-	NO	all	=				TMT		Nege	mentioned : Section			ditter	
Others			04	100	25				USG		Nonn	MD	RA			REPAIL
Blood Group	Madiant		de action						XRay	(Chest PA	North	A DIO	1/3/			
	Medical E	-	CONTRACTOR OF STREET	& diame	stir test	. 1			reby dack	are the abou	examinee has been	LIBOSPIT	التاعيد			
	commendation				-	-7.44		110	and mary	the soon	SAME TOUR DEED	San Andrew	19	- W		
4						xure £ &	F of M.S.	Manual Q	Dita	n) Kules 200	0 are incorporated in	the common	2			>-
Date of Med		74	JAN 202	3			100	Silver	105	1		-	-	Am	00	
Date of Med	ical fitness:	24	JAN 2023	3			1	Ac Dos M	C anna	=11		-	.4	The same		1
Validity of	Medical Certif	licate	2 3 IAN	7074			*Aog	As Per-Mi		2	710	MRRS	DIN THE	- MD	RA	T (Only)
ENTITY of CA	NDIDATE CON		San State of the S	(C-10) T-2	2 () Q	Or	vij Depar	men of St		W 11		Ger	eral Phy	sician	PICAL.
	U4 .	1	UZJ	, 0	2	, 0		-					naulcai	Hospita	is Limite	BQ.

MEDICAL CERTIFICATE FOR FITNESS FOR SERVICE AT SEA

FIT FOR DUTY ON BOARD SHIP

Last/Family Name		First & Middle /Given Name	GP sition applied for	
KHAN		MOHAMMED ASHRAKI HOSSAIN KHAN	E + 6	
Date of Birth	Sex	Nationality	ID (Passport/Discharge book) No.	
30-10-1961	MALE	BANGLADESHI	A00973678	
standards of MLC 2006 Re	eg 1.2; STCW 2010&the g er's personal declaration, r	tablishing his identity as per the documents mentioned a guidance for the conduct of medical examination issued I my clinical examination, the diagnostic test results obtain is -	by the Directorate, as amended from time to	time.
(a) that the hearing mee	ets the required standards	for his rank:-	Xes	No
Unaided hearing is sa	atisfactory		Ves	No
(h) Vieual aquity meets	the required standards for	r his rank		
	the required standards for the the required standard		LYes	No
that he is fit for look			// // // // // // // // // // // // //	No
	out outy		The s	No
(c) that he needs visual	aids / informed to carry sp	pares	Yes	No
(d) that he is taking red	gular medication & seafare	er does require		1/
	his tenure on board vesse		Yes	No
		ease likely to be aggravated by, or render him e health of other persons on board ships	Yes	No
(f) this seafarer is FIT F	OR DUTY without restric	ctions* as mentioned below		
** Reasons for being t	cate is issued with follo			
Physician Signature: Physician Name Printed	#:	DR. MIR. MD. RAIHAN MBSS (DU), DEM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician	Clinic Stamp	1
Date:	2 4 JAN 2023	Radical Hospitals Limited.	As Per-MLC-2006	
Valid Till:	2 3 JAN 2024		3 Department of 3	
Authorizing body o	of Medical Examiner:	Directorate General of Shipping, Govt.of Bang	pladesh	
I acknowledge, that I I	have been advised of the	he content of the medical certificate & of the rights	for a review and my obligations.	
	2 4 JAN 2023			
Seafarers signature w	vith Date:-	Kan		
Delete whatever is not applical	ble	4		
MLC 2006 Reg 1.2		Med Cert for Fitness for sea-service page 1 of 1 Rev 2	(02/13)	
04	.2023.3	208		

1	MEDICAL CERTIF	ICATE FO	OR PE	RSONNEL SERVICE ON BO	DARD
SURNAME: (<h< td=""><td>AN</td><td></td><td>GIVEN N</td><td>NAME (S): MOHAMMED HOSSAIN</td><td>ASHRAF</td></h<>	AN		GIVEN N	NAME (S): MOHAMMED HOSSAIN	ASHRAF
DATE OF BIRTH:				OF BIRTH BANGLADESH	SEX
DAY 3 0 MONTH	10 YEAR 196	1		HAKA COUNTRY	MALE FEMALE
POSITION ON BOARD: MASTER DECK OFFICER ENGINEERING OFFICE RADIO OPERATOR			BLO	GADDRESS OF APPLICANT: T-A8, HOUSE-7 CK-L, BASHUND KA, BANGLADES	HARA RIA
RATING	AUTHORIZED PHYSICI		~ H~	(CA, BANGLABE)	Н
DECLARATION OF THE	V-1-10-10-10-10-1	AN			
	VISION		/	COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLA	ASSES	BOOK	***
RIGHT EYE		6-4	6	YELLOW RED RED	IGHT EAR AND
LEFT EYE		60	0	1. /1-	EFT EAR ///
Confirmation that identifie	cation documents were ch	ecked at the p	point of e	xamination: YES- NO	
Hearing meets the stand	ards in STCW Code, Sect	on A-1/9? YE	SE	NO NOT APLICABLE	
Unaided hearing satisfac	tory? YES NO			2	
Visual acuity meets stand	dards in STCW Code, Sec	tion A-1/9? Y	ES	ANO []	
(the visual test it is requir Date of the last colour vis Are glasses or contact le	sion test: (Day/Month/Year nses necessary to meet th	24.	JAN, 20.		
Able for watchkeeping?	res_ NO [1/2012			
Is applicant taking any no	on-prescription or prescrip	tion medicatio	ns? YES	□ NO □	
	any medical condition like ther persons on board? YE		Vated by	service at sea or to render the seafare	rs unfit for such service or to
Hereby I declare that I ar	n in knowledge of the cont	tents of the Ph	nysical Ex	kamination.	
ASK	am.			x	2 4 JAN 2023
Signature of			Name of	Applicant	Date
CIRCLE APPROPIATE	CHOICE: (HE / SHE) I R / RADIO OPERATOR /	S FOUND T RATING) (WI	O BE (F	IT / NOT FIT) FOR DUTY AS A (MASTER / DECK OFFCIER /
	FI	FOR DU	IY ON	BOARD SHIP	
NAME AND DEGREE OF ADDRESS: PHYSICIAN'S DATE OF ISSUE PHYSIC	CERTIFICATING AUTHO	SPI ORITY: 1	21	MD. KAMPAN CAMPANGA OB MARIA DE MARIA	N MISUADA. MY
SIGNATURE OF PHYSIC	CIAN:	-:1	STAMP	OF PHYSICIAN PERMIC 2006	DATE: 2 4 JAN 2023
EXPIRY DATE OF CERT	***	23 JAN		pliance with the featurements and the Maritime Labora Conversion 2006	
	DR. MIR. MD. R MBBS (DU), DFM, CCD (Birdem) BMDC A-55144, MMC-	(AIMAN , PGT (Ophth) BGD-016	anemiet a	Dannie Land	
ī	OG Shipp.ng Bangladesh General Physicia Radical Hospitals Li	an			



WALLEM SHIPMANAGEMENT(INDIA) PVT. LTD.

REQUISITION FOR SEAFARER'S MEDICAL EXAMINATION

	1		ential Document)	
From:		UNIVERSAL SHIPPING SERVICE town Complex (15th Fire	007)	
		87, New Eskaton, Dhaka-10	100	
(Please write Na	ame, Address &	Contact Details of Man	ning Centre)	2 MD o
7.7	RADICAL HOSP			RADICAL
			Doctor/ Clinic/Examiner)	* (HOSPITALS) *
Please carry or	ut medical exa	amination of the seafar	rer, the details and requi Date	rements for which are as stated below.
(Name & Signa Examinee's D		nsible Person from Ma		2 4 JÁN 2023
Full Name : 17 Date of Birth :	1014AMN 1055AIN 30-16-19	150 ASHRAK A 15HAN 61 Rank: ETO	ddress: FLAT - AS BLOCK - L, Name of vesse	HOUSE-747 KOAD-11 BASHUNDHARA RIA, DHAKU to be assigned: GALVESTON 1-116H
			e area : WORD	
(Container, Ta	ınker, Passeng	er etc) (e.g.	Coastal, Tropical, Worl	dwide):
CDC No. : 4	0/01255	Passport No. : A-00	973678 Crew ID.(fr	om Compas): 3694
	A0		tine & Emergency Dutie	
As per requir	ements of ap	plicable P&I club:		
☐ West of E	ngland P&I	☐ UK P&I	☐ Steamship Mu	tual Underwriting Association
☐ Britannia I	P&I	☐ Skuld P&I	☐ North of Engla	and Association P&I
☐ Standard P	1&°	☐ Gard P&I	☐ London Steam	ships P&I
☐ Japan P&I		☐ American Ste	amships P&I	Others :
As per requir	ements of ap	plicable Flag State :		
Liberian	\square NIS	Panamanian	Marshall Islands	□ _{Malta}
☐ Danish	☐ ILO	□ UK	Others:	
Medical Exar WSM(I)'s Qual		dule (as applicable):	_A +B	(Please refer to "Annex 1" of
		se write any past med	ical history [Injury or I	Illness] in detail; any history of allergy to
drugs should b	e mentioned i	n the box provided be	low:	
DI I	1 . 4			
		owing statement :-	has been fully declare	d to the Company Doctor and any false
				present illness and/or modical condition(s)
will disqualify	me from any	employment benefits	and claims."	Times
Alfra	m.		Hoonie	And the second
Seafarer's S	ignature		Sical Hospitals	Doctor's Signature
Date: 7 Driginal: Doctor	& Conv : Man	ning Centre	* (As yer-MLC-2006) *	Date: 2 4 JAN 2023
Remark: The doc	ument to be up	loaded into CMS under		DR. MIR. MD. RAIHAN MBBS (DU), DFM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp,ng Bangladesh Approved
04	.2023	,3208	Department	General Physician Radical Hospitals Limited.

WALLEM_

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED

BY AN APPROVED EXAMINER

In accordance with:

STCW Convention, 1978, as amended, MLC 2006,

tLO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended Form: OHF 48 Version: 01 Date: 18 Aug 21 Page: 1of7

		(Confidential D		State of the state		
Pre-Sea	Evam: P	Periodic E	xam:		Othe	er:
mination for duty aster: eck Officer: ng Officer: atings: ook: lither: fease specify _	Y/N: Y/N: Y/N: Y/N: Y/N: Y/N: Y/N:		Fit to perform the duties he/she is to carry out.	Fit to perform the duties he/she is to carry out with the prescribed medicines which will not affect seafarer's health while	Temporar unfit to perform t duties he/ is to carry	he perform the duties he/she
	RADI HOSP	TALS X		onboard.	П	
ame, Address wi	th Contact details o	f Manning Centre:		E/, New Eskaton, Phone-934	x (15th Floor) Dhaka-1000 17867	
essel to be		Routine & Emergency		Position Of Applied for		
ssigned:	ntainer, Tanker,	Duties (if known):				
assenger etc):	oastal, Tropical,		Tropical		Wo	rldWide [
case of any wr		Part I - Examinee's Person ee is to be answer the follo (Assistance should be representation/ suppression e/ liable for the consequen	wing to the bes	edical staff)	of a selection	gament the concerned
aws.			's Personal Detail			
Name of Examir	nee (Family/ last, fi	The second secon		0 010	ev C	PALABI,
Home/ Permane	ent Address:	DHAKA-12 FLAT-A8, I BASHUNDH	16, BAN +0USE-	GLADES 747, R	0AD-	11, BLOCK-
Mailing Address		30 1 1		961	Sex:	MALE
Date of birth (d	ay/month/year):		201	NGLADESH	Rank:	ETO
Place of Birth:		BANGLADESH NATIO	-	· · · · · · · · · · · · · · · · · · ·		
Civil Status:	. 10: . 10:	- A	TOSPIGO 7	3		
Identity Docs/ No:	Passport /Discharg	10/	7-761	921	. 1	
Is there any history of any	past / present of the following	Examinee Examiner	1	any of the followi	ing Exa	aminee Examine

WALLEM_

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Form: OHF 48 Version: 01 Date: 18 Aug 21

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(Confidential Document)

	Decla	ration	Rec	ord		Decla	aration	Rec	ord
	Yes	No	Yes	No		Yes	No	Yes	No
Loss of Consciousness/ Fits / Head Injury / Dizziness / Loss of Memory				/	Malignant Disease (Cancer) including Lymphoma, leukaemia and related conditions Recurrence – especially Acute Complications, e.g. Harm to Self from Bleeding and to pthers from Seizures / Tumor			7	/
Neuropsychiatric diseases or Depression/ Suicidal Tendency/ Psychosis			1	/	Stomach / Bowel Disorders/ Digestive Disorder				/
Ear (Hearing, tinnitus) Problems / Impairment			7	/	Gall Stones/Jaundice / Kidne Disorders	у		,	/
Mental Diseases, Breakdown / Sleep Disorder			î	/	Severe/ Frequent/ One Sided Headaches (Migraine)		/		/
Fractures / Dislocations / Injury / Amputation/ Restricted Mobility				1	Back / Joint Problems/ Wrist Problems/ Slipped Disc			7	/
Eye/ Vision Problems (Whether using Glasses/ Contact lenses)			°	/	Hemia / Hydrocoele / Appendicitis			,	
Balance Problem		1		1	Piles / Varicose Veins				/
Sinuses/ Nose/ Throat Problems		/		1	Allergies / Rash/ Skin Diseas	e	/		/
Thyroid Problem			1	/	Semale Disorders			2	1
High / Low Blood Pressure/ Blood Disorder		1		1	Major / Minor Operation/ Surgery			7	/
Heart Disease, Surgery / Chest Pain / Vascular Disease (inc. Pedal Pulses)		1	p	/	Contagious Diseases/ Gastrointestinal infection / Other Infections		/	7	/
Chronic Cough/ Asthma / Bronchitis / Tuberculosis/		/		/	Sexually Transmitted Disease/Infections			7	/
Shortness of Breath				/	Addiction to Alcohol/Drugs/Ogarettes /Tobacco.				/
Rheumatic Fever	(52.0)	1		1	Diabetes		/		/
for Male Examinee Yes	No I	f "Yes", [give deta	ils	fe	or Female E	xaminee -	Yes	No
Prostate Problems/ Testicular Lumps	1)			N	reast Lump Menstrual P			
Penile Discharge	1				P	regnancy	1		1
Multiple Partners	1				A	Multiple Pa	rtners		1
If "Yes", to any of the above, p	olease e	xplain:			- Assessment Control				-

Additional questions :	Yes	No
Have you ever been signed off on medical grounds, declared unfit or repatriated from a ship?		1 -
Have you ever been hospitalized?		1 -
Have you ever been declared unfit for sea duty?		1/
Has your medical certificate ever been restricted or revolved?	GL edd as	1
Are you aware that you have any medical problems, also a server the sesses?	10 5 10 1 / J	1
Do you feel healthy and fit to perform the duties of your designation occupation?		1
Are you currently under a doctor's care/ medication / wice and		-
Are you allergic to any medications?	Million (Million	1 /
Malaria, Typhoid, Viral fever (Dengue, Chikungunya, etc), Chicken		1
Liver diseases (Hepatitis A,B,C,D & E, Amoebic Absces %)		1 -

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED

BY AN APPROVED EXAMINER

In accordance with:

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(Confidential Document)

Arthritis Spandylasis (Os						
the state of the s	steoarthritis, Rheumatoid) & Go	out				
	you consumed any of these Drugs/					-
Cough Syrup, Sleeping Ta	blets, Cold, Action 500 etc.					-
Pain Killers, If Yes, Pleas	e State name of Drug Crocin/ As	prin/ Fortwin etc.				-
	leptic Drugs, Nasal Drops etc.					7
Any Medicine/Injections						-
To What Extent Do You U		. Gga	rettes:			
Tobacco:	, Drugs:		7-2	and the same of the		
Are you taking any non-p	rescription or prescription med	ications?				-
	dications taken and the purpos		4000			
Date and contact details	for previous medical examinat	ion (if known):				
	ave travelled through high risk of call in your last vessel).	areas? If yes, please m	ention the name	s of countrie	s that you ha	ve
Family History:			esentation was		Yes	No
Diabetes				White Street Street		
Blood Pressure/ Heart Di	isease					1
Mental Illness/ Epilepsy	// Seizure		A Charteen To			1
Cancer			84-00F			1
					a vestionistic	YEAR U.S.
Any other major conditio	ns?					Vector II.
Would you say that your	health is: Excellent * Good * 1	AN				
Would you say that your		AN	01255 hereby	declare tha	at I have ma	de fu
Would you say that your I <u>Моцамм ЕБ</u> АS disclosure of all of my m	health is: Excellent * Good * I HOSSAIN 14H HRAF holding Passpor nedical history to the doctors a	ハル t/Seaman Book no <u>し</u> o nd staff of this clinic. I	am aware that t	he informati	ion supplied	by m
Would you say that your I <u>Моцаму ED</u> AS disclosure of all of my n forms the basis upon	health is: Excellent * Good * I HOSSAIN 14 H HRAF holding Passpor nedical history to the doctors a which I will be offered en	TAN t/Seaman Book noo nd staff of this clinic. I nployment as a seaf	am aware that t arer. I understa	he informati nd that in	ion supplied the event	by m of an
Would you say that your I MOHAMMED AS disclosure of all of my m forms the basis upon misrepresentation eithe	health is: Excellent * Good * I HOSSAIN 74 H HEAF holding Passpor nedical history to the doctors a which I will be offered ener by statement or omission I w	t/Seaman Book no/lo nd staff of this clinic. I nployment as a seaf vill lose the right to be	am aware that t arer. I understa nefit from sick pa	he informati nd that in ny and / or co	ion supplied the event ompensation	by m of an whice
Would you say that your I MOLIAMPIED AS disclosure of all of my m forms the basis upon misrepresentation eithe would otherwise be due	health is: Excellent * Good * I HESSAIN 7-H HERF holding Passpor nedical history to the doctors a which I will be offered en er by statement or omission I w to me under the Contract of Er	TAN t/Seaman Book no Lo nd staff of this clinic. I nployment as a seaf- vill lose the right to be mployment or under an	am aware that t arer. I understanefit from sick pa y Collective Barga	he informati nd that in y and / or co ining Agree	ion supplied the event ompensation ment. I also	by m of an which hereb
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The Company has set the following BMI limits:

A seafarer with a BMI: 18 or below; or 30 or above is considered temporarily unfit.

For seafarers from Northern Europe, the Indian subcontinent, Russia, Ukraine & Romania with a BMI of between 30 and 35 and where this, in the Government (DGS) approved medical examiner's opinion, is attributable solely to physique with broad shoulders/large muscle bulk with main muscles classify and not obscured by subcutaneous fat and no co-morbid complications (eg. Diabetes, Hypertension, Dyslipiografia etc.) the seafarer in question MUST undergo a stress/ treadmill test.

* A: -er-MLC-2006 * If the results of the stress/ treadmill test are average or above, seather can be considered "fit to work", however, the seafarer MUST always be counselled on weight loss and ways/means to prove their health.

² Department

WALLEM_

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED

BY AN APPROVED EXAMINER

In accordance with:

STCW Convention, 1978, as amended, MLC 2006,

ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

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BMI MUST also be taken into consideration during the seafarer's pre-employment medical examination and it is the responsibility of each manning centre to instruct their accredited clinic(s) to ensure that a seafarer's BMI is taken during the medical examination, the Company standards applied and if outside the limits, the manning centre must be notified, who will then seek further guidance from the Crewing Dept.

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SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED

BY AN APPROVED EXAMINER

In accordance with: STCW Convention, 1978, as amended, MLC 2006,

ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

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Other diagno	stic test(s)	and result(s):						
Test:		W		Resu	lt:			
Investigation:				W		- X X X		
Blood		Result	Normal	Urine	Result	Additional Tests	Result	Normal
Haemoglo		20.2 g/dl	13 – 18 gm/ dí	Colour	NI	(HbA1c)	7.5	4.0 % - 6.5 %
Total WB	0.0000000000000000000000000000000000000	8.020	4,000 - 11,000 / cu.mm	Specific Gravity	mi	RBS/ FBS (Blood test	11.85	
NeuZZ %	, Lymp /9	%, Eoso 3 %	, Bos e %, Mo	рН	mi/	Total Bilirubin	0.60	0.1 - 1.0 mg/dl
Blood Group (repeated)	& Rh factor (t	tested only once	need not be	Albumin	mil	Direct Bilirubin	MAD	0.0 - 2.5 mg/dl
BIE		01	1-15 mm/hr	Sugar	my	Indirect Bilirubin	ann	0.0 - 0.75 mg/dl
Plate	lets	2.50000	1.50-4.00 Lakh/ul	Bile Pigment	mi/	SGPT	38	9-43 U/L
Fasting Lip	id Profile			Bile Salt	1	SGOT	30	0 - 40 IU/L
S. Triglyo	erides	159	25-200 mg/dl	Occult Blood	M	SGGT	22	0 - 49 IU/L
Cholester	ol Serum	943	130-220 mg/dl	RBC Cells	M	Blood Urea	8-	10-50
HDL Cholest	erol Serum	108	35-65 mg/dl	Leucocytes	NI	Diodd Grea	MAO	mg/dl
LDL Cholest	erol Serum	75	85-150 mg/dl	Stool Test	Result	S. Creatinine	080	0.8 - 1.4 mg/dl
VLDL Cholest	terol Serum	m	07-35 mg/dl	Bacterological	mo	BUN	11	5-23mg/dl
Total/HDL C		alm	3.0-5.0	Parasitical	m	PSA	me	Less than 4.00 ng/ml
LDL/HDL CH	nolesterol	mas	2.5-3.5	Others	mas	Malarial Parasite	man	
Hepatitis B	Positive	Negative		HIV1&II		Uric Acid	4.90	2.4 - 7.5 mg/dl
Hepatitis C	Positive	Negative		VDRL				

Drugs: Method Results:	li .							
Detected	etected Amphetamines/ Urine *		urate/ Urine *	Can	rijuana, THC, nabinoids ne *	1	ocaine/ rine *	Opiates & Morphine *
Cut Off Limit	(1000 ng/ ml)	(200 ng	/ ml)	50 n	g/ ml	(30	00 ng/ ml)	
Not Detected	Amphetamines/ Urine *	Barbit	urate/ Urine *	Can	rijuana, THC, nabinoids / ne *		rine *	Opiates & Morphine *
Spirometry No	nnec	TMT	Neste	to	Drugs of Abuse		Nes	retion
ECG NOTO	mel	ЕСНО	Notono	e	Ultrasound (USG the Abdomen & Pelvis) of		eramal.

Part III - Result of Medicabexa

Is applicant vaccinated in accordance with WHO requirements? Yo

Vaccination status recorded: Yes / No Satisfactory * to be renewed to Department of De



SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED

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Describe restrictions (e.g. specific positions, type of ship, trade area):

Action taken by medical examiner (e.g. referral):

Examination	Results of the examination		Examination	Results of the examination	
examination	Pass	Fail	Examination	Pass	Fail
Medical History			Fecalysis (food service/ handlers only)		
Physical Examination	1/1		Hep B Antigen	1	
Dental Examination			Hep C Antibodies	10	
Psychological Test			Stress Test		
Visual Test			Diabetes		
Colour Vision	1		Ultrasound Examination (Presence of gall & Kidney Stones)		
Audiometry			Alcohol/ Drug Test		
EKG			2D echo Doppler study (for heart patient) Psychometric evaluation		

If failed in any above mentioned examinations and examinations report attached to this form, please provide reasons with examination number:

This examinee is certified free of communicable disease (or viruses for cooks): Yes / No

I have evaluated the above-named seafarer after establishing his identity as per the documents mentioned above and in compliance with the medical standards of STCW Convention, 1978, as amended, MLC 2006, ILO/IMO/JMS/2011/12- Guidelines on the Medical Examinations of Seafarers and also Merchant Shipping (Medical Examination) Rules by the Government (DGS), as amended from time to time. On the basis of the examinee's history, 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

- (a) that the hearing meets the required standards for his / her rank and detect any audible alarms/ Unaided hearing is satisfactory
- (b) Visual acuity meets the required standards for his/her rank /Colour Vision meets the required standard (testing only required every
 - 6 years unless considered necessary)/ that he / she if fit / unfit for look out duty
- (c) that he / she needs / does not need visual aids / informed to carry spares
- (d) that he/she is/is not taking regular medication & seafarer does /does not require to take same during his tenure onboard vessel that he/she is/is not taking any medication that has side effects that will impair judgment, balance, or any other requirements for effective and safe performance of routine and emergency duties onboard?
- (e) that the seafarer is not suffering from any disease, medical condition, disorder or impairment which renders him/her that will prevent the effective and safe conduct or likely to be aggravated by, or unfit for, routine and emergency service at sea or likely to endanger the health of other persons onboard ships.

	Deck service	Engine service	Catering service	Other services (training/	
Fit:		*		examination) *	
Unfit:		*	^ *		

this seafarer is UNFIT FOR DUTY**/ FIT FOR DUTY with/ without restrictions* as mentioned below,

* This Medical Certificate is issued with following restrictions as Hospital position, type of ship, trade area & other as applicable):

** Reasons for being unfit

1 Department of

As Per-MLC-2006

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SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED

BY AN APPROVED EXAMINER

In accordance with:

STCW Convention, 1978, as amended, MLC 2006,

ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

Form: OHF 48 Version: 01

Version: 01 Date: 18 Aug 21

Page: 7 of 7

This is to certify MOHAMMED ASHRAF HOSS	NIM was physically examined and he/she is found to
be FIT for sea service/ look-out duty for the period from	RATICAL HOSPITAL LIMITE Blace of medical
examination 2 4 JAN 2023 Date of r	medical examination Dhaka Reputation Medical
certificate validity date (day/month/year): 23 JAN	Name of Examiner (Please Print):
(Validity should	not be more than 2 years)
Degree:	Address:
	Tel./Fax/Email:RADICAL HOSPITAL LIMITED
Date of issue of Medical Examiner/Physician Certificate/	The state of the s
Examinee's Signature	Official Stamp & Signature with Govt. (DGS) Approval/
(This signature is affixed in the presence of the Medical Examiner	DR. MR. MD. RAIHAN
(print name of medical examiner if not legible) and I acknowledge, that I have been advised of the content of the medical certificate & of the right to a review in accordance with paragraph (6) of section A-I/9 of STCW Code and my obligations.) Date: 7 4 JAN 2023	MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician Radical Hospitals Limited.

Original: Master & Crewing Dept

cc: Seafarer

Remark: This form is to be uploaded in Crew Management System, Medical tab by the Manning centre.



MEDICAL FITNESS CERTIFICATE

LAST NAME OF APPLICANT	MOLLAMMED ASHRAF HOSSAIN INTUL
DATE OF BIRTH PLACE OF BIRTH	WINT
16 30 1961	AKA COUNTRY BANGLADESH
EXAMINATION FOR DUTY AS :	MAILING ADDRESS OF APPLICANT
MASTER	FLAT- A8, HOUSE - 747, ROAD-IL BLOCK-L, BASHUNDHARA R/A
ENGINEER	Block-1 RACHINAHARA RIA
RADIO OFF	DHAKA
SEAMAN 🔲	DAMER
	L EXAMINATION
HEIGHT 163 CM WEIGHT 54 146 BLOOD PRESSURE	PLUSE RESPIRATION GENERAL APPEARANCE
VISION:	HEARING:
RIGHT EYE LEFT EYE	4
WITHOUT GLASSES	RIGHT EAR MASS
WITH GLASSES 666 666	
COLOR TEST TYPE : BOOK LANTERN Check if	
HEAD AND NECK	HEART (CARDIOVASCULAR)
	Notoral
LUNCO	
NOTONIAL	
SPEECH : Is speech unimpaired for normal voice communication ?	mal
EXTREMITIES: UPPER	LOWER NOTMEC
is applicant suffering from any disease likely to be aggravated by, or to render	him unfit for, service at sea or likely to endanger the health of other persons onboard?
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS	MOHAMMED ASHRAR
AND HE / SHE IS FOUND TO BE FIT FOR SEA SERVICE FF	(1->>/(1/> (1-(1)))
NAME AND DEGREE OF PHYSICIAN DR. MMC	MD. ZAMAN
NAME AND DEGREE OF PHYSICIAN	(PLEASE PRINT)
PADONC HOCK!	THI IMMED
ADDRESS / SVICE	
WITHPA DHA	EM, BANGOUDDEST.
16 G	MORING BANGUADEDA
NAME OF PHYSICIAN'S LICENSING AUTHORITY	2011
DATE OF ISSUE OF PHYSICIAN'S LICENSE	Lory.
The control of the co	SIGNATURE OF PHYSICIAN

This certificate is issued in compliance with the regularity of the Medical Examination (Seafarers) Convention 1945 (ILO No. 73)

DR. MIR. MD. RAIHAN

MSBS (DU), DFM, CCD (Birdem), PGT (Ophth)

BMDC A 55144

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.



E-mail : idic@ibnsinatrust.com

Web : www.ibnsinatrust.com

Age: 60 y

HAEMATOLOGY REPORT

Sex: Male



: D29403 ID No.

Delivery on: 24/1/2023 7:00PM

Printed on: 24/1/2023 3:14PM

: MD. ASHRAF HOSSAIN KHAN Name

Received on: 24/1/2023 1:03PM

Refd. by : UNIVERSAL SHIPPING SERVICES

Collected on: 24/1/2023 12:49PM

Relevant estimations were carried out by Automated Haematology Analyzer Sysmex XN1000 / XN2000 & checked manually

Method
 Sodium Lauryl Sulphate 5.5
Hydro Dynamic Focusing
RBC cumulative pulse height
Calculation with RBC HCT
Calculation with RBC and HG
Flow Cytometry
000 Flow Cytometry 25,000
Flow Cytometry
Flow Cytometry
Hydro Dynamic Focusing

Comment: Microcytic hypochromic anaemia.

Advice: Hb electrophoresis after correction of iron deficiency.

Checked by

Md. Fakhrul Islam

Sr. Medical Technologist (Lab.) G-II Ibn Sina Diagnostic & Imaging Center Dr. Moshammat Naznin Begum

MBBS, FCPS (Hematology), Consultant Haematology Ibn Sina Diagnostic & Imaging Center



E-mail: idic@ibnsinatrust.com

Web : www.ibnsinatrust.com

IBN SINA DIAGNOSTIC & IMAGI

Age: 60 y

ISO 9001:2015 Certified



BIOCHEMICAL REPORT

ID No.

: D29403

Name

Refd. by

: UNIVERSAL SHIPPING SERVICES

Specimen

: Blood,

: MD. ASHRAF HOSSAIN KHAN

Collected on: 24/1/2023 12:49PM

Delivery on: 24/1/2023 7:00PM Printed on: 24/1/2023 3:19PM Sex: Male

Received on: 24/1/2023 1:37PM

Estimations are carried out by Atellica Solution/Vitros 5600/ADVIA 1800 Random Access Chemistry Analyzer

Parameter	Test R	lesult		Reference Value	Method
Plasma Glucose Random	11.85	mmol/L		<11.11	Glucose Oxidase Trinder
Corr. Urine Sugar	Nil				
HbA1C	7.5	%		Normal ;<5.7 Prediabetes :5.7-6.4 Diabetes :>=6.5	
S. BUN	11	mg/dl		7-18	Urease, colorimetric
S. Creatinine	0.80	mg/dl		Male: 0.70-1.30 Female: 0.50-1.10 Child: 0.30-0.70	Enzymatic
S. Uric Acid	4.70	mg/dl		Male:3.7 – 7.7 Female:2.5 -6.2	Uricase/Peroxidase
S. Bilirubin (Total)	0.60	mg/dl		Adult: 0.30-1.20 Neonatal: 1.50-12.00	Vanadate Oxidation
S. ALT (SGPT)	38	U/L		Male:<45 Female:<34	UV with P5P
S. AST (SGOT)	30	U/L /		15-37	UV with P5P
S. Gamma GT	82	U/L		Male:15-85 Female:5-55	
Lipid Profile Random					
S. Cholesterol (Total)	143	mg/dL		<200	Enzymatic method En
S. Triglyceride	157	mg/dL		<150	GPO-trinder without serum blank
S. HDL Cholesterol	35	mg/dL		>40	Elimination/catalase
Non-HDL-Cholesterol	108	mg/dL		<130	
S. LDL Cholesterol	77	mg/dL		<100	Elimination/catalase
T. Cholesterol-HDL Ratio	4.09			Low risk:<4.0 High risk:>6.0	7.
S. Total Protein	6.93	g/dl	35	Adult: 6.40 - 8.20 Newborn: 4.40 - 7.60 Child: 6.00 - 8.00	Biuret method







E-mail : idic@ibnsinatrust.com

Web : www.ibnsinatrust.com

IBN SINA DIAGNOSTIC &

ROUTINE URINE EXAMINATION

D29403 ID No. :

Admission : - Bed: -

Received: 24/1/2023 12:49PN Print Date: 24/1/2023 2:16PM

: MD. ASHRAF HOSSAIN KHAN

Sex: Male Age: 60 y

UNIVERSAL SHIPPING SERVICES

Relevant estimations were carried out by Automated Urine Analyzer(LabUMat 2 + Urised 3, Hungary)& checked manually

PHYSICAL EXAMINATION	Test Result	Reference value
Colour	Pale Yellow	Pale Yellow/Straw
Appearance	Light Turbid	Clear
Specific gravity	1.006	1.010 - 1.022

CHEMICAL EXAMINATION	Test Result	Reference value
PH	5	4.5 - 8.0
Protein	Trace	Nil
Glucose	Nil	Nil
Acetone (Ketone body)	Nil	Nil
Bilirubin	Absent	0.02 mg/dL
Urobilinogen	Normal	0.1 - 1.8 mg/dL
Nitrite	Present	Negative
Leukocyte	+++	Nil
Others	Nil	Nil

MICROSCOPIC EXAMINATION	Test Result	Reference value	
Epithelial cells	1-2	1-5/HPF	
Pus cells/WBC	Plenty	0-5/HPF	
RBC	6-8	0-2/HPF	
Dismorphic RBC	Nil	Nil	
Hyaline Cast	Nil	0-2/LPF	
Granular Cast	Nil	Nil	
WBC Cast	Nil	Nil	
RBC Cast	Nil	Nil	
Calcium-Oxalate	Nil	Nil	
Amorphous Phosphate	Nil	Nil	
Uric acid	Nil	Nil	
Urates	Nil	Nil	
Triple-phosphate	Nil	Nil	
Yeast/Candida	Nil	Nii	
Trichomonas/Vaginalis	Nil	Nil	
Spermatozoa	Nil	Nil	
Others	Nil	Nil	

Ref: Clinical diagnosis and managements by laboratory methods (John Bernard Henry)

Checked by

DR. FARHANA AFROZ MBBS, M.Phil (Clinical Pathology) Consultant Pathologist Ibn Sina Diagnostic & Imaging Center



মুক্তি মানসিক এন্ড মাদকাসক্তি নিরাময় কেন্দ্র লিঃ MUKTI MANASHIK & MADOKASHAKTI NIRAMOY KENDRA LTD.

MUKTI-THE PIONEER AND ONLY INSTITUTION FOR TREATMENT OF DRUG ABUSE AND PSYCHIATRIC DISORDER

January 24, 2023

TOXI-LAB FULLY COMPUTERISED DRUG DETECTION LABORATORY

TO WHOM IT MAY CONCERN

This is to certify that Md. Ashraf Hossain Khan was present in this Centre on 24.01.2023, at 02.40 PM and was examined for Drug and Alcohol testing according to the guiding principal on drug and Alcohol testing procedures for world wide application in the maritime industry as advised by joint ILO/WHO and U.S. coast guard guidelines by OCIMF. This is also according to the Norwegian Seaman's article 26 and rules and regulation issued by the Maritime Directorate.

His Urine Sample was collected with all precautions for the detection of presence of Drugs of abuse and its metabolites in the Urine sample namely: OPIATE (Morphine, Pethidine, Codeine Phosphate), AMPHETAMINE, COCAINE, BARBITURATE, CANNABINOIDS (Marijuana) and PHENCYCLINDINE.

Homogeneous Enzyme Immune-assay method and technique was adopted by "SOLARIS DRUG ANALYZER" of Syva, USA.

Alcohol assay of the Urine Sample was also performed using the same method and technique.

The analytical test result was found to be: - VE (NEGATIVE)

COMMENT:

Md. Ashraf Hossain Khan was found to be Drug and Alcohol free on 24.01.2023.

Uluu 24.01.2023 Dr. M. Baktyer Hossain

MBBS (CMC), PGT (P.G. Hospital)

Medical Director



Rajdhani Complex, 237/2, New Elephant Road, Dhaka-1205. Phone: 58617568, 58617901 Mobile: 01678-244511-7, E-mail: muktibd1@yahoo.com, www.muktidrughelpline.com

LABORATORY FORM

New Ele	ii Complex, 237/2,	e -	Cell: 0 E-mail:	58617568, 586179 1678244511-7 muktibd1@yahoo. 24.01.23 Tii	.com me: ?' am/pm
OCCUR	S NAME MOL. 4.2.C	's common de	5.W. DATE OF BIRTH.	30/10/.b./ SE	C: MALE / FEMALE
CATELLED	STION S. Ed. Se. 1. J.	Significant Position / I	RANK 570	HIGHT (M) 1.6.3	WEIGHT (KG) 5.4.
ATHER	S NAME LONG.	THE CONTRACTOR	ASSPORT NO	CDC NO). (IF ANY)/0/25
197DICE	os may willy this	1.7.2. Bashus	NA	MCBILE	NO. O. 2.1.2.1.2.1.2.4
	Anna and a second and a second and a second as a secon	and the second second second second	NON PRESCRIBED) BE	ING USED DURING	LAST 30 DAYS
NAME	OF THE MEDICINE	ON PRESCRIPTION	DAJLY DOSAGE	TREA	TMENT
		YES / NO	and the second		
				STARTED	ENDED
2760	DRUGS OF ABUSE			PEATUC DRUGS	
13 mg	OPIATE	-40	AMACACIN		PHENOBARBITAL
School	COCAINE	-VP	CAFFINE	District Co.	PHENYTION
1990	CANNABINOID	s -ve	CARBAMEZAPINE		PRIMODONE
100	ALCOHOL	-up	CHLORAMPHENICO	I.	PROCAINAMIDE
Mirgo o	AMPHETAMINI	TIE	DISOPYRAMIDE		QUINIDINE
2/100	BARBITURATE	TVE	DIGOXIN		THEOPHYLINE
1.0 -	METHAQUALO		ETHOSUXIMIDE		TOBRAMYCINE
300	PHENCYCLIDIN	TVP	GENTAMYCIN		VALPROIC ACID
34.	BENZODIAZEPI	D.UC	LIDUCAINE		VANCOMYCIN
de	ACETAMINOPH	774	METHOTREXATE		N.ACCTVPROCAINAMIDE
	ACLIAMINOT		NEULMUCIN		
	TOXICOLOG	Y	TO BE FILLE	D BY LABORATOR	Y INCHARGE
7-1	BARBITURATE		URINE / SERUM		
	BENZODIAZEPINE		SAMPLE NO.		Whan.
	TRICYCLIE ANTIDE	PRESSARS (ACA)	. 127 - 27	SIG	NATURE OF DONOR
he qualit	CAL RESULT & COM tative analysis of abovel of 300 ng / ml f	ve checked 8 drugs of	abuse were performed i	n the urine sample of	of the donor using a

Comment: Analytical Result was -(VE) Negative for all eight drugs of abuse tested.

SIGNATURE OF LAB INCHARGE



E-mail: idic@ibnsinatrust.com

Web : www.ibnsinatrust.com

IBN SINA DIAGNOSTIC & IMAGING CENTER

ISO 9001:2015 Certified

I.D. Number

D29452

Date:

Jan 24, 2023

Name of the patient

MD. ASHRAF HOSSAIN KHAN

Age:

60 year(s)

Referred by

UNIVERSAL SHIPPING SERVICES

Thanks for your kind referral.

Report:

Chest X-Ray - PA View

Lungs

: Both lung fields are clear.

Heart

: Normal in TD & contour.

Trachea

: Normal in position.

Diaphragm

: Normal in position & outline.

Costophrenic Angles

: Are clear.

Bony thorax

: Appears normal.

Δ Normal findings.

Prof. Dr. Abdullah Al Amin

MBBS (DMC), DMRD (DU), MD (BSMMU)

Ex-Professor of Radiology & Imaging

Sir Salimullah Medical College & Hospital, Dhaka.



E-mail: idic@ibnsinatrust.com

Web : www.ibnsinatrust.com

IBN SINA DIAGNOSTIC & IMAG



BLOOD GROUP REPORT

ID No.

: D29403

Name

: MD. ASHRAF HOSSAIN KHAN

Refd. by

: UNIVERSAL SHIPPING SERVICES

Specimen

: Blood,

Age: 60 y

Delivery on: 24/1/2023 7:00PM Printed on: 24/1/2023 1:46PM

Sex: Male

Collected on: 24/1/2023 12:49PM

Received on: 24/1/2023 1:03PM

Parameter

Test Result

Reference Value

Method

BLOOD GROUP: (ABO)

"O" Rh(D) Positive

Checked by

MD. ELIAS HOSSAIN Medical Technologist Ibn Sina Diagnostic & Imaging Center MBBS, M.Phil (Clinical Pathology) Consultant Pathologist Ibn Sina Diagnostic & Imaging Center



E-mail: idic@ibnsinatrust.com

Web : www.ibnsinatrust.com

IBN SINA DIAGNOSTIC & IMAGI



SEROLOGY REPORT

ID No.

: D29403

Name

Refd. by Specimen

: Blood,

: MD. ASHRAF HOSSAIN KHAN

: UNIVERSAL SHIPPING SERVICES

Age: 60 y

Collected on: 24/1/2023 12:49PM

Delivery on: 24/1/2023 7:00PM Printed on: 24/1/2023 1:47PM

Sex: Male

Received on: 24/1/2023 1:06PM

Estimations are carried out by Atellica NEPH 630/BN Prospec/Stago Compact Max3/Sysmex CS-1600

Parameter

Test Result

Reference Value

Method

VDRL

Non-Reactive

Checked by

MD. ELIAS HOSSAIN

Medical Technologist Ibn Sina Diagnostic & Imaging Center MBBS, M.Phil (Clinical Pathology) Consultant Pathologist

Ibn Sina Diagnostic & Imaging Center



HOUSE # 48, ROAD # 9/A, DHANMONDI, DHAKA-1209, BANGLADESH

PHONE: 48115270-2, 48114040-1

E-mail: idic@ibnsinatrust.com

Web : www.ibnsinatrust.com

IBN SINA DIAGNOSTIC & IM



IMMUNOLOGY REPORT

ID No.

: D29403

Delivery on: 24/1/2023 7:00PM Printed on: 24/1/2023 2:45PM

Name

: MD. ASHRAF HOSSAIN KHAN

: Blood,

Age: 60 y

Sex: Male

Refd. by Specimen : UNIVERSAL SHIPPING SERVICES

Collected on: 24/1/2023 12:49PM

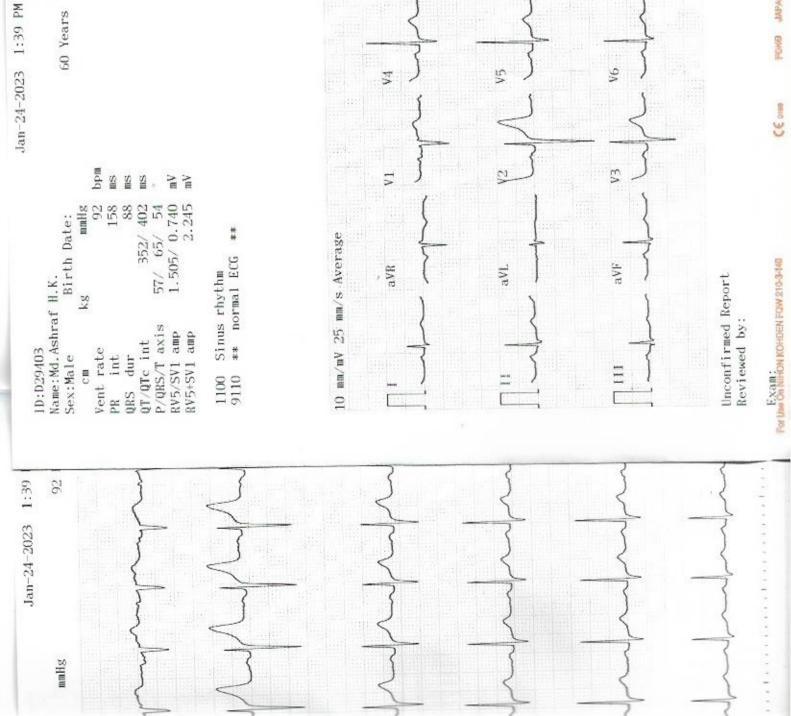
Received on: 24/1/2023 1:06PM

Estimations are carried out by Atellica Solution/Vitros 5600/Advia Centaur XPT Random Access Immunoassay Analyzer

Parameter	Test Result	Reference Value	Method
Anti-HCV	Negative		
	Cut off rate: 1.00		
	Sample rate: 0.05		
HBsAg	Negative		
	Cut off rate: 1.00		
	Sample rate: < 0.10		
HIV Antibody I & II	Negative		
	Cut off rate: 1.00		
	Sample rate: 0.11		

Checked by

Md. Ashrafu) Alam Talukder B.Sc (Hons), M.Sc (Biochemistry) D.U. Biochemist, Ibn Sina Diagnostic & Imaging Center



REPORT

60 Years



. 94

FOKE JAPAN





IA	Sean - Jan 24, 2023
I.D.No:	: D29403 : MD. ASHRAF HUSSAIN KHAN Age: 60 year(s) Sex: Male
Name of Patient:	: MD. ASHKAP BUGGS : UNIVERSAL SHIPPING SERVICES
Ref. by:	: UNIVERSAL Semi-

Thanks for your confident referral.

USG OF WHOLE ABDOMEN

HBS:

Liver

Normal in size measuring about 120 mm along mid clavicular line. Hepatic parenchymal echotexture is homogeneous. No focal solid, cystic, mixed echogenic or diffuse is seen in the liver. Hepatic veins are normal in caliber with normal flow pattern. Intrahepatic portion of IVC appears normal on caliber & show normal flow pattern.

Biliary channel

Intrahepatic biliary trees are not dilated. CBD - not dilated. Internal diameter of CBD is within normal limit. No evidence of sludge or calculus

Portal vein

Appears normal in caliber & shows no evidence of thrombus.

Porta-hepatis

Appears normal having no evidence of porta-hepatis lymphadenopathy.

Gall bladder

Is normal in size & contour. Wall thickness is normal. No evidence of calculus, biliary sludge or any soft tissue lesion seen within the lumen of

gall bladder. No evidence of peri-cholecystic collection is seen.

Pancreas

Is normal in size. Parenchymal echogenicity is homogeneous. No focal or diffuse lesion is seen. No evidence of peri-pancreatic collection is seen.

Spleen

MPD is not dilated. is normal in size. Parenchymal echogenicity is homogeneous having no focal or diffuse lesion. Spleno-Portal venous system is not dilated.

KUB:

Kidneys

Normal in size, shape and position.

Bipolar length of the right kidney is 80 mm.

Bipolar length of the left kidney is 90 mm.

Cortical echogenicity: normal.

Cortico - medullary differentiation: Maintained.

Pelvicalyceal system: is not dilated.

No evidence of calculus, focal or diffuse renal parenchymal lesion is seen.

No evidence of perinephric collection is seen.

HOUSE # 48, ROAD # 9/A, DHAMMONDI, DHAKA-1209, BANGLADESH

● PHONE: 48115270-2, 48114040-1

E-mail : idic@ibnainatrust.com
 Web : www.ibnainatrust.com



BY SINA DIAGNOSTIC & IMAGING CENTER.

Ureters : Not dilated on either side.

Urinary bladder : Is well filled with urine and is normal in contour. Wall thickness is normal.

Both the adrenal glands appears normal

No demonstrable intravesical calculus or mass lesion is noted.

гомег ардотеп:

Adrenal glands

Prostate

 Prostate is normal in size with homogeneous echopattern measuring about 33 x 43 x 32 mm (LxBxAP). Volume - 24 cc.

.8U to each eat the base of UB.

No evidence of prostatic calcification is seen.

** No abdomino-pelvic lymphadenopathy, ascites or pleural effusion is seen.

** Bowel loops are not dilated.

Interpretation : Normal USG findings.

Prof. Dr. Abdullah -Al-Amin

anunn://g paredar

мвва (рмс): рмкр (рл): мр (ваммл):

Ex-Professor of Radiology & Imaging.

Sir Salimullah Medical College & Hospital, Dhaka