



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 202038

MEDICAL EXAMINATION CERTIFICATE

URNAME	V. NO. IV	FIRST NA	ME			11 - 5 - 12	MIDDLE NAME	0		160
	RAKIB		MD. G	OLAN	И		MOHIUDDIN			
ACE AN	D DATE OF BIRTH	PASSPOR	RT NUMBER				SEAMAN'S BO			
BOG		10.5000000000	A0450	06927			0.5 1111 10 50	CO4536		
TIONAL	ITY: BANGLADESHI SEX:	☑ Male	☐ Female	VE	SSEL TY	PE: CH	EM. TANKER TRA		wc	RLD WID
RMANE	NT HOME ADDRESS:						ACT NUMBER :	01672585		
MD. MC	OMTAZ UDDIN AKANDA, ROAD I	NO. 14, HOL	JSE NO. 09,	UPOS	HOHOR					
	A, P.O. & P.S. BOGRA, DIST. BO					RANK	7	CHIE	F OF	FICER
Have you	u ever had any of the following cor	nditions?								
	Condition	YES	NO_		Conditio					
	Eye/vision problem			18					ES	NO
	High blood pressure		9	19	Sleep pr				0	
3	Heart/vascular disease			20	Do you s					-
	Heart surgery	D		21	Operatio					100
5	Varicose veins	O	1	22	Epilepsy Dizzines					4
6	Asthma/bronchitis	0	- I	23	Loss of o					
7	Blood disorder	D	9	24						4
8	Diabetes		8	25	Psychiat Depress		21115			1.02500.1
	Thyroid problem	D	4	26	Attempte					
522000	Digestive disorder	0	-	27			o .			2
	Kidney problem		140	28	Loss of r Balance	100000000000000000000000000000000000000			П	
	Skin problem	0	D	29		A STATE OF THE PARTY OF				
	Allergies	Ü	موا	30	Severe h	200	2000			
	Infectious/contagious diseases	0		31			problems			4
15	Hemia	11	J	32	Restricte		ly.			3
16	Genital disorders	- []		33	Back pro Amputat					-
17	Pregnancy	D	MA	34			460000			4
	the above questions were answer				Fracture	s/disioca	tions		0_	LJ
37 38 39 40	Have you ever been hospitalised? Have you ever been declared unfi Has your medical certificate ever Are you aware that you have any Do you feel healthy and fit to p Are you allergic to any medication	it for sea duty been restrict medical prob perform the	ed or revoked lems, disease	es or i		ition/occ	upation?			800000
Commer	nts:									A
	FIT F	OR DUT	CN BOAL	RD S	HIP					
42	Are you taking any one ereceptati		tion on disce				OFFICE AND ADDRESS OF THE PARTY		-	
Name and Address of the Owner, where the Owner, which is the Owner, which	Are you taking any non-prescription ease list the medications taken an								D.	
ii yes, pii	case list the medications taken an	u me purpos	e(s) and dosa	ge(s)						-
			The same			- 11				
l hereby	authorize the release of all my pre	vious medica	al records from	n anv	health oro	fessiona	ls, health institution	one and public	autho	ritioe
	ir Md. Raihan (approved medical p	ractioner) I a	lso certify tha	t my h	istory con	tained at	ove is true and a	ny false staten	nent v	vill
to Dr. Mi	y me from my employment, benefi	s and claims		33	332				20000	
to Dr. Mi										
to Dr. Mi	-Aie Cu Silo									
to Dr. Mi	- Giglipato									
to Dr. Mi disqualif	Gregory Signature of Seafarer									
to Dr. Mi disqualif	Signature of Seafarer EXAMINATION	-							_	
to Dr. Mi disqualify	XAMINATION	- BMD L.C	Blood Press	ure S	vstolic 12	51 m	Diastolic 🗫 r	М рн ес-	7	8 6
to Dr. Mi disqualif		- B Z 6:8	Blood Press	ure: S	ystolic [5	31 mg	Diastolic 🐉	MPULSE:	7	8 4/
to Dr. Mi disqualify	XAMINATION 15/9 Height (cm) / 67	2 B © 6.8			ystolic [5	0		0	7	8-/
to Dr. Midisqualify DICAL E Weight	XAMINATION Hearing by Audiometry	B 6.8	Audiomet	ry .		Hea	aring by Whisper	Test	7	84/
to Dr. Mi disqualify DICAL E	XAMINATION Height (cm) / 6 7 Hearing by Audiometry		Audiomet	ry .	ystolic 3	Hea [] Ad	aring by Whisper I	l'est lequate	7	84/
DICAL E Weight	AMINATION Hearing by Audiometry Adequate ☐ Inadequate		Audiomet	ry .		Hea [] Ad	aring by Whisper	l'est lequate	7	8+/

1			sual acuity	n (m]		1	Visual fi	elds
		Unaided		ided	off are			Norma	al.	Defective
Distant	Right ey	e Left eye	e Right eye	+	eff eye	Distri			_	9500 E
Near			010	10	100	Right e			_	
	meets the s	standard laid de	wn in STCW Code	Socti	ω - Λ 1/0	J Cell by	NO.			-V
		CW CODE Sect		Non		☐ Doubti		□ Defe	ective	
		ı test: Date (day	15	JUN	2023			100		
			Normal Abnor	emal						
Head			Nomial Abilo		Varier	se veins				rmal Abnorma
Sinuses, nos	e throat					ılar (inc. pedal	nulses)			
Mouth/teeth	c, unout					nen and visce			133	v 0
Ears (genera	d)				Hernia		ıa		107	
27.75	2000								- 83	
Tympanic me	emprane					(not rectal exa	111)			
Eyes						ystem	20042		3.0	
Opthalmosco	ору					and lower ext				
Pupils						(C/S, T/S and				
Eye moveme			19 0			logic (full brief)			
Lungs and ch	hest				Psych					
Breast exam	ination		19 0		Gene	ral appearance	•		1	
Heart			WA -	1	Skin				t	
		EXAMINATIO		0.0	ere er nie	NOT ANY 1 TOTAL PROPERTY.	Texas and		Total Vision	
Chest X-Ray		IVI	BIO CHEMICAL	L (LIV	ER FUNC	TION TEST)	Marijuana	10-5		ive Negative
ECG		mo	BILIRUBIN		0.0	2	Alcohol Tes	1	☐ Posit	ive LT Negative
	BLOOD R	/E	SGPT		17	۷.	URINE R/E		SHC-LONGING	MAN
DC(differenti	ial count)	mo	SGOT		20	2		(THERS'	
HAEMOGLO	BIN (HGB)	12.1	DRUG A	ND A	LCOHOL	TEST)	HBsAg		□ Read	tiv El Nonreacti
ESR (WEST	THE RESIDENCE OF THE PARTY OF T	00	Morphine		-	1 Negative	HIV / AIDS	Test		tiv Nonreacti
WBC		2 100	Amphetamine	_		Negative	VDRL		and the second	tiv El Nonreacti
C. C. C. C. C. C. C.	D GLUCOS	FLEVEL	Phencyclidine			Negative	Blood Type		- Intege	BUZVE
RANDOM	J JLJCCC	100	Barbiturates			Negative	Psychologic	al Evam	-	7
HBA1C		71:20-1	Cocaine	_	Positive		Others(KUB			MAS
		14:21.	13000.14	1-		1300.0	101.0.0(100	5.0.000	_	1111
ereby I declare	that I am in	knowledge of	the contents of the	Physi	ical examir	nations:				F 111M 2022
-(hal	Rib	*	AAT		N AM MON	HIUDDIN RAK	TIP.		- 1	5 JUN 2023
T () C	fores	4	IVIL		Name of S		AID.	-	-	Date
gnature of Sea	ararer			-	Name of a	beatarer				Date
CONTRACTOR OF THE PARTY OF THE		service at sea ee's personal de	: eclaration, my clinic	al exa	mination a			ts record		, I declare the
n the basis of t	ally;		for lookout duties				(303723307.03		ut duties	Ša.
the basis of taminee medic	ally:	Dec	ck seprice		Engine se		Catering s		ut duties	Other services
n the basis of the	ally;	Dec	ck septice				Catering :	service	ut duties	
	ally;	Dec	ck seprice				Catering s	service	ut duties	





Id No : 0409

Date: 15-Jun-2023

D.Date: 15-Jun-2023

Patient's Name: MD GOLAM MOHIUDDIN RAKIB

Age: 40Y 6M 21D Gender: Male

Specimen : Blood

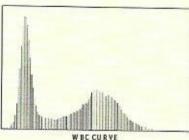
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

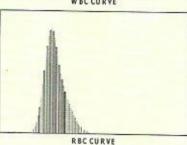
CDC NO: C/O/4536

Haematology Report

(Relevant estimations were carried out by Mythic-One er & checked manually)

Parameter Name	Results	thic-One Auto Haematology Analyzer Reference Range
Hemoglobin (Hb)	12.1 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)	08 mm/1st hr	Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC) Differential WBC Count (DC)	7,600 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Neutrophils	58 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	37 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	03 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	152 /cumm	50-450/cumm
Total RBC Count	4.71 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	33.1 %	M: 40-54%, F:37-47%
MCV	70.3 fL	76 - 94 fL
MCH	25.7 pg	27 - 32 pg
MCHC	36.6 g/dL	29 - 34 g/dL
RDW	13.6 %	11 - 16 %
PDW	14.7 fL	35 - 56 fl
Total Platelete Count (PC)	1,53,000 /cumm	150,000-450,000/cumm
MPV	10.3 fL	7.0 - 11.0 fL
PCT	0.147 %	0.1 - 0.%
Bledding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %
The state of the s		0.1 0.2 70





Checked By Medical Technologist

Dr. Sumaiya Khatun MBBS,MD(Gold Medalist) (BSMMU)

Associate Professor Dept. Of Microbiology

East West Medical College & Hospital.



Bill No	DIA23060409	Received Date	15/06/2023
Patient's Name	MD GOLAM MOHIUDDIN RAKIB	Treceived Date	15/06/2023
Patient's Age	40Y 6M 21D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCE	The second secon	CDC NO:C/O/4536
Sample	BLOOD	,,,,,,,, -	000110.0/0/4000

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.2 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.9 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	28 U/L	Up to 37 U/L
Serum ALT (SGPT)	17 U/L	Up to
HbA1C	4.3 %	4.2 - 6.7 %

REMARKS (IF ANY)

IN VIEW OF THE LIVER FUNCTION TEST RESULT, HIS BLOOD IS FREE FROM TOXIC EFFECT OF CHEMICALS.

Checked By

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



Bill No	DIA23060409	Received Date	15/06/2023
Patient's Name	MD GOLAM MOHIUDDIN RAI		13/00/2023
Patient's Age	40Y 6M 21D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/4536
Sample	BLOOD	, ,, - , (=, 5), (5) (1)	020 110.0/0/4000

SEROLOGYCAL REPORT

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

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

Checked By

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

Dept. of Microbiology East West Medical College and Hospital



Bill No	DIA23060409	Received Date	15/06/2023
Patient's Name	MD GOLAM MOHIUDDIN RAKI	TO PROSPERATE OF THE PROPERTY	1.0.00.2020
Patient's Age	40Y 6M 21D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),	CCD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/4536
Sample	Urine		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	0-2/HPF
Sediment	Nil	Epithelial	0-2/HPF

CHEMICAL EXAMINATIONCASTS / LPF

Reaction	Acidic	RBC	Nil
Albumin	NIL	WBC	Nil
Sugar	NIL	Epithelial	Nil
Ex.Phosphate	Nil	Granular	Nil
		Hyaline	Nil

ON REQUESTCRYSTALS & OTHERS

Bile Salt	Not Done	Urates	Nil
Bile Pigment	Not Done	Uric Acid	Nil
Ketones	Not Done	Calcium oxalate	Nil
Urobilinogen	Not Done	Amor. Phos	Nil
B.J. Protein	Not Done	Hippurate crystal	NIL

Checked By

Ale

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



Test Name

Bill No	DIA23060409	Received Date	15/06/2023
Patient's Name	MD GOLAM MOHIUDDIN RAKIB		10/00/2020
Patient's Age	40Y 6M 21D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD((BIRDEM),PGT(Eye),DFM	CDC NO:C/O/4536
Sample	urine	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	323 113.0701 1000

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

Medical Technologis Radical Hospitals Ltd.

40

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



REF: MT. FUJI GALAXY

DATE: 15/06/2023

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

EYE EXAMINATION REPORT

NAME: MD GOLAM MOHIUDDIN RAKIB

RANK: CH.OFF

CDC NO: C/O/4536

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

AIDED

616

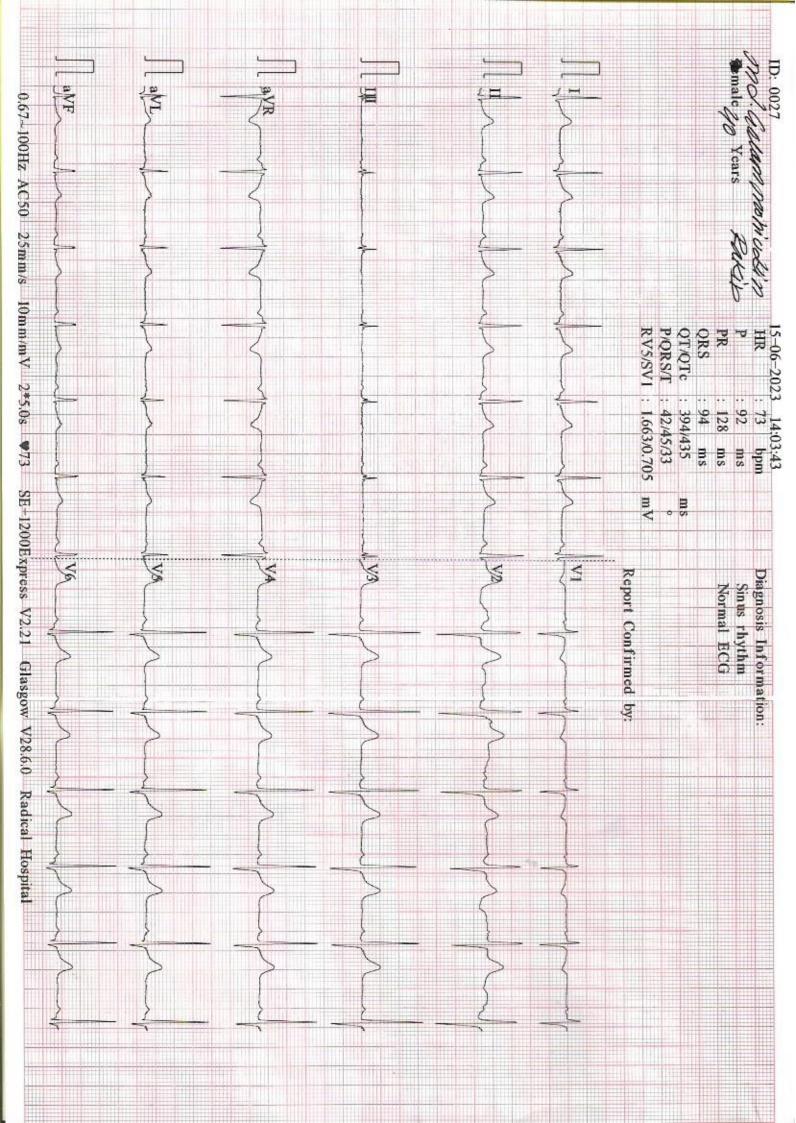
COLOUR VISION:

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

Print: 15/06/2023

M

Sex

ID. No. 23060409 Receive: 15/06/2023 Patient's Name

MD GOLAM MOHIUDDIN RAKIB

Age

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.

Normal chest skiagram. Comments

Prof. Dr. Md. Mojibor Rahman

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



Patient ID	23060409	Voucher No	
Test Name	USG OF KUB	Delivery Date	15/06/2023
Patient Name	MD GOLAM MOHIUDDIN RAKIB	Delivery Date	13/00/2023
Age	40 Yrs	Sex	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CC	D(BIRDEM) PGT(Eve	DEM

THANK YOU FOR THE COURTESY OF THIS REFERRAL

RT KIDNEY: - Is normal in size regular in shape and position. Bipolar length 9.5 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 10cm. 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.

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

No intravesicle lesion is seen

PROSTATE: Normal in size volume is 16.6 cc regular in shape. Echogenicity is homogenous.

No area of calcification is seen.

COMMENT: Normal study.

Dr. Asma Ahmed 15.

PGT(Gynae & obs) Advanced Training on TVS Consultant Sonologist

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION WID: NO LAW WORTH WORTH NAGAINST YELLOW-FEVER

This is to certify that Date of birth 25.11.7982 Sex whose signature follows

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
JIM SIM	DR. MR. MD. RAIHAN MB8\$ (DU), DFM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.	L NO BOTTO DAKAR OF THE PARTY O	SS, Sheh Makhdum Avenus Utiera, Dhelas
2 4	12 July 1	BAIHAN FOR	
3	MESS (NOT) CATALON MACCORD OF THE CONTRACT OF		3 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.

viiose s	B. Clo -Cla 453 6 o certify that Date of birth 25 ignature follows			
	has on the date indicated been vaccin	nated or revaccinated ag	ainst Cholera	
Date	Signature and Professional status of vaccinator	Approved	Stamp	THE P
0248	DR. MR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016	S, Shah Makhdum Averus Utters, Dhaka	* NOOR	
2	DR. MR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited. DR. MIR. MD. MBBS (DU), DFM, CCD (Birder BMDC A-55144, MMC DG Shipping Banglade General Physic	RAIHAN Standard Stan	dum St	**
3	DR. MIR. MD. RATHAN	S FOR VACCING		4
12 JUN 200	MBBS (DU), DFM, CCO (SIMPLE) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.	Mars, Dhehn		garpo)
5		5	To distribute a	6
6				
7		7		8