



HAQUE & SONS LTD.

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



Accredited By : BMD
Accreditation No. A 55144

PATIENT CONTROL NUMBER:
HSL-003240

MEDICAL EXAMINATION CERTIFICATE

SURNAME IMRAN	FIRST NAME AND MD	MIDDLE NAME SAIADOL
PLACE AND DATE OF BIRTH CUMILLA 29-May-1993	PASSPORT NUMBER A06489771	SEAMAN'S BOOK NUMBER CO8198
NATIONALITY : BANGLADESHI SEX : ☒ Male ☐ Female	VESSEL TYPE : OIL/CHEM TANKER	TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : RACE COURSE DHANMONDI RESIDENTIAL, 03, KOTWALI MODEL, CUMILLA SADAR-3500, CUMILLA, BANGLADESH		CONTACT NUMBER : 008801673323294
		RANK : 3RD OFFICER

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

Question	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?	☐	☒
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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 practitioner) I also certify that my history contained above is true and any false statement will disqualify me from my employment, benefits and claims.

Imran

Signature of Seafarer

MEDICAL EXAMINATION

Weight 68 kg	Height (cm) 172	BM 22.0	Blood Pressure: Systolic 120 mm Diastolic 80 mm	PULSE: 78 bpm																																
<table border="1"> <thead> <tr> <th colspan="2">Hearing by Audiometry</th> <th colspan="4">Audiometry</th> <th colspan="2">Hearing by Whisper Test</th> </tr> <tr> <th></th> <th></th> <th>500</th> <th>1000</th> <th>2000</th> <th>3000</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Right</td> <td>☐ Adequate ☐ Inadequate</td> <td></td> <td></td> <td></td> <td></td> <td>☒ Adequate ☐ Inadequate</td> <td></td> </tr> <tr> <td>Left</td> <td>☐ Adequate ☐ Inadequate</td> <td></td> <td></td> <td></td> <td></td> <td>☒ Adequate ☐ Inadequate</td> <td></td> </tr> </tbody> </table>					Hearing by Audiometry		Audiometry				Hearing by Whisper Test				500	1000	2000	3000			Right	☐ Adequate ☐ Inadequate					☒ Adequate ☐ Inadequate		Left	☐ Adequate ☐ Inadequate					☒ Adequate ☐ Inadequate	
Hearing by Audiometry		Audiometry				Hearing by Whisper Test																														
		500	1000	2000	3000																															
Right	☐ Adequate ☐ Inadequate					☒ Adequate ☐ Inadequate																														
Left	☐ Adequate ☐ Inadequate					☒ Adequate ☐ Inadequate																														
Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☒ NO ☐																																				

	Visual acuity				Right eye	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 STCW Code Section A-1/9

Colour vision as per STCW CODE Section A-1/9:

☒ Normal

YES / NO

☐ Doubtful☐ Defective

Date of last colour vision test: Date (day/month/year)

03 JUL 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	BIO 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	SGOT	OTHERS		
HAEMOGLOBIN (HGB)	15.4	DRUG AND ALCOHOL TEST		HBsAg	☐ Reactive ☒ Nonreactive
ESR (WESTERGREN)	0.070	Morphine	☐ Positive ☒ Negative	HIV / AIDS Test	☐ Reactive ☒ Nonreactive
WBC	6.000	Amphetamine	☐ Positive ☒ Negative	VDRL	☐ Reactive ☒ Nonreactive
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive ☒ Negative	Blood Type	B+(VE)
RANDOM	5.5	Barbiturates	☐ Positive ☒ Negative	Psychological Exam	NAD
HBA1C	4.5%	Cocaine	☐ Positive ☒ Negative	Others(KUB Ultraso	NAD

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

03 JUL 2023

Signature of Seafarer

MD SAIADOL IMRAN

Name of Seafarer

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:

03 JUL 2023

Valid Until:

02 JUL 2025

DR. MURSID RAIHAN, Registered Physician

In Accordance with Medical Examination Requirements (No. 78) and STCW 1978/1996 as Amended, MLC 2006

BMDC A-55144, MLC Approved
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.

Revision Date: 24th July 2022

**PHYSICAL EXAMINATION REPORT/CERTIFICATE
DEPUTY COMMISSIONER OF MARITIME AFFAIRS**

ANNEX 2

THE REPUBLIC OF LIBERIA

LAST NAME OF APPLICANT IMRAN			FIRST NAME MD			MIDDLE INITIAL SAIADOL		
DATE OF BIRTH 5 29 1993 MONTH DAY YEAR			PLACE OF BIRTH CUMILLA BANGLADESH CITY COUNTRY			SEX ☒ MALE ☐ FEMALE		
EXAMINATION FOR DUTY AS: MASTER RATING MATE ☒ MOU DECK ENGINEER MOU ENGINE RADIO OFF SUPERNUMERARY						MAILING ADDRESS OF APPLICANT: RACE COURSE DHANMONDI RESIDENTIAL, 03, KOTWALI MODEL 03, KOTWALI MODEL, CUMILLA SADAR-3500, CUMILLA, BANGLADESH.		
MEDICAL EXAMINATION (SEE REVERSE SIDE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE								
HEIGHT 172cm	WEIGHT 68kg	BLOOD PRESSURE 120/80 mm	PULSE 78bpm	RESPIRATION 19bpm	GENERAL APPEARANCE Good			
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6		LEFT EYE 6/6				
DATE OF LAST COLOR VISION TEST (Month/Day/Year) 03 JUL 2023				Testing Required every 6 years				
COLOR VISION MEETS STANDARDS IN STCW CODE, TABLE A-I/9?				YES ☒		NO ☐		
COLOR TEST TYPE: BOOK - LANTERN - CHECK IF COLOR TEST IS NORMAL				YELLOW ☒		RED ☒		GREEN ☒ BLUE ☒
HEARING		RT. EAR mm		LEFT EAR mm				
HEAD AND NECK Normal			HEART (CARDIOVASCULAR) Normal					
LUNGS Normal			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? ☒					
EXTREMITIES:			UPPER Normal			LOWER Normal		
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 ON BOARD? IF YES, EXPLAIN IN DETAILS OF MEDICAL EXAMINATION ON PAGE 2.								
SIGNATURE OF APPLICANT Imran			DATE OF EXAM 03 JUL 2023			EXPIRY DATE 02 JUL 2025		
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN.								
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: MD SAIADOL IMRAN (NAME OF APPLICANT)								
FIT FOR DUTY ON BOARD SHIP								
(HE) (SHE) IS FOUND TO BE (FIT) (NOT FIT) FOR DUTY AS A: (MASTER, MATE, ENGINEER, RADIO OFFICER, RATING, MOU DECK, MOU ENGINE or SUPERNUMERARY).								
NAME AND DEGREE OF PHYSICIAN DR. MIR MD, RAIHAN ; M.B.B.S (D.U), REG.NO.A-55144								
ADDRESS REDICAL HOSPITALS LIMITED, 35, SHAH MAKHIDUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230, BANGLADESH								
NAME OF PHYSICIAN'S CERTIFYING AUTHORITY DG SHIPPING, BANGLADESH								
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE 6-May-14								
SIGNATURE OF PHYSICIAN						DATE OF EXAMINATION: 03 JUL 2023		

This certificate is issued by authority of the Deputy Commissioner of Maritime Affairs, R.L. and in compliance with the requirements of the Maritime Labour Convention, 2006 for the Medical Examination of Seafarers.

The Medical Certificate shall be valid for no more than two (2) years from the date of the Examination for those over 18 years of age and for no more than one (1) year for those under 18 years of age.

RLM-105M (REV. 06/16)

1

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



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.
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.
- (b) 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.
- (c) An applicant's blood pressure must fall within an average range, taking age into consideration.
- (d) 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 narcotics.
- (e) Deck/Navigation officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (f) Applicants for able seaman, bosun, GP-1, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigation officer's certificate.
- (g) Applicants for fireman/watertender, oiler/motorman, pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an engineer officer's certificate.
- (h)

DETAILS OF MEDICAL EXAMINATION

(To be completed by examining physician)

1. COMPLETE PHYSICAL EXAMINATION INCLUDING HEARING TEST.

2. PATHOLOGICAL EXAMINATION : A) Complete Blood Count., B) Blood Sugar Estimation,

C) Serological Test(VDR) D) Hepatitis B Surface Antigen Test (HbsAg),

E) Urinlysis F) Drug Test G) Alcohol Test.

3. X - RAY EXR PA VIEW

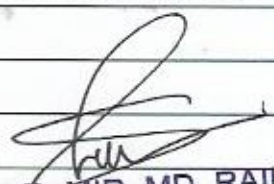
4. E.C.G. TEST

5. EYE EXAMINATION FOR V/A & C/V

03 JUL 2023

RLM-105M (REV. 06/16)




DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-808-046
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.

CRW15 – CHEMICAL BLOOD TEST REPORT

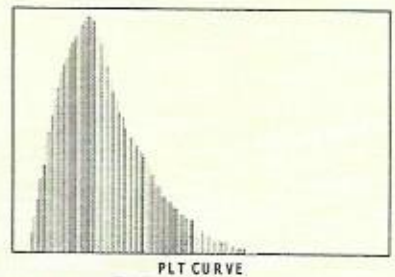
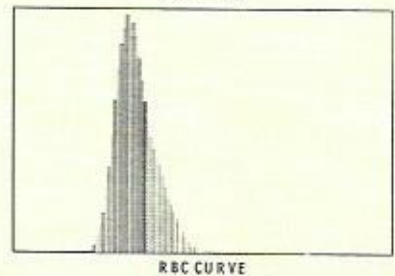
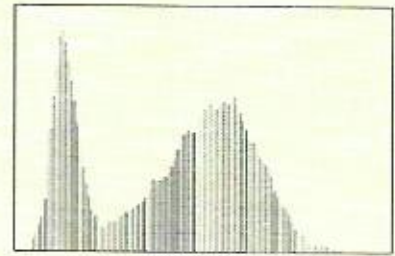
LAST NAME IMRAN		FIRST NAME MD SAIADOL		POSITION ON BOARD THIRD OFFICER	
DATE OF BIRTH 29-MAY-1993		PLACE OF BIRTH CUMILLA		SEX MALE	
				ID DOCUMENT NO C/O/8198	
(PLEASE INDICATE BELOW IF THE LISTED TESTS ARE WITHIN THE REFERENCE LEVEL)					
TEST	YES	NO	TEST	YES	NO
WHITE BLOOD CELL COUNT (WBC)	☒	☐	LYMPHOCYTE COUNT	☒	☐
RED BLOOD CELL COUNT (RBC)	☒	☐	MONOCYTE COUNT	☒	☐
PLATELET COUNT (PLT)	☒	☐	EOSINOPHIL COUNT	☒	☐
HAEMOGLOBIN (HGB)	☒	☐	BASOPHIL COUNT	☒	☐
HAEMOTOCRIT (HCT)	☒	☐	GRANULOCYTE COUNT	☒	☐
MEAN CORPUSCULAR VOLUME (MCV)	☒	☐	THROMBOCYTE COUNT	☒	☐
MEAN CORPUSCULAR HAEMOGLOBIN (MCH)	☒	☐	BIOCHEMISTRY	YES	NO
MEAN CORPUSCULAR HB. CONC (MCHC)	☒	☐	ASPARTATE AMINOTRANSFERASE (AST, SGOT)	☒	☐
MEAN PLATELET VOLUME (MPV)	☒	☐	ALANINE AMINOTRANSFERASE (ALT, SGPT)	☒	☐
RED BLOOD CELL DISTRIBUTION WIDTH (RDW)	☒	☐	TOTAL BILIRUBIN	☒	☐
NEUTROPHIL COUNT	☒	☐		☐	☐
IF ANY OF THE ABOVE CHEMICAL-SPECIFIC BLOOD TEST INDICATES NEGATIVE RESPONSE TO CLINICAL TEST PARAMETERS, PLEASE GIVE DETAILS BELOW. COMMENTS (for abnormal result):					
Doctors Comments:					
<i>No Abnormality Found.</i>					
		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 EXAMINER (SIGNATURE & PRINTED NAME)		DATE OF EXAMINATION 03 JUL 2023			

Id No : 0030 **Date** : 02-Jul-2023 **D.Date** : 02-Jul-2023
Patient's Name : MD SAIADUL IMRAN **Age** : 30Y 0M 0D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/8198

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	15.4 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl.
ESR(Westergreen)	07 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	6,900 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	62 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	32 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	04 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	138 /cumm	50-450/cumm
Total RBC Count	5.20 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	39.6 %	M: 40-54%, F:37-47%
MCV	76.2 fL	76 - 94 fL
MCH	29.6 pg	27 - 32 pg
MCHC	38.9 g/dL	29 - 34 g/dL
RDW	12.3 %	11 - 16 %
PDW	12.9 fL	35 - 56 fL
Total Platelete Count (PC)	1,75,000 /cumm	150,000-450,000/cumm
MPV	8.5 fL	7.0 - 11.0 fL
PCT	0.149 %	0.1 - 0.5 %
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	DIA23070030	Received Date	02/07/2023
Patient's Name	MD SAIADUL IMRAN		
Patient's Age	30Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/8198
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.5 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.8 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	21 U/L	Up to 37 U/L
Serum ALT (SGPT)	27 U/L	Up to 40 U/L
HbA1C	4.5 %	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 Technologist
Radical Hospitals Ltd.



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

Bill No	DIA23070030	Received Date	02/07/2023
Patient's Name	MD SAIADUL IMRAN		
Patient's Age	30Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/8198
Sample	BLOOD		

SEROLOGICAL REPORT

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

BLOOD GROUPING Result	
ABO Blood Group	"B" (+ve)
Rh(D)Factor	Positive

Checked By

[Signature]

Medical Technologist
Radical Hospitals Ltd.

[Signature]

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

Bill No	DIA23070030	Received Date	02/07/2023
Patient's Name	MD SAIADUL IMRAN		
Patient's Age	30Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/8198		
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

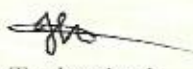
CHEMICAL EXAMINATIONCASTS / LPF

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
Radical Hospitals Ltd.


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

Bill No	DIA23070030	Received Date	02/07/2023
Patient's Name	MD SAIADUL IMRAN		
Patient's Age	30Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/8198		
Sample	URINE		

DRUG ABUSE TEST

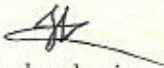
METHOD: Immunochromatographic Assay (Rapid one Step Test)

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 Technologist
Radical Hospitals Ltd.


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

REF: MT. EASTERN ORCHID

DATE: 03/07/2023

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

EYE EXAMINATION REPORT

NAME:	MD SAIADOL IMRAN	RANK: 3 RD OFF	CDC NO: C/O/8198
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VISUAL ACUITY:

RIGHT

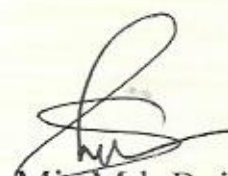
LEFT

UNAIDED

6/6

6/6 -

AIDED

COLOUR VISION: ☒ NORMAL / ☐ BLINDOPINION : ☒ UNFIT / ☐ FIT FOR EMPLOYMENT ON BOARD


Dr. Mir Md. Raihan
 MBBS, PGT (Ophthalmology)
 Assistant Registrar (EX)
 East west Medical College & Hospital

ID: 23060869

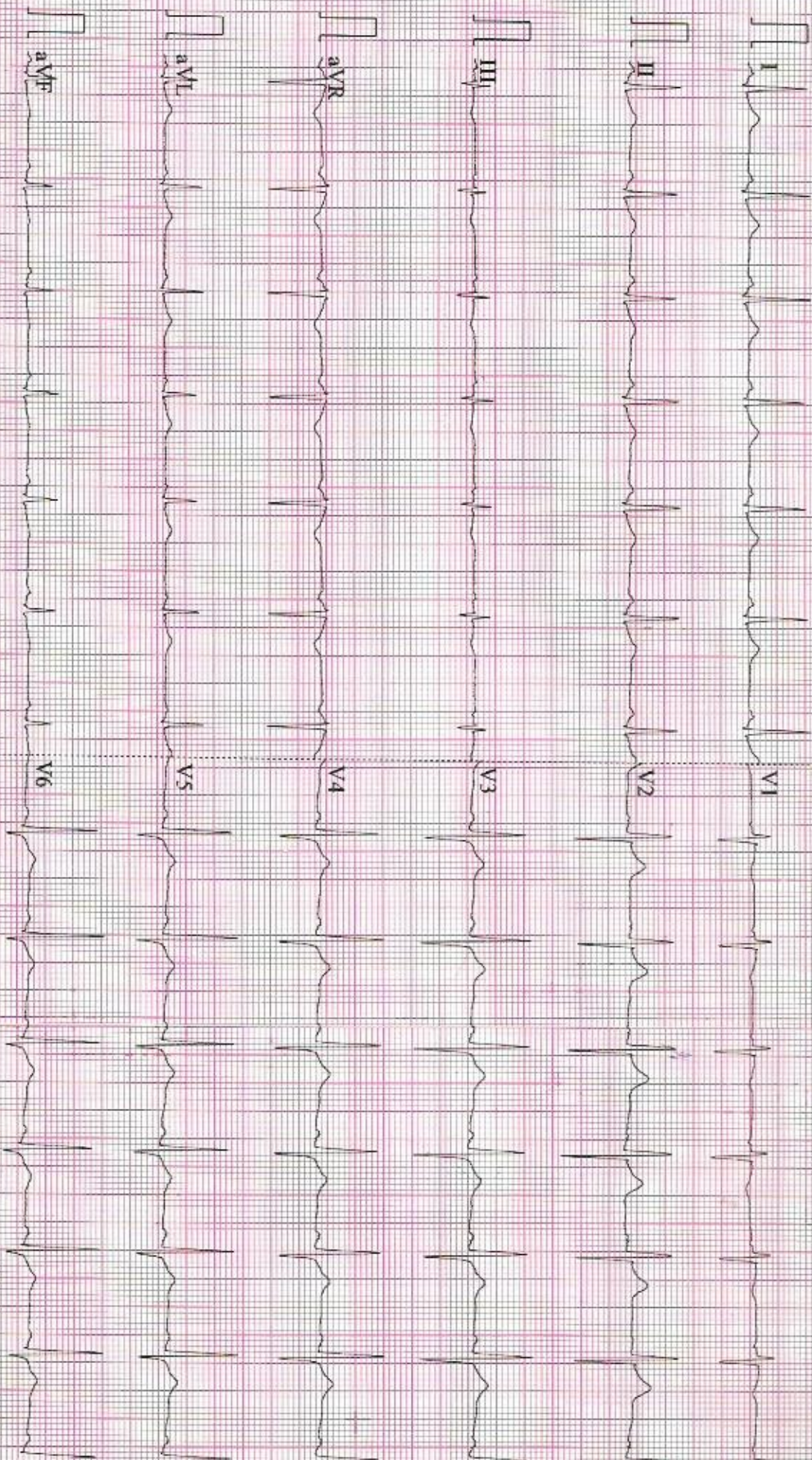
02-07-2023 12:36:51

Mr. Michael Mann
Male 38 Years

HR	: 79	bpm
P	: 104	ms
PR	: 128	ms
QRS	: 90	ms
QT/QTc	: 356/408	ms
P/QRS/T	: 31/25/12	°
RV5/SV1	: 1.235/0.655	mV

Diagnosis Information:
Sinus rhythm
Normal ECG

Report Confirmed by:



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23070030 Receive: 02/07/2023 Print: 02/07/2023
Patient's Name : MD SAIADOL IMRAN
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 : Lung fields are clear.

Bony thorax : Reveals no abnormality.

Comments : Normal chest skiagram.

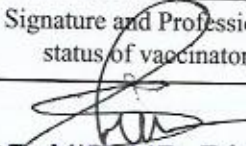

Prof. Dr. Md. Mojibor Rahman
MBBS, DMRD (Radiology & Imaging)
Head of the Department (Radiology & Imaging)
Sylhet Women's Medical College Hospital

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

Imran
This is to certify that
whose signature follows

Date of birth 29-MAY-1993 Sex MALE
MD. SAIADOL IMRAN (C/O/8198)

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
1 03 JUL 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.	
2		

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7		7	8
8			

Continued overleaf Suite our erso

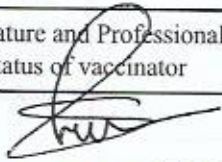
INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

Imran.

This is to certify that
whose signature follows

Date of birth 29-MAY-1993 Sex MALE
MD. SAHADOL IMRAN (C/O 8138)

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
14 DEC 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.		
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.