

HAQUE & SONS LTD.



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

Accredited By : BMDC Accreditation No. A55144

PATIENT CONTROL NUMBER: H650

MEDICAL EXAMINATION CERTIFICATE

Acce AND DATE OF BIRTH RAJSHAHI 25-Oct-1992 B00763242 SEAMAN'S BOOK NUMBER CO7735 CONALITY: BANGLADESHI SEX: Male Female VESSEL TYPE: BULK CARRIER] TRADING AREA: WORL CONTACT NUMBER: 0088 01842-331 RANK: 2ND ASST ENGINEER CONTACT NUMBER: 0088 01842-331 RANK: 2ND ASST EN	URNAME NO.		FIRST NAME AND			MIDDLE NAME			
RAJSHAHI 25-Oct-1992 B00763242 CO7735 IONALITY: BANGLADESHI SEX: Male Female VESSELTYPE: BULK CARRIER TRADING AREA: WORL MANEENT HOME ADDRESS: ARA, BAGMARA, BHATKHALI-6596, RAJSHAHI, BANGLADESH ave you ever had any of the following conditions? Condition YES NO Condition YES NO Beep problems Is Sleep problems Is Sleep problems Is Sleep problems Is Sleep problems Is Bleep problems Is Bl	HASAN ACE AND DATE OF BIRTH RAJSHAHI 25-Oct-1992		MD						
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ARA, BAGMARA, BHATKHALI-6596, RAJSHAHI, BANGLADESH Intercept	MAN	NENT HOME ADDRESS :	-	- Tomas	- 11-	CONT	ACT NUMBER		
Condition YES NO Condition YES NO Eye/vision problem 1 Eye/vision problem 2 High blood pressure 3 Heart/vascular disease 3 Heart/vascular disease 4 Heart surgery 4 Heart surgery 5 Varicose veins 6 Asthma/bronchitis 7 Blood disorder 8 Diabetes 9 Thyroid problem 9 Digestive disorder 9 Thyroid problem 9 Digestive disorder 10 Digestive disorder 11 Kidney problem 12 Skin problem 13 Allergies 14 Infectious/contagious diseases 15 Hemia 16 Genital disorders 17 Pregnancy 18 Have you ever been signed off as sick or repatriated from a ship? 18 Have you ever been declared unfit for sea duty? 38 Have you ever been declared unfit for sea duty? 39 Are you aware that you have any medical problems, diseases or illnesses? 40 Doy ufeel healthy and fit to perform the duties of your designated position/occupation? 19 Doy ou feel healthy and fit to perform the duties of your designated position/occupation? 10 Doy u feel healthy and fit to perform the duties of your designated position/occupation? 10 Doy u feel healthy and fit to perform the duties of your designated position/occupation?	ARA	, BAGMARA, BHATKHALI-6596, R.	AJSHAHI, E	ANGLADE	SH	1000000			
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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 practioner) I also certify that my history contained above is true and any false statement will	36 37 38 39 40 41 omm	Have you ever been hospitalised? Have you ever been declared unfi Has your medical certificate ever I Are you aware that you have any I Do you feel healthy and fit to p Are you allergic to any medication tents: FIT Are you taking any non-prescription	t for sea dut been restrict medical prot erform the s? FOR DUT	y? ed or revoke plems, disea duties of yo Y ON BO ption medica	ed? ses or ill ur design ARD & ations?	nated position/oc	cupation?	000000	404909
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Date of last co	olour vision t	est: Date (day/	month/yea0 3	MAR	2023						
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Head			RO			cose veins				8	
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Mouth/teeth			G		Abd	omen and visce	ra				
Ears (general)			9		Hen					6696969	
Tympanic mer	mbrane				Anu	(not rectal exa	m)				
Eyes			0			system				13	. 🗆
Opthalmoscop	ру		0/		Upp	er and lower ext	tremities			0,	
Pupils			ŭ		100000000000000000000000000000000000000	e (C/S, T/S and					
Eye movemen	nt		6000			rologic (full brief				8	
Lungs and che	est					hiatric				G	
Breast examin			NTA			eral appearance	9				
Heart					Skin		200				
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HAEMOGLO		14.0			D ALCOHO		HBsAg	5.05			Nonreacti
ESR (WESTE	ERGREN)	0.6	Morphine			Negative	HIV / AIDS Te	st	□ R	eactiv	Nomeacti
WBC		9.600	Amphetamine		☐ Positive	Negative	VDRL		□ R	eactiv 🗹	Nonreacti
BLOOD	GLUCOSE		Phencyclidine			Negative	Blood Type			O+(V	
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PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

3 Department

THE R	EPUBLIC OF LIBER	RIA	ANNEX 2
LAST NAME OF APPLICANT HASAN	FIRST NAME MD	1.	MIDDLE MAHMUDUL
DATE OF BIRTH	PLACE OF BIRTH		SEX
MONTH 10 DAY 25 YEAR 1992	CITY: RAJSHAHI COUNTRY: BANGLADES	eu.	MALE FEMALE
EXAMINATION FOR DUTY AS:	MAILING ADDRESS		MALL F TEMALE
MASTER RATING		RA, BHATKHALI-6596, RA	ISHAHI BANCI ADESH
MATE MOU DECK		VI, DI IN I KI INCI-0080, KA	JOHANI, BANGLADESH
ENGINEER MOU ENGINE			
* RADIO OFF SUPERNUMERARY			
MEDICAL EXAMINATION (SEE REVERSE SIDE	FOR MEDICAL REQUIR	EMENTS) STATE DE	TAILS ON REVERSE SIDE
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SIGNATURE OF APPLICANT	DATE OF EXAM	1 1	EXPIRY DATE
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THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WA	The Party of the P	NAME OF APPLICANT)	
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NAME AND DEGREE OF PHYSICIAN DR. MI.	R MD , RAIHAN ; M.B.B.S (D	.U), REG.NO.A-55144	
ADDRESS REDICAL HOSPITALS LIMITED. 35, SHA	H MAKHDUM AVENUE, SE	CTOR-12, UTTARA, DH	AKA-1230, BANGLADESH
NAME OF PHYSICIAN'S CERTIFICATING AUTHO	_	NGLADESH	
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE	06-05-2014		
SIGNATURE OF PHYSICIAN		DATE OF EXAM	INATION: 0 3 MAR 2023
This certificate is issued by authority of the Deputy requirements of the Maritime Labour Cor	Commissioner of Maritim	e Affairs, R.L. and in	compliance with the
The Medical Certificate shall be valid for no more years of age and for no more than one (1)	than two (2) years from th	e date of the Examinat	
	year for those under 18 year	irs of age.	Dita
RLM-105M (REV. 06/16) DR. MIR. MD. R MBBS (DU), DFM. CCD (Birdem)	AIHAN PGT (Ophth)	is all Hos	JoE
BMDC A-55144, MMC-	800-016	As Per-ML	G-2006 *
DG Shipping Bangladesh General Physick	n Approven	3	and the second

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.
- Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and (c) 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.
- (d) An applicant's blood pressure must fall within an average range, taking age into consideration.
- (e) 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.
- (f) Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (g) 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.
- (h) 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.

DETAILS OF MEDICAL EXAMINATION

(To be completed by examining physician)

- 1. COMPLETE PHYSICAL EXAMINATION INCLUDING HEARING TEST.
- PATHOLOGICAL EXAMINATION: A) Complete Blood Count., B) Blood Sugar Estimation.

C) Serological Test(VDR) D) Hepatitis B Sarface Antegen 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

RLM-I05M (REV. 06/16)



DR. MIR. MD. RAIHAN
MBSS (DU), DFM. CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Fadical Hospitals Limited





Id No : 0062 Date: 03-Mar-2023 D.Date: 03-Mar-2023

Patient's Name: MD MAHMUDUL HASAN Age: 29Y 6M 4D Gender: Male

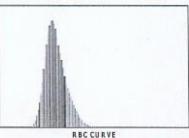
Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/7735

Haematology Report

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

Parameter Name	Results	Reference Range	
Hemoglobin (Hb) ESR(Westergreen)	14.9 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)	9,600 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm	
Differential WBC Count (DC)			all
Neutrophils	61 %	Child: 25-66 %, Adult: 40-75 %	ndilli
Lymphocytes	35 %	Child: 52-62 %, Adult: 20-50 %	
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %	BC CURVI
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %	
Basophils	00 %	Adult: 00-01 %	
Total Cir. Eosinophils	192 /cumm	50-450/cumm	
Total RBC Count	5.76 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul	
HCT/PCV	40.3 %	M: 40-54%, F:37-47%	
MCV	70.0 fL	76 - 94 fL	
MCH	25.9 pg	27 - 32 pg	la.
MCHC	37.0 g/dL	29 - 34 g/dL R	BCCURV
RDW	15.2 %	11 - 16 %	
PDW	17.4 fL	35 - 56 fl	
Total Platelete Count (PC)	2,84,000 /cumm	150,000-450,000/cumm	
MPV	8.0 fL	7.0 - 11.0 fL	
PCT	0.227 %	0.1 - 0.%	
Bledding Time(BT)	%	10 - 18 %	
Cloting Time(CT)	%	0.1- 0.2 %	Direction
		7	LT CURV



Checked By Medical Technologist

Dr. Sumaiya Khatun

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



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DIAGGOGGG	Descioud Data	00/00/0000	
DIA23030062	Received Date	03/03/2023	
MD MAHMUDUL HASAN			
29Y 6M 4D	Patient's Sex	Male	
Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO			
BLOOD			
	29Y 6M 4D Dr. Mir Md. Raihan MBBS,(DU),C	MD MAHMUDUL HASAN 29Y 6M 4D Patient's Sex Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.1 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.7 mg/dl	0.2 - 1.1 mg/dl

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