



HAQUE & SONS LTD.

Accredited By BMDC Accreditation No. A 55144 Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh.

ME

161 +600 31 / 102 14-0, FCX . +600 31 / 10330	PAHENI CONTROL NUMBER:
	H671
DICAL EXAMINATION CERTIFICATE	

7225	IMTIAT	FIRST NA		wn.		MIDDLE NAME	MEUDIAL	
ACE AN	IMTIAZ ID DATE OF BIRTH	DASSDOL		MD		SEAMAN'S BOO	MEHDI-AL	-
	GAON 10-Oct-1993	FASSPU	PASSPORT NUMBER B00476462			SEMMAN S BOO	CO7791	
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	ENT HOME ADDRESS :	111616		1		ACT NUMBER :	01735374350 (
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IGLADE			CONTROL BY A 1514 SAVE		RANK	i	2ND ASST EN	NGINEE
Have yo	ou ever had any of the following con	iditions?		-				
(a) 0.5%	Condition	YES	NO		Condition		YES	NO
1	Eye/vision problem		9	18	Sleep problems			19
2	High blood pressure	. 0		19	Do you smoke?			0
3	Heart/vascular disease			20	Operation/surge	DV.		9
4	Heart surgery		3	21	Epilepsy/seizure			D.
5	Varicose veins			22	Dizziness/faintin			
6	Asthma/bronchitis			23	Loss of consciou			1
7	Blood disorder	D	0	24	Psychiatric prob			3
8	Diabetes		G	25	Depression			0
9	Thyroid problem		2	26	Attempted suicid	le	0	9
10	Digestive disorder	0	8	27	Loss of memory		Ö	8
11	Kidney problem	0	G	28	Balance problem		0	8
12	Skin problem	0	سو	29	Severe headach			8
13	Allergies		B	30	Ear/nose/throat	A A COLOR OF THE C		
14	Infectious/contagious diseases		0	31	Restricted mobil			9
15	Hemia		<u> </u>	32	Back problems	.,		140
16	Genital disorders		3	33	Amputation			
17	Pregnancy		MA	34	Fractures/disloc	ations		
If any of	the above questions were answere	ed "ves" plea		ails.				
35 36	Have you ever been boenitalised?)		a ship?				
36 37 38 39	Have you ever been hospitalised? Have you ever been declared unfi Has your medical certificate ever Are you aware that you have any	t for sea duty been restrict medical prob	ed or revoke olems, disea	ed?,	illnesses?		0000	9999
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	Visual acuity					Visual 1	fields	
	Unaided		Aide			Norr	nal	Defective
Distant (a)			eye	Left eye	[B: 1]			
Near (e	6 6	0	-		Right e			
Visual acuity meets th	o standard laid d	oue in STCIAL	Codo Si	action A 1/0	Left ey			
Colour vision as per S				Normal	□ Doubtf	3374	efective	
oolodi vision as per e	TOW CODE SEC	aon A-na.		voimai	CJ DOUBL	ui 🗆 Di	elective	
Date of last colour vis	ion test: Date (da	y/month/year)	12 M/	AR 2023				
		Normal A	Abnorm	al			No	ormal Abnorma
Head		Ħ		Varicos	e veins		-	
Sinuses, nose, throat		B			r (inc. pedal	nulses)		
Mouth/teeth		13			n and viscer			
Ears (general)		0		Hernia				P 0
Tympanic membrane		13		Anus (n	ot rectal exa	m)		
Eyes		0		G-U sys		,		P n
Opthalmoscopy		G-			nd lower ext	remities		
Pupils		9		5065000000000000	C/S, T/S and			
Eye movement		0			gic (full brief			
Lungs and chest				Psychia				
Breast examination		VIEW			appearance			
Heart		1		Skin	appearance			G
ricart	-200		-	SKIII				0
ESULTS OF ANCILLA	RY EXAMINATIO	NS						
Chest X-Ray	MAN		AICAL (I	IVER FUNCT	ON TEST)	Marijuana	T Posi	tive Negative
ECG	MA	BILIRUBIN	107 12 (6	10 =	2	Alcohol Test		tive Negative
BLOOD	R/F	SGPT	-	- C - Z		URINE R/E	LI POSI	live
DC(differential count)	1000	SGOT		35	-	A COURT OF THE PARTY OF THE PAR	OTHERS'	11010
HAEMOGLOBIN (HGI	011/0/		LIC AND	ALCOHOL TI	CTA	The state of the s		: 1 m 2
ESR (WESTERGREN						HBsAg		ctiv Nonreacti
WBC		Morphine		Positive		HIV / AIDS Test		ctiv I Nonreacti
	6.400	Amphetamin		☐ Positive ☑		VDRL	□ Read	ctiv 🗆 Nonreacti
BLOOD GLUCG		Phencyclidin		☐ Positive		Blood Type	-	STILL
RANDOM	5.6	Barbiturates	- [Psychological Exan		11100
HBA1C	15.47.	Cocaine	1	Positive 🗸	Negative	Others(KUB Ultraso	9 /	me
reby I declare that I am	in knowledge of t	he contents of	f the Phy	ysical examina	ions:		1	2 MAD 0000
Taker.			-	MD MEHDI-AL	IMTIAT	2	1	2 MAR 2023
nature of Seafarer	-	-	_	Name of Sea			- 1	Dete
mature or Sealarer				Name or Sea	itarer		_	Date
sessment of fitness fo								
the basis of the examin	nee's personal de	claration, my o	clinical e	xamination and	d the diagnos	stic test results recor	ded above	, I declare the
aminee medically:	Fit	for lookout du	ties		-	Not fit for looks	out duties	
	Der	k service	T	Engine servi	-	Catering service		Other consisce
Y The state of the	Dec	⊼ Service	1	▶ D	~ /	Catering service	-	Other services
fit		0	1					
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✓□ Witho	out restrictions		П	With res	trictions		H-V-	
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danger the health of oth			c aggra	valed by service	ze at sea or t	o render the scalare	i uliili loi s	such service of to
		Yes	77 1	No				
		103	-	0				
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scribe restrictions (e.g.,	, specific position,	type of ship, ti	aue are	a).				
tion taken by medical ex	xaminer (e.g., refe	erral):						
Fitness Date:	12 MAR	7073		Valid Ur	fil -	119	AD anne	
i iuicoo Date.	1 L TIME	2020	ct	A LA	ur s		AK ZUZS	104
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		DR(e)	VI4 Righ	MD.ORAH	Physici	an		

In Accordance with Medical Examination (SAID) Bargladesh Approved

OG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited. Revision Date: 24th July 2022





D.Date: 12-Mar-2023

Gender: Male

Id No : 0318

Patient's Name: MD MEHDI AL IMTIAZ

Specimen

: Blood

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

CDC NO:C/O/7791

Date: 12-Mar-2023

Age: 29Y 2M 17D

Haematology Report

Parameter Name	Results	thic-One Auto Haematology Analyzer & Reference Range	
Hemoglobin (Hb)	14.1 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)	07 mm/1st hr	Male:0-10, F:0-20 mm/1st hr.	1
Total WBC Count(TC)	6,400 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm	
Differential WBC Count (DC) Neutrophils	61 %		III.
Lymphocytes	- 77/8	Child: 25-66 %, Adult: 40-75 %	
Monocytes	33 %	Child: 52-62 %, Adult: 20-50 %	i bratifi bra
Eosinophils	04 %	Child: 03-07 %, Adult: 02-10 %	WBCCURVE
Basophils	02 %	Child: 01-03 %, Adult: 01-06 %	il.
Total Cir. Eosinophils	00 %	Adult: 00-01 %	A
Total RBC Count	128 /cumm	50-450/cumm	
HCT/PCV	6.06 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul	All.
MCV	39.6 %	M: 40-54%, F:37-47%	
MCH	65.3 fL	76 - 94 fL	.// // /
MCHC	23.3 pg	27 - 32 pg	
RDW	35.6 g/dL	29 - 34 g/dL	R B C CURVE
	13.7 %	11 - 16 %	alli.
PDW	13.6 fL	35 - 56 fl	All line.
Total Platelete Count (PC)	1,28,000 /cumm	150,000-450,000/cumm	Allik
MPV	10.9 fL	7.0 - 11.0 fL	
PCT	0.140 %	0.1 - 0.%	
Bledding Time(BT)	%	10 - 18 %	
Cloting Time(CT)	%	0.1- 0.2 %	

Checked By Medical Technologist

Dr. Sumaiya Khatun

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



Bill No	DIA23030318	Received Date	12/03/2023
Patient's Name	MD MEHDI AL IMTIAZ		
Patient's Age	29Y 2M 17D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEI	M),PGT(Eye),DFM	CDC NO:C/O/7791
Sample	BLOOD	-	56

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.6 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.7 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	27 U/L	Up to 37 U/L
Serum ALT (SGPT)	32 U/L	Up to 40 U/L
HbA1C	5.4 %	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	DIA23030318	Received Date	12/03/2023
Patient's Name	MD MEHDI AL IMTIAZ		1
Patient's Age	29Y 2M 17D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CC	D(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/7791
Sample	BLOOD		

SEROLOGYCAL REPORT

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

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

Checked By

Medical Technologis Radical Hospitals Ltd. Dr. Sumaiya

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



Bill No	DIA23030318	Received Date	12/03/2023
Patient's Name	MD MEHDI AL IMTIAZ		
Patient's Age	29Y 2M 17D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),C	CD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/7791
Sample	URINE		

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

Ghycked 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	DIA23030318	Received Date	12/03/2023
Patient's Name	MD MEHDI AL IMTIAZ		
Patient's Age	29Y 2M 17D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU)	,CCD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/7791
Sample	URINE		

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. 00

Result

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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23030318 Receive:12/03/2023 Print 12/03/2023

Patient's Name : MD MEHDI AL IMTIAZ

Age : 29 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.

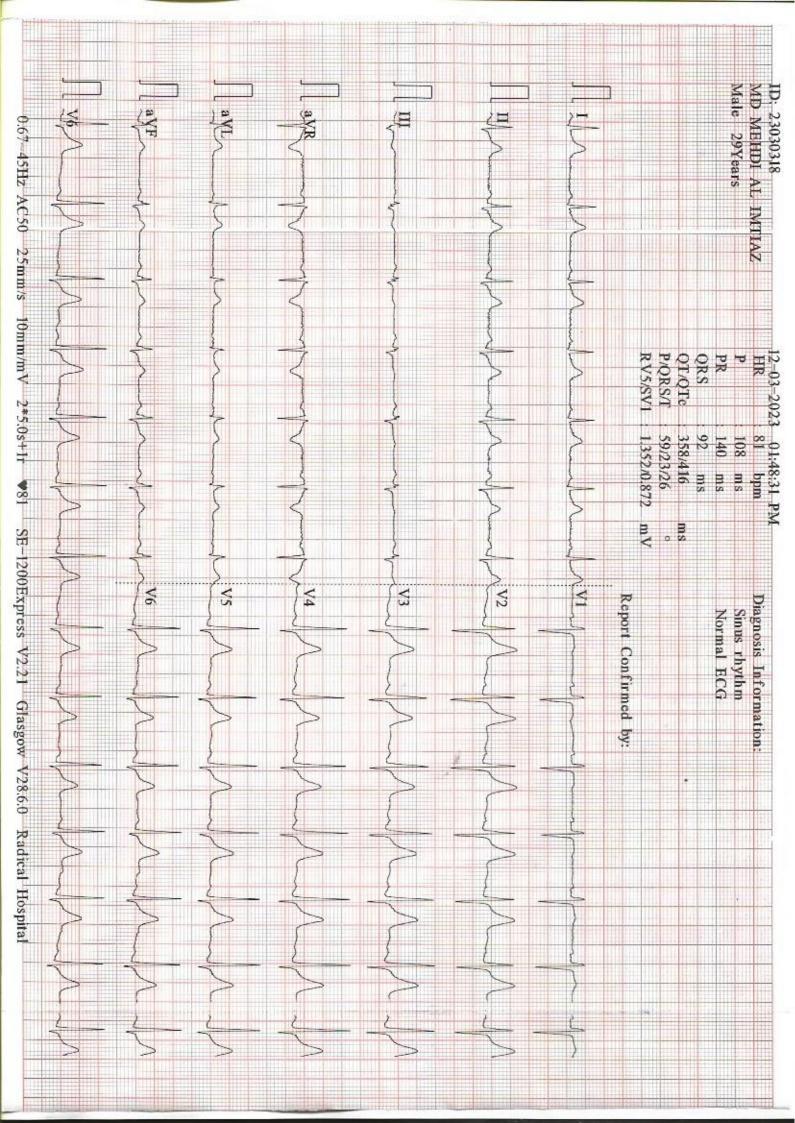
Lung fields are clear.

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





REF: MT. MENUETT

DATE: 12/03/2023

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

EYE EXAMINATION REPORT

NAME: MD MEHDI AL IMTIAZ

RANK: 2A/ENG

CDC NO: C/O/7791

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

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





Patient ID	23030318	Voucher No	
Test Name	USG OF KUB	Delivery Date	12/03/2023
Patient Name	MD MEHDI AL IMTIAZ	300	
Age	29 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 -9.8 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 – 10.5 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.

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 7.5 cc, regular in shape. Echogenicity is homogenous. No area of calcification is seen.

COMMENT: Suggestive of normal study.

Sonologist Dr. Asma Ahmed

MBBS,CMU,DMU PGT(Gynae & obs)

Advanced Training on TVS

Consultant Sonologist

WAR JOL	Jan	9 GEOR VACCING 10
15,	DR. MIR. MD. RAIHAN	35, Shah Mathdum
100	MBBS (DU) DFM. CCD (Birdem), RGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bengladesh Approved General Physician Radical Hospitals Limited.	BANGLADESS A
10	ALELLS P.G.T (Application)	Garage Control

The Validity of this certificate shall extend for a period of two years beginning six days after the first injection or the vaccine or in event of a revaccination within such period of two years on the date of that revaccination.

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 part of it, may render it invalid.

OTHER VACCINATIONS AUTERS VACCINATION

Date	Nature of vaccine	Physician's Signature
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