

FR-HR22 Rev No: 1.1 Rev Date: 23.09.2020

Approved By: MR

### Pre Employment Medical Examination (PEME)

#### Medical Standard-Implementation

Applicability	Seafarers Age	PEME Frequency	Standard	*Framingham Test Score
All Sea Staff (no medical condition)	<45 years old	2 yearly	Flagstate- STCW/MLC2006	N.A
All Sea Staff	@ 45 Years	1 time screening	Flagstate- STCW/MLC2006 + UK P&I standard	Yes
All Sea Staff (no medical condition)	Age > 45 < 50 years old	2 yearly	Flagstate- STCW/MLC2006	Yes
All Sea Staff	≥ 50 Years old	Yearly	Flagstate- STCW/MLC2006 + UK P&I standard	Yes
All Sea Staff with medical condition	All Age Group	Yearly	Flagstate- STCW/MLC2006 + UK P&I standard	Yes

<sup>\*</sup>Framingham test (Link on page 9 of Guidance notes)- Analysis of 10 year risk of coronary heart disease.

Notes: For staff under medication, the medicine should be available for the full contract duration + two month. The seafarer is required to inform the Master if he/she is under medication and show the medicines carried.





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Name (last, first, middle):	AL-HIKMA, MUHAMMAD	Company ID :	EAGLESTAR
Date of birth (DD/MMM/YYYY):	28/05/1989	Gender (Female / Male):	Male
Home address:	HOUSE: 15, ROAD: 3, BI H/E, C+G, RANGLAP	SCH: K. 4AL	1214444
Passport No.:	E80994697	Discharge Book No.:	45821004091
Type of ship (LNG / Petroleum / Chemical tanker):	LPG	Nationality:	MANGLADELHI
Trade area (e.g., coastal, worldwide):	WOLDWIDE	Rank:	40

Sect.	Itoms	Res	ult(s)	Company of the Compan	
Sect.	Ject.	Items	Positive	Negative	Remark(s)
Α	Alcohol			*11	
В	Drug			253	
	Amphetamine		/		
	Cannabinoids				
	Cocaine				
	Opiates			- 4	
	Phencyclidine				
	Benzodiazepine				
	MDMA (Ecstasy)				

Sect.	Items	Normal	Abnormal	Remark(s)
С	Spirometer (Pulmonary Function Test)	_		7 - 4 A
Sect.	Items	Normal	Abnormal	Remark(s)
D	Audiometry Test			
-			-	
E	Blood Test			
Е	Blood Test  1. Full Blood Picture, CBC, Blood typing, blood chemistry.			*2.
E Sect	1. Full Blood Picture, CBC, Blood	Normal	Abnormal	Remark(s)
	Full Blood Picture, CBC, Blood typing, blood chemistry.	Normal	Abnormal	
	Full Blood Picture, CBC, Blood typing, blood chemistry.  ITEMS	Normal	Abnormal	

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1	5. HIV Test				
(	6. VDRL				
- 1	7. SGPT	/		22012	
	8. SGOT			19 010	
	9. Bilirubin	/		o. Domital	
	10. Alkaline phosphatase	1		159 mg/de	
	11.BUN			27 male	11.1.
-	12.Creatinine	/		110 metal	1320
	13. FBS (Fasting Blood Sugar) & Post Prandial			4.9001de	
	Blood Test (Chemical Tankers only if carrying any of the below chemical)  To test within 2 weeks of signing-off.  Any other tests specified by DOSH (Department of Occupational Safety and Health) based on the specific chemical the vessel is carrying.				
	1. Benzene	Negw	L		: 11
	2. Xylene	New	_		31.0
	3. Phenol	Negah	re.		100
	4. Ammonia	Negel	u.		
Sect.	ltems	Normal	Abnormal	Remark(s)	10 m
G	ECG				
Н	USG (Full abdomen) + KUB ultrasound				
1	Chest X-Ray (Digital)				
J	Psychological Examination	1			Salaufeet
K	Dental Examination	1			
L	Stool Test (For Food Handlers Only)	1			-
М	Pregnancy (For Female Only)	1	= 1 = 1 = 1 = 1 = 1		
Ν	Urinalysis (Protein / Sugars)				
0	Treadmill test	~			10 ==
Sect	Items (Medical standards**)	Normal	Abnormal	Remark(s)	
Р	Body Mass Index (BMI)     Please enter weight and height below.	70 m		28-0	- 4 L - 4

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	2. Lipid Profile (On treatment)  *Classification standard to NCEP ATP-III:  i. Total Cholesterol  < 5.2 : Desirable  5.2 - 6.2 : Borderline  > 6.2 : High Risk  ii. LDL Cholesterol  < 2.58 : Optimal  2.58 - 3.34; Near optimal	Young	132mM
	3.35 – 4.11: Borderline 4.12 – 4.89: High > 4.9 : Very high		gomile
	3. Hypertension (With medication)	ram.	
	Diabetes Mellitus HbA1c (% of sugar for past 3 month)     *Classification standard for diabetes:		
	3.0 – 6.0%; Non-diabetic 6.1 – 7.0%; Good control 7.1 – 8.0%; Fair control > 8.1%; Poor control	Horal	6.37.
	5. Asthma		
**Ref	er Guidance Notes page 8		
Q	Vaccination History		Last Taken
	1. Oral Cholera		0 6 JUN 2023
	2. Yellow Fever		
	3. Typhoid (Catering Staff Only)		10 pt
	4. Others (Please Specify):		

Have you	ever had any of the following conditions?			
T				
No.	Condition (If answered "yes," please give details)	Yes	No	Remark(s)/Details
1	Eye/vision problem			
2	High blood pressure			
3	Heart/vascular disease			
4	Heart surgery	7	-	
5	Varicose veins			
6	Asthma/bronchitis			and Comments
7	Blood disorder			
8	Diabetes Hospira			



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9	Thyroid problem		-,		
10	Digestive disorder				
11	Kidney problem		/		
12	Skin problem		/		
13	Allergies				
14	Infectious/contagious diseases				
15	Hernia				
16	Genital disorders		_	<b>*</b>	11.4
17	Pregnancy	N	P		
18	Sleeping problems	. /	1		1 - 1 (-14-
19	Lungs and Chest problems		1		
20	Operation/surgery		/		100000
21	Epilepsy/seizures .		/		-17.75
22	Dizziness/fainting		~		
23	Loss of consciousness		/		
24	Psychiatric problems/ Depression		_		-
25	Problems in the Breast				
26	Attempted suicide				- 4
27	Loss of memory				
28	Balance problem		1		
29	Severe headaches			,	
30	Ear/nose/throat problems				
No.	Condition (If answered "yes," please give details)	Yes	No	Remark(s)/Details	
31	Restricted mobility		/		
32	Back/ Spine problems		1		
33	Neurologic problems		1		
34	Fractures/dislocations				5.0153
35	Relevant Family Medical History (E.g. Diabetes, stroke, heart disease, high blood pressure)		/	7	
36	Have you ever been signed off as sick or repatriated from a ship?		1		1 20
37	Have you ever been hospitalized?		/	1	
38	Have you ever been declared unfit for sea duty?			12.	
38	Has your medical certificate ever been restricted or revoked?				
40	Are you aware that you have any medical problems, diseases or illnesses?		ing H	050//2	
41	Do you feel healthy and fit to perform the	/	ileal	130	. 2

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	duties of your designated position/occupation?	/	11 1111
42	Are you allergic to any medications?		
43	Are you taking any non-prescription or prescription medications?  (If yes, please list the medications taken and the purpose(s) and dosage(s).)  Please specify the quantity of each medicine carried.		
44	OthersCondition (Please Specify):		*

Sect.	Items			Remarks
S	Vital Parameters	-		
	Framingham score * (Please refer link to calculator on Page 9)  If Framingham score > 10.0 % provide lifestyle guidance			
	2. Blood Pressure	120	18v m	
	3. Pulse Rate		2 b/m.	
	4. Vision Test	Left	Right	
	i. aided			
	ii. unaided	616	614	
	5. Color Vision (Ishihara Plates): 24/38	000		

I hereby certify that the personal declaration above is a true statement to the best of my knowledge, and that I am not suffering from any disease likely to aggravate by working aboard a vessel or to render me unfit for service at Sea or endangering the health of other personnel on board. Non disclosure of pre existing conditions will prejudice all my benefits under the CBA or Company's terms and

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 MBBS (DU), DFM (Approved Medical Examiner).

Signature of examinee: Witnessed by: (Signature) DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdom), PGT (Ophth) BMDC A-55144, MMC-BGD-016 Date (day/month/year): 0 6 JUN 2023

Witnessed by: (Name)

DG Shipping Bangladesh Approved General Physician

Radical Hospitals Limited.

Assessment of fitness for service at sea

IMS-FC-HRS



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On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the examinee medically:

No.	Assessment of Fitness	Fit Unfit	Remarks
1	Look-Out Duty		
2	Deck Service		
3	Engine Service		4
4	Catering Service		11
5	Other Services (Please Specify):		* - 3×230

No.	Describe Restrictions (e.g., specific positions, type of ship, trade area)	Remarks
	No Restrictions	Fit To Sail

0.0 1111 2022
0 6 JUN 2023
0.5 JUN 2025
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.

Name of medical examiner: (typed or printed) DR. MIR MD. RAIHAN MBBS (DU), DFM

Authorized by: DG SHIPPING BANGLADESH (competent authority)

#### Remarks: The maximum validity of this certificate,

- For age <50 Years with no medications 2 Years</li>
- For≥ 50 Years 1 Year.
- For all age groups with medications 1 Year.
- Tests prescribed should be in accordance with local laws.
- Seafarer under medication to carry prescription and medicines for the tenure of the contract + 1 month.

#### \*\* Guidance Notes:

BMI 36 - 40:

- BMI alone should not be a restricting fact for determining medical fitness, other comorbidities needs to be considered.
- The seafarer can adequately and safely perform his job functions.
- The seafarer has the appropriate level of fitness for general mobility (including climbing stairs repetitively).
- The seafarer has the appropriate level of fitness to respond to emergency situations and is able to successfully take part in evacuations without compromising their own safety and that of others.

As Per-ML 692006



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- · The seafarer is able to escape from a helicopter through a standard sized escape hatch
- Seafarer to undergo a Weight Management (WM) program for maximum 1 year on Company's account to bring down the BMI till ≤ 35.
- Eaglestar will support the seafarer by assigning the approved medical insurance provider (WM) program.
- After 1 year the WM program and the PEME will be to the seafarer account.
- Seafarer service status will remain "active" for a period of one year. Subsequent employment is subject to vacancy.
- · While onboard, Medical Officer will monitor the weight and update HR Sea and HSSE on a monthly basis.
- While ashore, seafarer will need to update HR Sea & Manning office on monthly basis the status of weight management program

#### Section P 1. - Body Mass Index (BMI)

BMI ≤ 35: Meet the standard

BMI 36 - 40\*: Do not meet the standard.

Inform Manning Office. To be put under Weight Management program for 1 yr.

BMI > 40: Not cleared to sail

#### Section P 2. - Lipid Profile (On treatment)

Total Cholesterol < 6.2 mmol/L

LDL < 4.1 mmol/L

HDL > 1.5 mmol/L

Cholesterol level alone should not deem a person unfit for work. The Health Physician will have to assess other comorbidities i.e. High Blood Pressure, Smoking history, Past history of Heart Attacks, etc

#### Section P 3. - Hypertension (With medication)

140/90 or below with medication

As a general rule, individuals with hypertension are acceptable, provided it is uncomplicated and well controlled by treatment.

#### Section P 4. - Diabetes Mellitus HbA1c (% of sugar for past 3 month)

< 8% & Non-Insulin dependent diabetes

- If HbA1C >8%, doctor to review medication and repeat HbA1C after 3 months.
- To look at other co-morbidities i.e. Heart disease, obesity, Hypertension when certifying Fitness to Work.
   Insulin-dependent diabetes Not fit for work seafarer's duty.

#### Section P 5. - Asthma

Not requiring the use of oral or inhaled steroids

- Doctor to assess the frequency of asthma attack and medications.
- If asthma is un-controlled Temporary Unfit. Doctor to re-assess fitness to work 3 to 6 monthly.

If asthma is controlled without steroid medication use - Fit for work.

#### \*Framingham Score Calculator

https://www.mdcalc.com/framingham-risk-score-hard-coronary-heart-disease

Seafarers with high risk scores(>10%) should be counselled aggressively about social factors contributing to their risk (smoking, exercise, weight, diet etc) and also managed with blood pressure and lipid evaluation.





#### MARITIME AND PORT AUTHORITY OF SINGAPORE

### SEAFARER'S MEDICAL CERTIFICATE

This certificate is issued by the undersigned recognized medical practitioner to the named seafarer on behalf of the Maritime and Port Authority of Singapore and meets both the requirements of the International Convention on Standards of Trainings, Certification and Watchkeeping for Seafarers, 1978, as amended (STCW Convention) and the Maritime Labour Convention, 2006.

Sea	afarer's Name :(Last, first, mid	dle) MUHAMMAD AL	-HIKMA "G	Sender: //ale/Fema	
	e of Birth: (Day/month/year) 28. 05.1989	Nationality: BANGIADESHT	Place of Birth:	NG	
Decla	aration of the recognized me	edical practitioner:		Yes	No
1	Identification documents wer	re checked at the point of examina	ition?	~	10
2	Hearing meets the standards	s in STCW Code Section A-I/9?		1	711
3	Unaided hearing satisfactory	?		1	
4	Visual acuity meets the stan	dards in STCW Code Section A-I/	9?	/	7
5	Colour vision meets the star	ndards in STCW Code Section A-I/	9?	1	fat
	Date of last colour	vision test:	0 6 JUN 2023		
6	Fit for look-out duty?			1	-
7		medical condition likely to be agg for such service or endanger the life		or _	113

0 6 JUN 2023

Date of examination: (day/month/year) Expiry of certificate: (day/month/year) 10

No limitations or restrictions on fitness?

If "no" specify limitations or restrictions

\*\* Maximum two years from date of examination unless the seafarer is under the age of 18

0 5 JUN 2025

n 6 JUN 2023

8

9

Date

Signature of Authorised Medical Practitioner

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 Practitioner's Official stamp (name, licence number, address etc)

I have been informed of the content of the certificate and of the right to a review.

Signature of Seafarer

delete as appropriate



SEAFARER MEDICAL CERTIFICATE - March 2020

04.2023.4148



# MARITIME AND PORT AUTHORITY OF SINGAPORE SHIPPING DIVISION

# MPA

# RECORD OF MEDICAL EXAMINATIONS OF SEAFARER

SINGAPORE

Part A – to be completed by the Seafarer who is responsible for answering each question accurately.

	L-HIKMA, MUH	AMMAD	Gender: Male/Female*
Date of Birth: day/month/year  28/05/1989  *Type of ID documents: NRIC No. for	Place of Birth:  CHITAGONG  Dept 200k / Engine / Code	Nationality:	ADECH1
Singaporeans and PRs (e.g. SXXXX567A) / Passport No. for Foreigners: EBO994697	Dept: Deck / Engine / Cate Rank: C/G	ering / others	Type of ship:
HOUSE: 13, ROAD: 3 BLOCK: W, HALISHAHAR H/E, CTG, *For identity verification purpose	Routine and emergency du	uties:	Trading area: e.g. coastal / worldwide

Seafarer's Declarations (please tick)

Have you ever had any of the following conditions?

	Yes	No		Yes	No
Eye/vision problem		/	18. Sleep problem	-	
<ol><li>High blood pressure</li></ol>		/	19. Do you smoke, use alcohol or drugs?		U
<ol><li>Heart/vascular disease</li></ol>		1	20. Operation/surgery		-
Heart Surgery			21. Epilesy/seizures	+	16
<ol><li>Varicose veins/piles</li></ol>			22. Dizziness/fainting	1	iy.
6. Asthma/bronchitis			23. Loss of consciousness	+	
7. Blood disorder		-	24. Psychiatric problems		1
8. Diabetes		-	25. Depression		-
Thyroid problem		_	, 26. Attempted suicide	-	-
10. Digestive disorder			27. Loss of memory	-	11/
11. Kidney problem			28. Balance problem	-	
12. Skin Problem			29. Severe headaches	-	-
13. Allergies		-	30. Ear(hearing, tinnitus/nose/throat problem	- 14	-
14. Infectious / contagious diseases		1	31. Restricted mobility		
15. Hernia			32. Back or joint problem		
16. Genital disorder			33. Amputation	1	
17. Pregnancy	2	A	34. Fracture/dislocations		

If you answer "yes" to any of the above questions, please provide details:



35. Have you ever been signed off as sick or repatriated from a ship?	Yes	No
7 od ever been nospiralized?	7	1
37. Have you ever been declared unfit for sea duty?		1
on has your medical certificate even been restricted		1
The you aware that you have any medical problem.		-
O. Do you feel healthy and fit to perform the duties of your designated position/occupation?  Output  Description:		-
	1	-
Are you using any non-prescription or prescription medication?		/

If you answer "yes", please list the medications taken, the purpose(s) and the dosage:

I hereby declare that the personal declaration above is a true statement to the best of my knowledge.

0 6 JUN 2023

Date

Signature of Seafarer

MR. MD. RAIHAN MBBS (DU). DFM. CCD (Birdem). PGT (Ophth) MBBS (DU). DFM. CCD (Birdem). PGT (Ophth) MDC A-55144, MMC-BGD-016

Name and Signature Physician

I hereby authorize the release of all my previous medical records (including my last Seafarer Medical Certificate) from any health professional, health institutions and public authorities to Dr. prepared.

0 6 JUN 2023

Date

Signature of Seafarer

MBRS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician

Name and Signature of Witness



yesight						
se of glasses	s or contact ler	nses				
No						
Yes 7	Гуре			Purpose	************	
isual Acuity						
	Unaided				Aided	
Right eye	Left eye	Binocula	ŗ R	ight eye	Left eye	Binocula
Distant	6/6	61-	PD	istant		
Near	NS	NS	_ N	ear		
isual fields						
	Norma	al I	Dot	ective	1	
Right eye	Norma	al .	Del	ective	7 11	
Left eye						
Not tes		Tormal		Doubtful		fective
Not tes	ted	udiometry		old values i	n dB)	fective
Not tes	re tone and a	2000	lz			fective
Not tes	ted	udiometry	Hz	old values in 2,000 Hz	n dB)	fective
earing Pur Right ear Left ear	re tone and are 500 Hz	udiometry 1,000 I 2 2 metres)	Hz	old values in 2,000 Hz	n dB) 3,000 Hz	fective
earing Pur Right ear Left ear	re tone and are 500 Hz	udiometry 1,000 H シー	Hz	old values in 2,000 Hz	n dB)	fective
Pure Right ear Left ear Peech and very Right ear	re tone and are 500 Hz	udiometry 1,000 I 2 2 metres)	Hz	old values in 2,000 Hz	n dB) 3,000 Hz	fective
Right ear Left ear Right ear Left ear Left ear Left ear	re tone and and 500 Hz  Whisper test (	udiometry 1,000 I 2 2 metres)	Hz	old values in 2,000 Hz	n dB) 3,000 Hz	fective
Right ear Left ear Left ear Left ear Left ear Left ear	re tone and and 500 Hz  Whisper test (	metres)	Hz	whi	n dB) 3,000 Hz	fective
Right ear Left ear Left ear Left ear Left ear Left ear Left ear	re tone and a 500 Hz  whisper test (No	metres)	Hz	Whi	n dB) 3,000 Hz	
Right ear Left ear	re tone and at 500 Hz  whisper test (I	metres)	Hz	Weight Rhythm	sper (kg)	fective
Right ear Left ear	re tone and at 500 Hz  whisper test (INO No No Ings  (per sure Systolic (	metres)  (cm) minute) mm, Hg)	Hz	Weight Rhythm	sper (kg)	
Right ear Left ear	re tone and at 500 Hz  whisper test (INO No No Ings  (per sure Systolic (	udiometry 1,000 H 27 metres) rmal (cm) minute) mm Hg)  \[ \rac{1}{1} \rac{1}{2} \rac{1}{	78 (2)	Weight Rhythm	sper (kg)	2 egwlu 80
Right ear Left ear	re tone and at 500 Hz  whisper test (INO No No Ings  (per sure Systolic (	udiometry 1,000 H 27 metres) rmal (cm) minute) mm Hg)  \[ \rac{1}{1} \rac{1}{2} \rac{1}{	7-8	Weight Rhythm	sper (kg)	2 egwlu 80
Right ear Left ear Peech and verifical Findi Height Pulse rate Blood Press Urinalysis:	re tone and at 500 Hz  whisper test (  No  ngs  (per sure Systolic ( Glucose :	udiometry 1,000 H 27 metres) rmal (cm) minute) mm Hg)  \[ \rac{1}{1} \rac{1}{2} \rac{1}{	Table 12 tein:	Weight Rhythm	sper (kg)	2 egwlur 80

Ears (gene	eral)								
	membrane		1						
Eyes									
Ophthalmo	oscopy								
Pupils	, ,								
Eye move	ment								
Lungs and									
Breast exa			NA	- 11					
Heart									
Skin			~						
Varicose \	/ein		-						
Vascular (	inc. pedal p	oulse)	1						
Abdomen	and viscera	a	1						
Hernia									
Anus (not	rectal exar	n)							
G-U syste	m	25-112-12-25							
Upper and	l lower extr	remities	_						
The state of the s	s, T/S, L/S)		_						
Neurologic	c (full/brief)		_						
Psychiatri									
General a	ppearance								
est . <i>B</i> /6	00/1	(s) and resul	3	Results:			or any lim	itations.	
1	y.	FIT FO	OR DUTY ON I	BOARD SHIP				=	
		s for service							
		afarer's perso e, I declare the			ical exam	ination a	nd diagn	ostic test	
Fit for	look out du	ity	Unfit for lo	okout duty					
Visual	aid require	ed	√isual aid	not require	d				
1	Deal	F	0-4	Oth					
	Deck Service	Engine Service	Catering Service	Other					
5it T	Service	Service		Service					
Unfit			/ijoal	Hospitals	-				
	AMINATIONS OF SEAF!	ARERS – September 2021	* Hard Mark	Sight G2006					

Without restrictions	With restrictions	
Description of restrictions	(e.g. specific position, type of ship, trading a	rea etc.)
ř.	<b>y</b> 12	*
	DR. MIR. MD. RAIHA	AN (http)

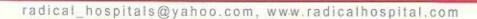
0 6 JUN 2023

Date

Signature of Medical Practitioner MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipp.ng Bangladesh Approved
General Physician
Radical Hospitals Limited.

Medical Practitioner's name, licence number, address







Id No : 0145 Date : 06-Jun-2023 D.Date : 06-Jun-2023

Patient's Name: MUHAMMAD AL HIKMA Age: 34Y 0M 9D Gender: Male

Specimen : Blood

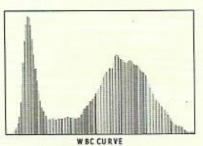
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:4582100409A

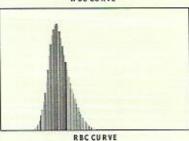
### **Haematology Report**

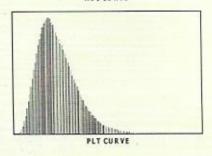
(Relevant estimations were carried out by Mythic-One Auto Haematology Analyzer & checked manually)

Parameter Name	Results	Reference Range
Hemoglobin (Hb)  ESR(Westergreen)	13.7 gm/dl 06 mm/1st hr	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl. Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	9,100 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	75 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	21 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	182 /cumm	50-450/cumm
Total RBC Count	4.90 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	36.3 %	M: 40-54%, F:37-47%
MCV	74.1 fL	76 - 94 fL
MCH	<b>28.0</b> pg	27 - 32 pg
MCHC	37.7 g/dL	29 - 34 g/dL
RDW	14.7 %	11 - 16 %
PDW	15.1 fL	35 - 56 fl
Total Platelete Count (PC)	2,46,000 /cumm	150,000-450,000/cumm
MPV	8.3 fL	7.0 - 11.0 fL
	127422222	

0.204 %







Checked By Medical Technologist

PCT

de

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

0.1 - 0.%



Bill No	DIA23060145	Received Date		06/06/2	2023
Patient's Name	MUHAMMAD AL HIKMA	Assemble section	Service Control		
Patient's Age	34Y 0M 9D		Patient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PO	GT(Eye),DFN	1 0	DC NO	4582100409A
Sample	BLOOD	Mark 1963			

### BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Fasting Blood Sugar (FBS)	4.9 mmol/l	4.2 – 6.4 mmol/l
HbA1C	5.3 %	4.0- 6.0 %
Serum (BUN)	27 mg/dl	7-23 mg/dl
Serum Creatinine	1.0 mg/dl	0.3 - 1.3 mg/dl
Liver Function Test		
Serum Bilirubin (Total)	0.91 mg/dl	0.2 - 1.1 mg/dl
Serum ALT (SGPT)	28 U/L	Up to 40 U/L
Serum AST (SGOT)	19 U/L	Up to 37 U/L
Serum Alkaline Phosphatase	151 U/L	98 - 279 U/L
Lipid profile		
Serum Cholesterol	132mg/dl	up to 200 mg/dl
Serum HDL- Cholesterol	45 mg/dl	>35 mg/dl
Serum Triglyceride	126 mg/dl	upto 220 mg/dl
Serum LDL- Cholesterol	90 mg/dl	<130 mg/dl



Medical Technologis Radical Hospitals Ltd.



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

radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA23060145	Received	Date	06/06/2	2023
Patient's Name	MUHAMMAD AL HIKMA	, tooched	Date	00/00/2	2023
Patient's Age	34Y 0M 9D	Р	atient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),		100000000000000000000000000000000000000	DC NO	4582100409A
Sample	BLOOD	, - (-)-),-,		DONO	4382100409A

# SEROLOGYCAL REPORT

Test Name	Result

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

Checked By

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



Bill No	DIA23060145	Receive	d Data	06/06/	2022
Patient's Name	MUHAMMAD AL HIKMA	Received Date		06/06/2023	
Patient's Age	34Y 0M 9D		Patient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),F		200	DC NO	The state of the s
Sample	URINE	- (=jo),b1 W	C	DC NO	4582100409A

### URINE ROUTINE EXAMINATION

# PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	1-3/HPF
Sediment	Nil	Epithelial	2-4/HPF

## CHEMICAL EXAMINATIONCASTS / LPF

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

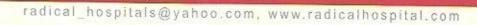
# ON REQUESTCRYSTALS & OTHERS

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** 



Bill No	DIA23060145	Received Date 06/06/2023			2023
Patient's Name	MUHAMMAD AL HIKMA			1 00.00	
Patient's Age	34Y 0M 9D		Patient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BII	RDEM),PGT(Eye),DFM	1 C	DC NO	4582100409A
Sample	URINE				

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

Obecked By

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

radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA23060145	Received	Date	06/06/2	2023	
Patient's Name	MUHAMMAD AL HIKMA	reserved bate of		00/00/2	3070072020	
Patient's Age	34Y 0M 9D	P	atient's	Sex	Male	
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM		No see a	DC NO	4582100409A	
Sample	URINE			20.10	+3021004097	

# URINE EXAMINATION

Test Name	Result
Xylene	Negative

Checked By

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



## **AUDIOLOGICAL REPORT**

Patient Name : MUHAMMAD AL HIKMA

06/06/2023

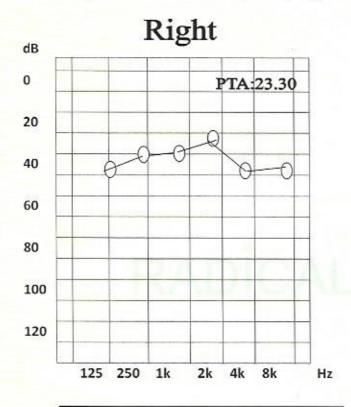
Age

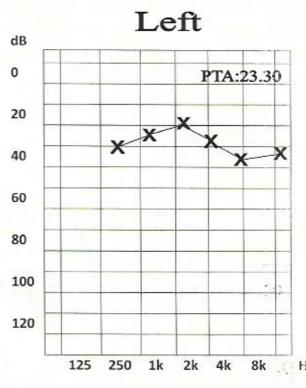
: 34 Yrs

Address

: RHL, UTTARA

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





0-25= Normal Hearing.

26-40= Mild Hearing Loss.

41-55= Moderate Hearing Loss.

56-70= Moderately Severe Hearing Loss.

71-90= Severe Hearing Loss.

91-120= Profound Hearing Loss.

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

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.

DR. MTR. 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.

Bone Masking  $\Delta\Delta$ 



Patient's Name	:	MUHAMMAD AL HIKMA	ID NO	:	23060145
Age	:	34 Yrs	Date	:	06/06/2023
Sex	:	Male		-	
Referred by	:	Dr. Mir Md. Raihan - MBBS (DU), DFM		37	
Nature of Specimen	:	The state of the s			EN

## **Dental Examination Reports**

### On Examination

1. Dental Caries : Absent

2. Calculus : Absent

3. Missing : Absent

4. Gum Condition : Normal

5. Filling : No

6. Root Canal Treatment : No

7. Any Bridge/Denture/Crown : No

8. Oral Hygine : Normal

Comments: Normal

Dr. Mir Md. Raihan

MBBS (DU,) CCD (Birdem), PGT (opth)

Reg- A55144 BGD-016(MMC)

DG Shipping Bangladesh Approved Malaysian Medical Council Approved

General Physician

Radical Hospitals Limited



### DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23060145 Receive:06/06/2023 Print: 06/06/2023

Patient's Name : MUHAMMAD AL HIKMA

Age : 34 Yrs Sex : M

Refd. by Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

### X-RAY OF CHEST (DIGITAL)

Diaphragm : Both hemidiaphragm are normal in position.

C-P angles are clear.

Heart : Normal in T.D.

Lung fields are clear.

Bony thorax : Reveals no abnormality.

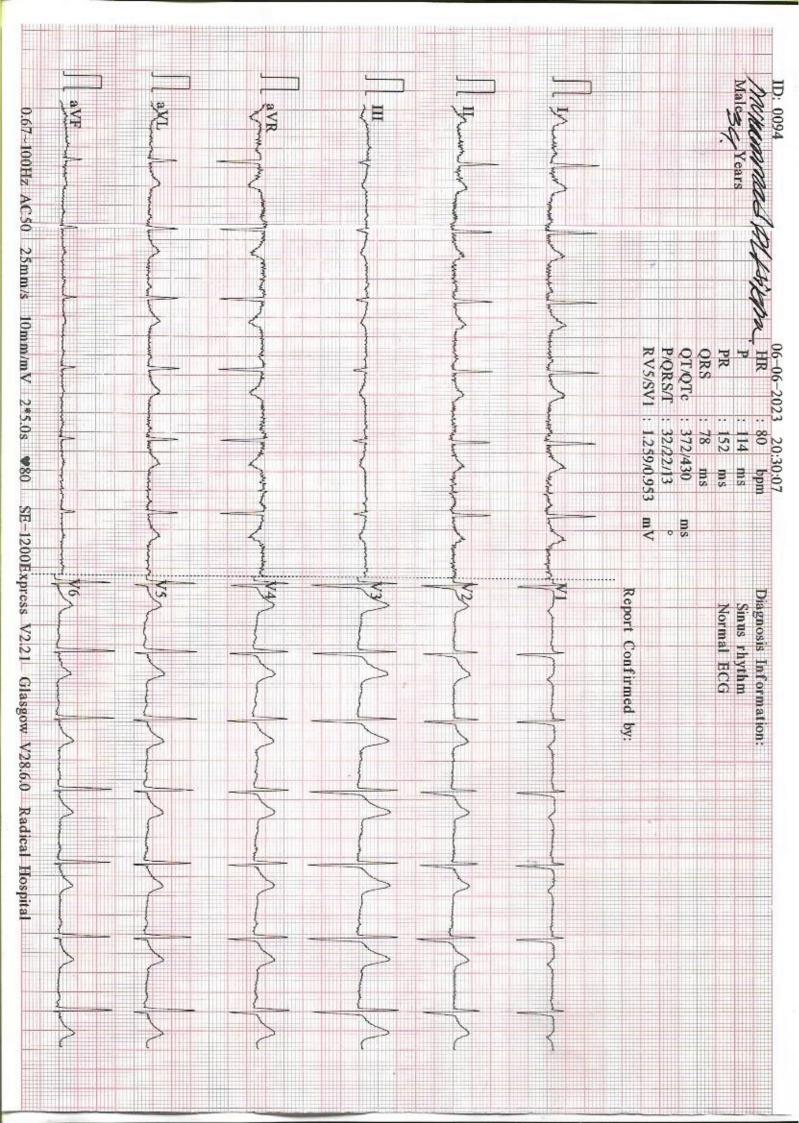
Comments : Normal chest skiagram.

Prof. Dr. Md. Mojibor Rahman

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

This report has been electronically signed.

Page of 1



radical\_hospitals@yahoo.com, www.radicalhospital.com

### DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.

23060145

Receive: Print: 06/06/2023

Patient's Name

MUHAMMAD AL HIKMA

Age

34 YRS

Sex

M

Refd. by

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

## **ELECTROCARDIOGRAM (E.C.G) REPORT**

Rate

: 80 b/min

Rhythm

Regular

P-Wave

Normal

P-R Interval

Normal

**QRS** Complex

Normal

ST. Segment

: Is electric

T. Wave

Normal

Impression

: Findings are within normal limit.

Dr. Debashish Paul

MBBS, MD (Cardiology)

Associate Professor

Department of Cardiology

Sylhet Women's Medical College Hospital

This report has been electronically signed

Page 1 of 1



Patient's Name	4	MUHAMMAD AL HIKMA	ID NO	:	23060145
Age	:	34 Yrs	Date	:	06/06/2023
Sex	:	Male		1,000	
Referred by	:	Dr. Mir Md. Raihan MBBS,(DU), DFM			. 7
Nature of Specimen	:				

### PULMONARY FUNCTION TEST (SPIROMETRY)

FVC = 6 FEV = 5 FEV/FVC = 80%

Comments: Normal Lung Function

Checked By

Dr. Mir Md. Raihan

MBBS (DU) CCD(Birdem),PGT (opth) Reg- A55144 BGD-016(MMC) DG Shipping Bangladesh Approved Malaysian Medical Council Approved General Physician Radical Hospitals Limited

radical\_hospitals@yahoo.com, www.radicalhospital.com

Patient's Name	1	MUHAMMAD AL HIKMA	ID NO	:	23060145
Age	:	34 Yrs	Date	:	06/06/2023
Sex	:	Male		-	
Referred by	:	Dr. Mir Md. Raihan MBBS,(DU), DFM			*
Nature of Specimen	1:				

### PULMONARY FUNCTION TEST (SPIROMETRY)

FVC = 6 FEV = 5 FEV/FVC = 80%

Comments: Normal Lung Function

Checked By

Dr. Mir Md. Raihan

MBBS (DU) CCD(Birdem),PGT (opth) Reg- A55144 BGD-016(MMC) DG Shipping Bangladesh Approved Malaysian Medical Council Approved General Physician Radical Hospitals Limited

radical\_hospitals@yahoo.com, www.radicalhospital.com

Patient's Name	1	MUHAMMAD AL HIKMA			
Age	:	34 Yrs	Date	Τ:	06/06/2023
Sex	:	Male	CDC NO:4582100409A		
Referred by		Dr. Mir Md. Raihan - MBBS, (DU), DFM			

# Psychometric Test

Test Name	Remarks		
1.APTITUDE TEST	-		
Numerical Reasoning test	Poor /Good /very good /excellent		
Verbal Reasoning test	Poor /Good /very good /excellent		
Inductive reasoning test	Poor /Good /very good /excellent		
Diagrammatic Reasoning test	Poor /Good /very good /excellent		
Logical Reasoning test.	Poor /Good /very good /excellent		
Error checking test	Poor /Good /very good /excellent		
2.Skill Test	Poor /Good /very good /excellent		
3.Personality Test	INFJ / ENFJ / ISFJ / ENTP/ ESFJ /ESFF		
4.Watson Glaser test(Critical Thinking Test)			
Arguments	Poor /Good /very good /excellent		
Assumptions	Poor /Good /very good /excellen		
Deductions	Poor /Good /very good /excellent		
Interpreting Information's	Poor /Good /very good /excellent		
Inferences	Poor /Good /very good /excellent		
	1		
5. Situational Judgment Test.	Poor /Good /very good /excellent		

COMMENTS: HE IS MENTALLY FIT FOR SHIP JOB

Dr. Mir Md. Raihan

MBBS (DU), DFM, CCD (Birdem), PGT (opth) Reg- A55144 BGD-016(MMC) DG Shipping Bangladesh Approved Malaysian Medical Council Approved General Physician

Radical Hospitals Limited



Patient ID	23060145	Test Date		06/06/2	023	
Patient Name	MUHAMMAD AL HIKMA		Age	34 YRS	Sex	Male
Ref. By	Dr. Mir Md. Raihan MBBS (D	U),DFM	1 0-	1	Ton	marc

### **BMI REPORT**

Body Mass Index	Rody Mass Inday	Weight in kg
	body Wass Midex -	(Height in Meter) <sup>2</sup>
		89 kg
	-	(1.78) <sup>2</sup>
		28.0

### **BMI Categories**

- ❖ Under Weight in = <18.5</p>
- \* Normal Weight= 18.5 24.9
- ❖ Over Weight=25 29.9
- Obeshyz = BMI of 30 or greater.

- Tel.

Dr. Mir Md. Raihan

MBBS (DU,) CCD (Birdem), PGT (opth) Reg- A55144 BGD-016(MMC) DG Shipping Bangladesh Approved Malaysian Medical Council Approved General Physician Radical Hospitals Limited

radical hospitals@yahoo.com, www.radicalhospital.com

Patient ID	23060145	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	06/06/2023
Patient Name	MUHAMMAD AL HIKMA		
Age	34 YRS	Sex	Male
Refd. By	DR. MIR MD. RAIHAN MBBS,(DU),DF	M	

### THANK YOU FOR THE COURTESY OF THIS REFERRAL

LIVER :- Is normal in size 13.1cm shape and position. The echogenicity of the parenchyma is normal. Intrahepatic biliary channel are not dilated. No focal lesion is seen.

GALL BLADDER: Normal size regular in shape. Lumen is normal.

Wall thickens is normal.

CBD & Intrahepatic biliary trees are not dilated. Diameter of CBD is normal.

PANCREASE: Is normal in size margin are regular parenchyma show normal echo-texture pancreatic duct is not dilated. No focal area of altered echogenicity or calcification is seen.

SPLEEN: Is normal in size and shape uniform in echo-texture.

**BOTH KIDNEYS**:- Are normal in size. RK-8.9cm, LK-9.2cm 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 within normal limit. No intravesicle lesion is seen Prostate: Normal size regular in shape. Echogenicity is homogenous.

COMMENT: Normal Study.

Sonologist

Dr. Asma Ahmed MBBS,CMU,DMU PGT(Gynae & obs) Advanced Training in TVS

# INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINEST CHOLERA CERTIFICAT INTERNATIONUAX DE VACCINATION OU DE REVACCINATION CON IRE LE CHOLERA

This is to certify that

JE Soussigne' (e) certifie que

Whose signature follows
dont la signature suit

has on the Date indicated been vaccinated or revaccinated against cholera
a e'te' vaccine (e) ar revaccine' (e) contre le fievre jaune a la datc indiquee.

Date

Signature and professional
Signature et qualitie profess
O'Cechet
Signature et qualitie profess-

Signature and professional Status of Vaccinator Signature et qualité profess-sionelle vaccinateur

DR. MBR AH RAIHAN

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

BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved General Physician
Radical Hospitals Limited.

Approved Stamp
Cechet
d'authentification

CRAL CHOLERA
DUKORAL\*

Valid Upto 2 yrs

DR. MIR HD. RAIHAN (1) (35, Sheh Mohdum ) Valid Up to 2 yrs

BMDC A-55144, MMC-BGD-016 (1) (Ware, Bhekin) Walled Up to 2 yrs

BMDC A-55144, MMC-BGD-016 (1) (Ware, Bhekin) Walled Up to 2 yrs

The validity of the Golden Balt close of the form process of the proce

The validity of this continues standard of the presented of two years, beginning six days after the first injection of vaccine or in the confidence of that revaccination.

Notwithstanding the above provision in the case of a pilgrim, tins certificate shall indicate that two injections have been given at an interval of seven days and its validity shall commence from the date of the second injection.

The approved stamp mentioned above must be in a form prescribed by the health administration of the territory in which the vaccination is performed.

Any amendment of this certificate or erasure or failure to complete any pan of it. May render in invalid.

La validity dece certificate couvre une period de six mois commencent six Jours a prea is premiere injection du vaccin ou, dans le cai a" une revaccination a, cour. d;;gtte period do six mois jour de cette revaccination.

Nonobstant les, despositions ci-dessue dans le cas d'un pelerin le present certificate dottlaire mention de deux injections partiquees a sept jours d', intervaile et sa validite cofilmence lejour de la seconde, injection:

De cachet d' authentification doit etre c\_anforme au modele present per I, administration sanitaite du territoire ou la vaccination est effectuee. j

Toute correction ou rahfe sur le certificate ou 1 o. mission d' une quelconque des mantions qu il comporte pe ut effectersa validite.

# INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINEST YELLOW FEVER CERTIFICAT INTERNATIONUAX DE VACCINATION OU DE REVACCINATION CONTRE LA FIEVRE JAUNE

MUHAMMAD DI	Huma	
This is to certify that JE Soussigne' (e) certifie gue	HIKM date of birth 29/05/80 s	Sex MALE
Whose signature follows don't la signature suit	UA ffilm.	exe

has on the Date indicated been vaccinated or revaccinated against cholera a e'te' vaccine (e) ar revaccine' (e) contre le fievre jaune a la datc indiquee.

411	CONTRACT	Signature and professional Stahtus of Vaccinator Signature et tiple du vaccinateur  MIR. MD. RAIHA  (DU), DFM, CCD (Birdem), PGT (Oph DC A-55144, MMC-BGD-0) Shipping Bangladesh Approv General Physician Radical Hospitals Limited.	th) L NO	Official sump of vaccinating centre Cachet official du centre de vaccination
	3			
	4			

This certificate is valid only if the vaccine used has been approved by the world I Icalih organization and vaccinating centre has been designated by health administration for the territory in which that centre is situated.

The validity of his certificate shall extend for a period of ten years, beginning in days after the date of vaccination or in the event of a revaccination within sch period often years, from the date of the revaccination.

This certificate must be signed by a medical practitioner in his own hand; his official stamp is not an accepted substitute for die signature.

Any amendment of this certificate, or erasure, of failure to complete any part of it, may render it invalid.

Ce certificate n' est avalable que si lc vaccina employe" a c-' tc,' a approve" par l' organisa\_tion Mondiale de la santc" et sile centre a" uaiiif,aiion ae" tc'tra6fiiie pali-aminsIralion sanitaire du (erriloire dans Icqucl'ce centre est siture;

La validite' de ce certilicat couvrc une pe'riodo de dix ans comencant dix joursapros la date de la vaccination ou, dans le cas dune relaccination.u.ou., a.-citto lie,iio,i. a" dix ans. lejour de cetto revaccination.

Ca certificate do it ctrc signc'uq1 un me'decin de sa propre main, son cachet offiiciar no pouvant cue conside' commo Icnant lieu de signature.

Toute eoreciion ou rahire sur le certificate ou l'omission d' une quelconque des mentions qu'il comporte pent allecter sa validite.