

HAQUE & SONS LTD.



Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh. Tel: +880 31 716214-6, Fex: +880 31 710530

Accredited By : BMDC Accreditation No. A 55144

PATIENT CONTROL NUMBER:

MEDICAL EXAMINATION CERTIFICATE

		CONT	11/30-0012/5 (SELF)/U	
ADDRESS:			ACT NUMBER: 01736-601275 (SELF)/01	
	☑ Male ☐ Female	VESSEL TYPE : CH	IEM. TANKER TRADING AREA: WORLD WID	
		1268	CO6563	
BIRTH	PASSPORT NUMBER		SEAMAN'S BOOK NUMBER	
SURNAME BISWAS		NTA	MIDDLE NAME	
-	F BIRTH 15-Mar-1990	F BIRTH PASSPORT NUMBER 15-Mar-1990 EF057 NGLADESHI SEX : ☑ Male ☐ Female	WAS SUKANTA F BIRTH PASSPORT NUMBER 15-Mar-1990 EF0571268 NGLADESHI SEX : ☑ Male □ Female VESSEL TYPE : CH	

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	HAMLA, P.O. SAMADHINAGAR, P.S		CANDI, DIS	I. RAJI	BARI.	RANK :	2ND OFF	ICER
ve y	ou ever had any of the following condi	tions?				*		
en :	Condition	YES	NO	1	Condit		YES	NO
1	Eye/vision problem		10/	18		roblems		400
2	High blood pressure		P	19	Do you	smoke?		10/
3	Heart/vascular disease		11	20		on/surgery	D	XI,
4	Heart surgery	[]	9	21		y/seizures	D	12
5	Varicose veins		10/	22		ss/fainting		9
6	Asthma/bronchitis		1	23		consciousness		5/
7	Blood disorder		9	24		tric problems		6,
8	Diabetes		6	25	Depres			W,
9	Thyroid problem		U,	26		ted suicide		d
10	Digestive disorder		9	27	Loss of	memory		H
11	Kidney problem		1	28	Balance	problem		0
12	Skin problem		1	29		headaches		10
13	Allergies		7	30	Ear/nos	e/throat problems		N
14	Infectious/contagious diseases		10/	31	Restrict	ed mobility		9
15	Hernía		14	32	Back pr	oblems		1
16	Genital disorders		Lina	33	Amputa	tion		1
17	Pregnancy of the above questions were answered		1411	34	Fracture	es/dislocations		9
35 36 37 38	Have you ever been signed off as si Have you ever been hospitalised? Have you ever been declared unfit f Has your medical certificate ever be	or sea dut	y? ed or revok	ed?			YES	NO WAY
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Normal				666	6	10				,		
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Describe restrictions (e.g., specific position, type of ship, trade area):	ascribe restrict	tions (e.g.,	specific position	i, type of ship, trac	ie area	a):						
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Action taken by medical examiner (e.g., referral):	Mantelia - L	medical ex	arrimer (e.g., rei	criai).		-			0 F 111	2020		
Fitness Date: 7.6 IIII 2023 / Valid Until 2.5 JUL 2025	ction taken by					/ /						
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All W	Fitness Date		7 6 JUL 2023		1	Va	lid Until	-	£3 JU	L <u>202</u> 3		

In Accordance with Medical Examina MSRS 51 of FMS (CO) Minum, PG (USA) (No. 78) and STCW 1978/1996 as A BMDC A-55144, MMC-BGD-016

1 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.

PHYSICAL EXAMINATION REPORT/CERTIFICATE

MARITIME ADMINISTRATOR

CONFIDENTIAL DOCUMENT

REPURLIC OF THE MADCHALL ISLANDS

	OF THE MAKSHALL ISLANDS	
SURNAME	GIVEN NAME(S)	
BISWAS	SUKANTA	
DATE OF BIRTH	PLACE OF BIRTH	I
3 15 1990	RAJBARI BANGLADESH	SEX
MONTH DAY YEAR	CITY COUNTRY	☑ MALE ☐ FEMALE
EXAMINATION FOR DUTY AS:	MAILING ADDRESS OF APPLICANT:	
MASTER	VILL, PUSHAMLA, P.O. SAMADHINAGAR,	
DECK OFFICER	P.S. BALIA KANDI,	
ENGINEERING OFFICER	DIST. RAJBARI.	
RADIO OFFICER	BANGLADESH.	
RATING		
	IDE FOR MEDICAL REQUIREMENTS) STATE DETAIL	S ON REVERSE SIDE
HEIGHT WEIGHT BLOOD PRESSURE		APPEARANCE 9
167em 8249 1.20/70pm	JEPHAN JADIMIN C	wood
VISION: RIGHT EYE / LEFT EY	E HEARING:	
WITHOUT GLASSES WITH GLASSES		
WITH OLASSES 666	6 RT. EAR MO LE	FT EAR MO
COLOR TEST TYPE: BOOK DE LANTERN D	18 COLOR TEST NORMAL? THE DO NO (IF "NO"	EXPLAIN ON PAGE 2)
ARE GLASSES OR CONTACT LENSES NECESSARY	TO MEET THE REQUIRED VISION STANDARD? YES	C
HEAD AND NECK	HEART (CARDIOVASCUL.	
Nomen	MEANI (CANDIOVASCOL	- mar
1,00000	SPEECH(DECK/NAVIGATIONA	muc
LUNGS	OFFICER)	L OFFICER AND RADIO
110111111	IS SPEECH UNIMPAIRED FOR 1	NORMAL VOICE
EXTREMITIES:		,
UPPER NOMONA	LOWER NOV	me
IS APPLICANT VACCINATED IN ACCORDANCE WITH W	VHO RECOMMENDATIONS? Yes No D	
	E AGGRAVATED BY WORKING ABOARD A VESSEL, OR TO REN	DED HIMAJER LINETT FOR SERVICE
OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS	ON BOAR Yes No	DEK HIMMER GAPTI FOR SERVICE
IF YES, PLEASE ENTER EXPLANATION IN THE SECTION AT TI		
IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRI	IPTION MEDICATION Yes	
Shiswan		2 E 1111 200F
SIGNATURE OF APPLICANT	2 6 JUŁ 2023	2 5 JUL 2025
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF	DATE OF EXAMINATION	EXPIRY DATE
SELECT CONTROL TO A CONTROL TO A CONTROL OF THE CON		
THIS IS TO CERTIFY THAT A PHYSICAL EXAMIN.		ISWAS
THIFUKL	DUTY ON BOARD SHIP NAME OF APPL	ICANT
THIS APPLICANT IS CERTIFIED FREE OF COMMUNI	CABLE DISEASE (OR VIRUSES FOR COOKS) Yes	No D
	FOR DUTY AS A MASTER / DECK OFFICER /	
FT BARROWS CO.	/ 1 4	
	IEF COOK / ☐ COOK ☐ WITHOUT ANY RESTRICT	TONS / LJ
☐ WITH THE FOLLOWING RESTRICTIONS:		
NAME AND DEGREE OF PHYSICIAN DR. MIR M	ID. RAIHAN; M.B.B.S(D.U.), REG. NO. A-55144	
ADDRESS RADICAL HOSPITALS LIMITED 35, SHAR	I MAKHDUM AVENUE ,SECTOR-12 UTTARA, DHAKA-1	230. BANGLADESH
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY	DG SHIPPING BANGLADESH	
DATE OF ISSUE OF PHYSICIANTS CERTIFICATE 6-M	Tay-2014	
SIGNATURE OF PHYSICIAN	Signal Hospitals	2 € 1111 2000
	Seal Mospilal	2 6 JUL 2023
	20 /E	DATE
This certificate is issued by authority.	Talle A facilities A de la Talle March (1990) A Talle A facilities A f	

This certificate is issued by authority of the Maritime Administration DR. MIR. MDheRAILLAN mination (Seafarers) Converse MBBs (DU). DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016

having compriance with the requirements

DG Shipping Bangladesh Approved General Physician

Radical Hospitals Limited

MI-105M

MEDICAL REQUIREMENTS

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's certificate, application for Seafarer's Identification and Record Book, or application for certification of special qualifications. This physical examination must be carried out within the 24 months immediately preceding application for an officer certificate, certification of special qualifications or a Seafarer's Identification and Record Book. The examination shall be conducted in accordance with RMI MG-7-47-1. Such proof of examination must establish that the applicant is in satisfactory physical and mental 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 conducting the examination, the certified physician should, where appropriate, examine the scafarer's previous medical records (including vaccinations) and information on occupational history, noting any diseases, including alcohol or drug-related problems and/or injuries. In addition, the following minimum requirements shall apply:

- (a) Hearing
 - All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in better ear at 15 feet (4.57 m) and in poorer ear at 5 feet (1.52 m).
- (b) Eyesight
 - Deck officer applicants must have (either with or without glasses) at least 20/20(1.00) vision in one eye and at least 20/40 (0.50) in
 the other. Applicants for deck officer and deck ratings who will serve on vessels of 500 gross tons or more must have normal color
 perception that complies with C.I.E. Standard 1; those serving on vessels less than 500 gross tons must comply with C.I.E.
 Standards 1 or 2.
 - Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 (0.63) vision in one eye and at least 20/50 (0.40) in the other. Applicants for engineering officer or rating and for radio operator must comply with C.I.E. Standards 1, 2, or 3. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.
- (c) Dental
 - · Seafarers must be free from infections of the mouth cavity or gums.
- (d) Blood Pressure
 - . An applicant's blood pressure must fall within an average range, taking age into consideration.
- (e) Voice
 - Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (f) Vaccinations
 - All applicants should be vaccinated according to the recommendations provided in the WHO publication, International Travel and Health, Vaccination Requirements and Health Advice, and should be given advice by the certified physician on immunizations. If new vaccinations are given, these should be recorded.
- (g) Diseases or Conditions
 - 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.
- (h) Physical Requirements
 - Applicants for able scafarer, bosun, GP-1, ordinary scafarer and junior ordinary scafarer must meet the physical requirements for a
 deck/navigational officer's certificate.
 - Applicants for fire/watertender, oiler/motor, pump technician, electrician, wiper, tanker rating and survival craft/rescue boat crewmember must meet the physical requirements for an engineer officer's certificate.

IMPORTANT NOTE:

A copy of the MI-105M must accompany the application. The applicant must retain the original of the MI-105M as evidence of physical qualification while serving on board a vessel.

An applicant who has been refused a medical certificate or has had a limitation imposed on his/her ability to work, shall be given the opportunity to have an additional examination by another medical practitioner or medical referee who is independent of the shipowner or of any organization of shipowners or seafarers.

Medical examination reports shall be marked as and remain confidential with the applicant having the right of a copy to his/her report. The medical examination report shall be used only for determining the fitness of the seafarer for work and enhancing health care.

DETAILS OF MEDICAL EXAMINATION

(To be completed by examining physician; alternatively, the examining physician may attach a form similar or identical to the model provided in Appendix 1 of RMI MG-7-47-1).)

- 1. COMPLETE PHYSICAL EXAMINATION, INCLUDING HEARING TEST.
- 2. PATHOLOGICAL EXAMINAT A) Complete Blood Count. B) Blood Sugar Estemation C) Serological Test(VDRL)

D) Hepatitis B Sarface Antegen Test(HbsAg), E) Urinlysis F) Drug Test G) Alcoho

3. X - RAY EXR PA VIEW

4, E.C.G. TEST

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

Seed Hospitals

DR. WITR. MD. RAIHAN
MB89 (BU), PFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipp,ng Bangladesh Approved
General Physician MI-105M
Radical Hospitals Limited.

Rev. Jul/2017

7 6 JUL 2023



HAQUE & SONS LTD.



Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh. Tel: +88 02333316214-6

Name	SUKANTA BISWAS	Date	26-Jul-2023
Age	33	Sex	MALE
Passport No	EF0571268	CDC No	CO6563
Sample	BLOOD	Rank	2ND OFFICER

BIOCHEMISTRY REPORT COMPARE

Vessel Name:	GINGA CARACAL	FUJI GALAXY	
	After Sign-Off	Before Sign-On	Reference Range
Date of Report	0 7 AUG 2022	2 6 JUL 2023	-
Serum Bilirubin	0.5	0.9	0.2 - 1.1 mg/dl
Serum S.G.O.T/A.S.T	27	20	Up to 37 U/L
Serum S.G.P.T.	29	17	Up to 42 U/L

DOCTOR'S REMARKS:

No Restrictions



The second second

Doctor Seal & Signature

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, imit bate: 24th July 2022



Id No : 0886 Date : 26-Jul-2023 D.Date : 26-Jul-2023

Patient's Name : SUKANTA BISWAS Age : 33Y 4M 11D Gender: Male Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/6563

Haematology Report

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

Parameter Name	Results	Reference Range	
Hemoglobin (Hb)	13.9 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)	07 mm/1st hr	Male:0-10, F:0-20 mm/1st hr.	
Total WBC Count(TC)	8,700 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm	1
		Infant(One Year):	100
Differential WBC Count (DC)		6,000-18,000/cumm	
Neutrophils	66 %	Child: 25-66 %, Adult: 40-75 %	
Lymphocytes	29 %	Child: 52-62 %, Adult: 20-50 %	
Monocytes	03 %	Child: 03-07 %, Adult: 02-10 %	W BC CURVE
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %	
Basophils	00 %	Adult: 00-01 %	- 1
Total Cir. Eosinophils	174 /cumm	50-450/cumm	
Total RBC Count	4.52 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul	111
HCT/PCV	36.6 %	M: 40-54%, F:37-47%	
MCV	81.0 fL	76 - 94 fL	.000
MCH	30.8 pg	27 - 32 pg	
MCHC	38.0 g/dL	29 - 34 g/dL	R B C CURVE
RDW	12.5 %	11 - 16 %	rh.
PDW	15.7 fL	35 - 56 fl	A.
Total Platelete Count (PC)	2,05,000 /cumm	150,000-450,000/cumm	All bo
MPV *	9.2 fL	7.0 - 11.0 fL	
PCT	0.189 %	0.1 - 0.%	
Bledding Time(BT)	%	10 - 18 %	
Cloting Time(CT)	%	0.1- 0.2 %	A Section 1 days

All The Later

Checked By Medical Technologist ~

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



Bill No	DIA23070886	Received Date	26/07/2023
Patient's Name	SUKANTA BISWAS	en anni di proporti di principi di princip	40/07/2023
Patient's Age	33Y 4M 11D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),Co	CD(BIRDEM),PGT(Eve).DFM	CDC NO:C/O/6563
Sample	Blood		000110.07070000

SEROLOGYCAL REPORT

Test Name Result

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

OD GROUPINGResult	,AI
ABO Blood Group	"B" (+ve)
Rh(D)Factor	Positive

| FIDSAG (Wethod: (ICT)

negative

Checked By

-Ato

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



Bill No	DIA23070886	Received Date	26/07/2023
Patient's Name	SUKANTA BISWAS		20/01/2020
Patient's Age	33Y 4M 11D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),Co	CD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/6563
Sample	URINE		- V

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	0-1/HPF
Sediment	Nil	Epithelial	1-3/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

#

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



Test Name

DIA23070886	Receive	d Date	26/07/2	2023
SUKANTA BISWAS				
33Y 4M 11D		Patient's	Sex	Male
Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PG	T(Eye),DFM	С	DC NO	C/O/6563
URINE			- Control of the Cont	
	SUKANTA BISWAS 33Y 4M 11D Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PG	SUKANTA BISWAS 33Y 4M 11D Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	SUKANTA BISWAS 33Y 4M 11D Patient's Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM C	SUKANTA BISWAS 33Y 4M 11D Patient's Sex Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO

Result

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

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

Checked By

Ata

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

RADICAL HOSPITAL

radical_hospitals@yahoo.com, www.radicalhospital.com

REF: MT. FUJI GALAXY

DATE: 26/07/2023

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

EYE EXAMINATION REPORT

NAME: SUKANTA BISWAS RANK: 2ND OFF CDC NO: C/O/6563

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

616

666

AIDED

COLOUR VISION:

NORMAL / BLIND

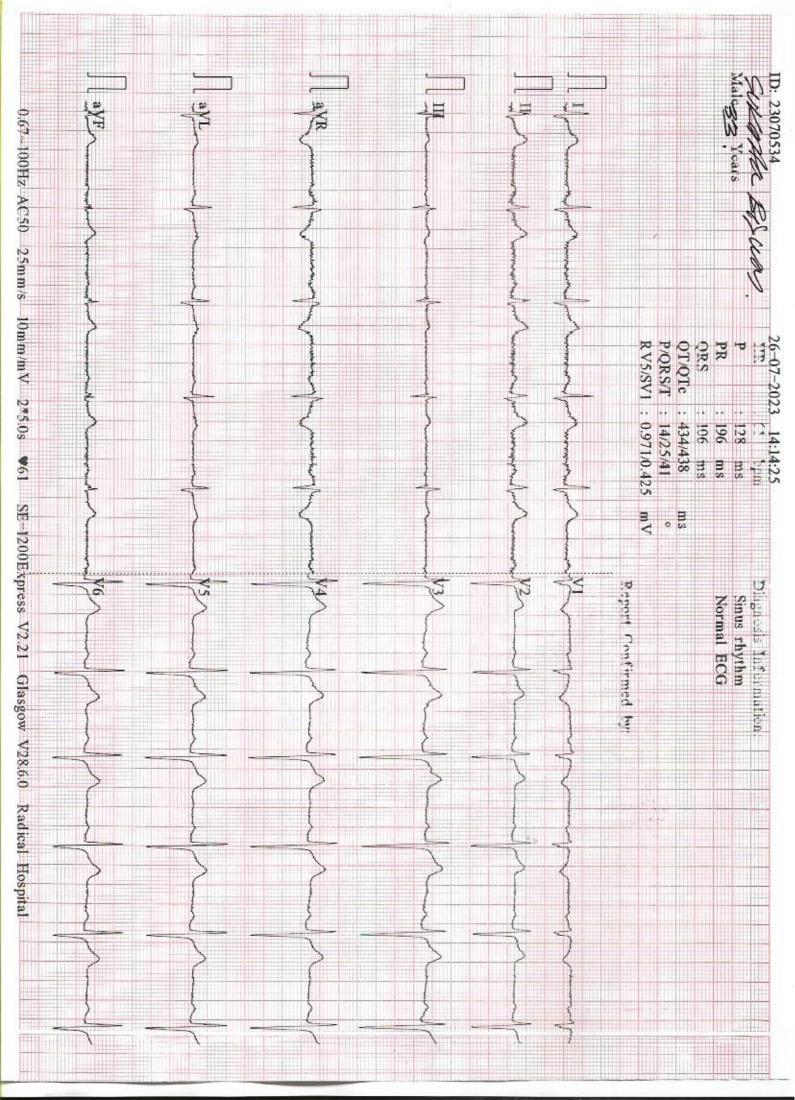
OPINION

UNFIT / FIT FOR EMPLOYMENT ON BOARD

Dr. Mir Md. Raihan MBBS, PGT (Ophthalmology)

Assistant Registrar (EX)

East west Medical College & Hospital





DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.

Age

23070886

Receive:26/07/2023

Print: 26/07/2023

Patient's Name

SUKANTA BISWAS

: 33 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.

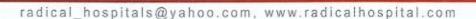
Comments

Normal chest skiagram.

Prof. Dr. Md. Mojibor Rahman

MBBS. DMRD (Radiology & Imaging) Head of the Department (Radiology & Imaging) Sylhet Women's Medical College Hospital







Patient ID	23070886	Voucher No	
Test Name	USG OF KUB	Delivery Date	26/07/2023
Patient Name	SUKANTA BISWAS	MA	
Age	33 Yrs	Sex	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT	(Eye),DFM

THANK YOU FOR THE COURTESY OF THIS REFERRAL

RT KIDNEY: - Is normal in size regular in shape and position. Bipolar length – 9.0 cm. The cortical echogenicity are normal with clear cortico–medullar differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness.
P-C systems are not dilated.

LT KIDNEY: - Is normal in size regular in shape and position. Bipolar length – 9.8cm. The cortical echogenicity are normal with clear cortico–medullar differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness.

P-C systems are not dilated. Two echogenic structure of (3.5)mm, (5.4)mm is noted at the lower calyx of the left kidney with posterior acoustic shadowing.

URETER: There is no dilatation in both ureter .

URINARY BLADDER: Is well filled. Wall thickness is regular and within normal limit.

No intravesicle lesion is seen

PROSTATE: Normal in size, volume is 11.1 cc, regular in shape. Echogenicity is homogenous.

No area of calcification is seen.

COMMENT: Suggestive of Left renal calculus.

Adv: X-ray KUB.

Dr. Asma Ahmed A

PGT(Gynae & obs) Advanced Training on TVS

Consultant Sonologist

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA This is to certify that whose signature follows Sukanta Telephone Biswas has on the date indicated been vaccinated or represented expires the leaves of the leaves

Date	Signature and Professional status of vaccinator	Approved	Stamp
POLL	DR. MIR. MD. RAIHAN MB8s (DU), DFM, CCD (Birdem), PGT (Ophfin) BMDC A-55144, MMC-BGD-015 DG Shipp.ng Bangladesh Approved General Physician	SEOR VACCING SS, Shah Makhdum Avenus Utture, Dhaka	
2 11/9/	Radical Hospitals Limited DR. MR. VID. RAIHAN MBBS (DU). DFM. CCD (Birdem). PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician Radical Hospitals Limited.	Son VACCINATION OF THE PROPERTY OF THE PROPERT	
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5	The Marketine The Committee of Landscorp and the Committee of the Committ	5	6
6			
7		77	8

Continued overleaf Suite our erso

ISSUED ON BEHALF OF THE DEPARTMENT OF SHIPPING GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

Form No: SMC



SL NO.

04.2023.4421

SEAFARER MEDICAL CERTIFICATE

This certificate is issued in accordance with Bangladesh Merchant Shipping Ordinance, 1983 and Bangladesh Merchant Shipping Officers and Ratings Training, Certification, Recruitment, Work Hours and Watch keeping Rules, 2011 in compliance with the International Convention on Standards of Training Certificate and Watch keeping for Seafarers, 1978 as amended (STCW'78) and Regulation 1.2 of the Maritime Labour Convention, 2006

Seafarers, 1978 as amended (STCW'78) and R			<u> </u>	
SEAFARER INFORMATION: Name: Last BISWAS First	UKANTA	Middle		
Gender: (Male/F emale)Nationalit	W. BANGLADESHI	Date: 21 JU	1 2023	
Occupation: Deck/Engine/Catering/Other (specify)		Rank: 2ND		
Father's/ Husbad'sname: NIMAI CHAND	RA BISWAS	C.D.C No.	01 6563	
Mother's Name: MIN A RANI BISW A	2.4	Seeman ID No	CONT. 12-22-9-20-9-19-20-20-9-19-20-9-20-9-20-	
Address: House No:Street/ Ro	Passport No. EF 0571268			
Locality/Village: PUSHAMLA	ad 140	NID No. 8217 34 5811 Date of Birth: 15 / 03 / 19 9 0		
PO: SAMADHINAGAR				
PS: BALIAKAN DI			-7.3 (2.4)	
District: RAJBARI		(DD/MI	M/YYYY)	
DECLARATION OF THE RECOGNIZED MEDICAL PR				
am duly authorized by the Department of Shipp the followings:	ping, Government of the Pe	ople's Republic of I	Bangladesh and co	
Confirmation that identification documents we	ere checked at the point of ex	vamination	:YES/NO	
2. Hearing meets the standards in section A-I/9	or or or or or or or or	cannia don	:YES/NO	
Unaided hearing satisfactory?			:YES/NO	
4. Visual acuity meets standards in section A-I/9)?		:XES/NO	
5. Colour vision meets standards in section A-I/9	9?		:YES/NO	
Date of last colour vision test			:2.1. JUL. 2023	
6. Fit for lookout duties?			:YES/NO	
Is the seafarer free from any medical condition			,	
render the seafarer unfit for service or to render	the health of any other person	ons on board?	:YES/NO	
Any limitations or restrictions on fitness?	***		:YES/NØ	
If YES, specify limitations or restrictions:			22	
	CAL HOSPITAL LIMITED ora Dhaka, Bangladesh	*,		
9. Medical fitness category : Fit-No restricti	ion Fit-Subject to	o restrictions	Unfit	
10. Date of examination/Issue (DD/MM/YYYY)2	1 JUL 2023			
11. Date of expiry (DD/MM/YYYY) 2 0 JUL 2025		pare from the date of	tavamination"	
The same of oxpany (OD) Male 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·	sais nom the date of	rezamilation.	
I have read the contents of the certificate	HOSON HOSON		WE RATHAN	

Seafarer's Signature 8613

review.

and have been informed of the right to



MBBS (DU), DPM, CCD (Budem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipp.ng Bangladesh Approved
General Physician
Radical Hospitals Limited

Name & Signature of the practitioner:

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifig:itions 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 24 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. The examination shall be conducted in accordance with the International Labor Organization World Health Organization, Guidelines for Conducting Pre-sea and Periodic Medical Fitness Examinations for Seafarers (ILO/WHO/D.211997). Such proof of examination must establish that the applicant is in satisfactory physical and mental 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 conducting the examination, the certified physician should, where appropriate, examine the seafarers previous medical records (including vaccinations) and information on occupational history, noting any diseases, including alcohol or drug-related problems and/or injuries. In addition, the following minimum requirements shall apply:

(a) Hearing:

 All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whis pered voice in better ear at 15 feet (4.57m) and in poorer ear at 5 feet (1.52m).

(b) Eyesight:

- Deck officer applicants must have (either with or without glasses) at least 6/6 [20/20] (1.00) vision in one eye and at least 6/12 [20/40] (0.50) in the other. If the applicant wears glasses, he must have vision without glasses of at least 6/45 [20/150] (0.13) in both eyes. Deck officer applicants must also have normal color perception and be capable of distinguishing the colors red, green, blue and yellow.
- Engineer and radio officer applicants must have (either with or without glasses) at least 6/9 [20/30] (0.67) vision in
 one eye and at least 6/15 [20/50] (0.40) in the other. If the applicant wears glasses, he must have vision without
 glasses of at least 6/60 [20/200] (0.10) in both eyes. Engineer and radio officer applicants must also be able to
 perceive the colors red, yellow and green.

(c) Dental:

Seafarers must be free from infections of the mouth cavity or gums.

(d) Blood Pressure:

An applicant's blood pressure must fall within an average range, taking age into consideration.

(e) Voice:

 Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.

(f) Vaccinations:

 All applicants shall be vaccinated according to the requirements indicated in the WHO publication, International Travel and Health, Vaccination Requirements. and Health Advice, and shall be given advice by the certified physician on immunizations. If new vaccinations are given, these shall be recorded.

(g) Diseases or Conditions:

 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 useofnarcotics.
 Applicants diagnosed with, suspected of, orexposed to any communicable disease transmit table by food shall be restricted from working with food or in food - related areas until symptom-free for at least 48 hours.

(h) Physical Requirements:

- Applicants for able seaman, bosun, GP-1, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigational officer's certificate.
- Applicants for fireman/watertender, oiler/motorman, pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an enineer officer's certificate.

IMPORTANT NOTE:

An applicant who has been refused a medical certificate or has had a limitation imposed on his/her ability to work, shall be given the opportunity to have an additional examination by another medical practitioner or medical referee who is independent of the shipowner or of any organization of shipowners or seafarers.

Medical examination reports shall be marked as and remain confidential with the applicant having the fight of a copy to his/her report. The medical examination report shall be used only for determining the fitness of the seafarer for work and enhancing health care.

DETAILS OF MEDICAL EXAMINATION:

(To be completed by examining physician; alternatively, the examining physician may attach a form similar or identical to the model provided in Appendix1):

1. Complete physical Examination.

2. Pathological Examination:

a.CBC b.ESR c.HBSAG d.LFT e.ECG f.RBS g.URINER/M/E 7 1 JUL 2023

DR. MIR. MD. RAIHAN
MB8S (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipp.ng Bangladesh Approved
General Physician
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