



COOK ISLANDS PHYSICAL EXAMINATION REPORT / CERTIFICATE

Ship
Registration
FORM. 31
v.3

Surname	HASAN		Given Name(s)	MOHAMMED FERDOUS
Date of Birth	Day 19	Month 03	Year 1969	
Place of birth	City CHATTOGRAM		County BANGLADESH	
Examination for Duty As		Mailing Address of Applicant		
Master	☐	ELEGY ORCHARD (A-8)		
Deck Officer	☐	HOUSE NO. 27, ROAD NO. 2		
Engineering Officer	☒	NASIRABAD HOUSING SOCIETY. PANCH LIASH		
Radio Officer	☐	CHATTOGRAM - 4203		
Rating	☐			

(affix)



Medical Examination
See reverse side of medical requirements

Height	Weight	Blood pressure	Pulse	Respiration	General appearance
169cm	72kg	120/80mm	78/min	16/min	Good
Vision	Right Eye	Left Eye	Hearing	Right Ear	Left Ear
With Glasses	6/6	6/6		RAD	RAD
Without Glasses					
Dental					
The applicant is free from visual infections of the mouth cavity or gums				Yes ☒	No ☐
Colour Test					
Red ☒	Book ☒	Yellow ☒	Blue ☒	Lantern ☒	Green ☒
Are glasses or contact lenses required to meet the required vision standard				Yes ☒	No ☐
Head and Neck			Heart (Cardiovascular)		
Normal			Normal		
Lungs			Speech		
Normal			Deck/Navigation - Officer/Radio Officer Speech must be unimpaired for normal voice communication		
Upper extremities			Normal		
Normal			Lower extremities		
Normal			Normal.		



04.2023, 3583

Is applicant vaccinated in accordance with WHO requirements ** Yes ☒ No ☐

Is the applicant suffering from any disease likely to be aggravated by working aboard a vessel, or to render him/ her unfit for service at sea or likely to endanger the health of other persons on board?

No

Is the applicant taking any non-prescription or prescription medications Yes ☐ No ☒
If yes please describe below

M. Rashed 16 MAR 2023
Signature of Applicant Date

To be affixed in the presence of the examining physician

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO:

MOHAMMED FERDOUS HASAN who is / not* certified to be free of communicable disease
Name of applicant

She / he* is found to be fit / not fit* for duty as a Master / Deck Officer / Engineering Officer / Radio Officer / Rating * without / with the following restrictions:*

FIT FOR DUTY ON BOARD SHIP

*delete as appropriate

PHYSICIAN NAME : DR. MIR MD RAIHAN MBBS,(DU), DFM

ADDRESS: RADICAL HOSPITALS LIMITED UTTARA, DHAKA-1230, BANGLADESH

PHYSICIANS CERTIFICATING AUTHORITY: DG SHIPPING BANGLADESH

LICENCE NUMBER: A-55144

DATE OF ISSUE*: 16 MAR 2023

DATE OF EXPIRY*: 15 MAR 2025

*of this certificate

[Signature] 16 MAR 2023
Signature of Physician Date

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



INSTRUCTIONS

All applicants for an officer certificate, endorsement, seaman's book or certification of special qualifications shall be required to have a physical examination, by a certified physician.

The completed medical certificate must accompany the application for officer certificate, endorsement, seaman's book or certification of special qualifications.

The physical examination must be carried out not more than 12 months prior to the date of making an application for officer certificate, endorsement, and certification of special qualifications or seaman's book.

The examination shall be conducted in accordance with the International Labour Organization, World Health Organization *Guidelines for Conducting Pre-Sea and Periodic Medical Fitness Examinations for Seafarers (ILO/WHO/D.2/1997)*. Such proof of examination must establish that the applicant is in satisfactory physical and mental condition for the specific duty assignment undertaken by the applicant, and that he/ she is generally in possession of all body faculties necessary in fulfilling the requirements of the seafaring profession.

In conducting the examinations, the certified physician should, where appropriated, 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:

- 1) Hearing
 - a) All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in better ear at 15 feet (4.57m) and in poor ear at 5 feet (1.52m)
- 2) Eyesight
 - a) 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 eye. If the applicant wears glasses, he must have vision without glasses of at least 20/160 (0.13) in both eyes.
 - b) Deck officer applicants must also have normal colour perception and be capable of distinguishing the colours red, green, blue and yellow
 - c) 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. If the applicant wears glasses, he must have vision without glasses of at least 20/200 (0.10) in both eyes. Engineer and radio officer applicants must also be able to perceive the colours red, yellow and green.
- 3) Dental
 - a) Seafarers must be free from infections of the mouth cavity or gums
- 4) Blood Pressure
 - a) An applicant's blood pressure must fall within an average range

16 MAR 2023




DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDG A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
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5) Voice

- a) Deck /Navigational officer applicants and radio officer applicants must have speech which is unimpaired for normal voice communications.

6) Vaccinations

- a) All applicants shall be vaccinated according to the requirements indicated in the WHO publication, International travel and Health, Vaccinations and Requirements and Health Advice (Available at http://www.who.int/ith/chapters/ith2012en_chap6.pdf) and shall be given advice by the certified physicians on immunizations. If new vaccinations are given these shall be recorded.

7) Disease or Conditions

- a) Applicants afflicted with any of the following disease or conditions shall be disqualified: epilepsy, insanity, senility, alcoholism, tuberculosis, acute venereal disease or neurosyphilis, AIDS, and / or the use of narcotics.

8) Physical Requirements

- a) Applicants for able seafarer, bosom, GP-I ordinary seafarer and junior ordinary seafarer must meet the physical requirements for a deck/navigational officer's certificate.
- b) Applicants for fire/water tender, oiler/motor, pump technician, electrician, wiper, tanker rating and survival craft/rescue boat crewmember must meet the physical requirements for an engineer officers certificate.





NAAF MARINE SERVICES

NMS/F-04

Date

1 July 2012

TITLE:- PRE-JOINING MEDICAL EXAMINATION
REPORT/CERTIFICATE

Issue No

00

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CONFIDENTIAL FORM

SURNAME: HASANGIVEN NAME(S) MOHAMMED FERDOUS

DATE OF BIRTH

03 MONTH DAY 19 YEAR 1969

PLACE OF BIRTH

CITY CHATTOGRAM BANGLADESH
COUNTRY

SEX

☒ MALE ☐ FEMALE

EXAMINATION FOR DUTY AS:

MASTER ☐DECK OFFICER ☐ENGINEERING OFFICER ☒RATING ☐OTHERS (RANK: ☐

MAILING ADDRESS OF APPLICANT:

ELEGY ORCHARD (A-8)HOUSE NO. 27, ROAD NO. 2.NASIRABAD HOUSING SOCIETY, PANCHLIASH
CHATTOGRAM - 4203.

MEDICAL EXAMINATION (SEE REVERSE SIDE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE

HEIGHT

162.5 cm

WEIGHT

72 kg

BLOOD PRESSURE

120/80 mmHg

PULSE

72 bpm

RESPIRATION

24 bpm

GENERAL APPEARANCE

Good

VISION:

WITHOUT GLASSES

WITH GLASSES

RIGHT EYE

LEFT EYE

6/6 6/6

HEARING:

RT. EAR

Normal

LEFT EAR

Normal

COLOR TEST TYPE: BOOK ☒ LANTERN ☐ CHECK IF COLOR TEST IS NORMAL - YELLOW ☐ RED ☐ GREEN ☐ BLUE ☐ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARDS? Yes ☐ No ☒

HEAD AND NECK

Normal

HEART (CARDIOVASCULAR)

Normal

LUNGS

Normal

SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER)
IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? ☒

EXTREMITIES:

UPPER

Normal

LOWER

Normal

IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY WORKING ABOARD A VESSEL OR TO RENDER HIM/HER UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? Yes ☐ No ☒IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICATIONS? Yes ☐ No ☒

SIGNATURE OF APPLICANT

16/03/2023 16 MAR 2023

DATE

THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS CONDUCTED ON:

FIT FOR DUTY ON BOARD SHIP

MOHAMMED FERDOUS HASAN

NAME OF APPLICANT

THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE DISEASE (OR VIRUSES FOR COOKS): Yes ☒ No ☐SEAFARER IS FOUND TO BE ☒ FIT / ☐ NOT FIT FOR DUTY AS A ☐ MASTER / ☐ DECK OFFICER / ☒ ENGINEERING OFFICER / ☐ RATING / ☐ CHIEF COOK / ☐ COOK / ☐ WITHOUT ANY RESTRICTIONS / ☐ WITH THE FOLLOWING RESTRICTIONS:NAME AND DEGREE OF PHYSICIAN DR. MIR MD. RAIHAN MBBS, DFMADDRESS RADICAL HOSPITALS LIMITED 35, SHAH MAKHDUM AVENUE SECTOR-12 UTTARA DHAKA-1230NAME OF PHYSICIAN'S CERTIFYING AUTHORITY DG SHIPPING BANGLADESHDATE OF ISSUE OF PHYSICIAN'S CERTIFICATE 06 MAY-2014

SIGNATURE OF PHYSICIAN

16 MAR 2023

DATE

This certificate is in compliance with the requirements

of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73, STCW 1978)

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

(CONTROLLED DOCUMENT)

Quality Manual: Naaf Marine Services, Chittagong, Bangladesh: July 2012



04.2023.3583



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 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. 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.2/1997)*. 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 seafarer'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. If the applicant wears glasses, he must have vision without glasses of at least 20/160 (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 20/30 (0.63) vision in one eye and at least 20/50 (0.40) in the other. If the applicant wears glasses, he must have vision without glasses of at least 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 use of narcotics. Applicants diagnosed with, suspected of, or exposed to any communicable disease transmittable 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-I, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigation 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 engineer 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 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

(Please fill attached form)

16 MAR 2023



(CONTROLLED DOCUMENT)

Quality Manual: Naaf Marine Services, Chittagong, Bangladesh: July 2012

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

Appendix 1
Medical Exam Form
CONFIDENTIAL FORMName (last, first, middle): HASAN MOHAMMED FERDOUSDate of birth (day/month/year): 19/03/1969 Sex: ☒ Male ☐ FemaleHome address: ELEGY ORCHARD (A-8), HOUSE NO. 27, ROAD NO. 2
NASIRABAD HOUSING SOCIETY, PANCHUASH. CHATTOGRAM-4203Passport No./Discharge Book No.: EE 0048401 / C/0/2293Department (deck/engine/radio/food handling/other): ENGINE

Type of ship: Multi-Purpose cargo/Container/Bulk Carrier/Tanker (Oil/Product/Chemical/Crude)

Trade area: Worldwide**Examinee's personal declaration**

(Assistance should be offered by medical staff)

Have you ever had any of the following conditions:

Condition	Yes	No	Condition	Yes	No
1. Eye/vision problem	☐	☒	19. Do you smoke, use	☐	☒
2. High blood pressure	☐	☒	alcohol or drugs	☐	☒
3. Heart/vascular disease	☐	☒	20. Operation/surgery	☐	☒
4. Heart surgery	☐	☒	21. Epilepsy/seizures	☐	☒
5. Varicose veins/piles	☐	☒	22. Dizziness/fainting	☐	☒
6. Asthma/bronchitis	☐	☒	23. Loss of consciousness	☐	☒
7. Blood disorder	☐	☒	24. Psychiatric problems	☐	☒
8. Diabetes	☐	☒	25. Depression	☐	☒
9. Thyroid problem	☐	☒	26. Attempted suicide	☐	☒
10. Digestive disorder	☐	☒	27. Loss of memory	☐	☒
11. Kidney problem	☐	☒	28. Balance problem	☐	☒
12. Skin problem	☐	☒	29. Severe headaches	☐	☒
13. Allergies	☐	☒	30. Ear (hearing/tinnitus)/	☐	☒
14. Infectious/contagious diseases	☐	☒	nose/throat problems	☐	☒
15. Hernia	☐	☒	31. Restricted mobility	☐	☒
16. Genital disorders	☐	☒	32. Back or joint problem	☐	☒
17. Pregnancy	☒	☐	33. Amputation	☐	☒
18. Sleep problem	☐	☒	34. Fractures/dislocations	☐	☒

If any of the above questions were answered "yes," please give details.

**(CONTROLLED DOCUMENT)**

Quality Manual: Naaf Marine Services, Chattogram, Bangladesh: July 2012



Appendix 1
Medical Exam Form
CONFIDENTIAL FORM

Additional questions

35. Have you ever been signed off as sick or repatriated from a ship?
36. Have you ever been hospitalized?
37. Have you ever been declared unfit for sea duty?
38. Has your medical certificate ever been restricted or revoked?
39. Are you aware that you have any medical problems, diseases or illnesses?
40. Do you feel healthy and fit to perform the duties of your designated position/occupation?
41. Are you allergic to any medications?

Yes

No

☐
☒
☐
☒
☐
☒
☐
☒
☐
☒
☒
☐
☐
☒

Comments.

FIT FOR DUTY ON BOARD SHIP

42. Are you taking any non-prescription or prescription medications?

☐
☒

If yes, please list the medications taken and the purpose(s) and dosage(s).

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

Signature of examinee: [Signature]

16 MAR 2023

DR. MIR. MD. RAIHAN

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

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited.

Date (day/month/year): 16 MAR 2023

Witnessed by: (Signature) [Signature]

Name: (Typed or printed) [Signature]

I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to Dr. DR. MIR. MD. RAIHAN (The approved medical examiner).

Signature of examinee: [Signature]

16 MAR 2023

DR. MIR. MD. RAIHAN

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

BMDC A-55144, MMC-BGD-016

DG Shipping Bangladesh Approved

General Physician

Radical Hospitals Limited.

Date (day/month/year): 16 MAR 2023

Witnessed by: (Signature) [Signature]

Name: (Typed or printed) [Signature]

Date and contact details for previous medical examination (if know):



(CONTROLLED DOCUMENT)

Appendix 1
Medical Exam Form
CONFIDENTIAL FORM

Sight

Use of glasses or contact lenses: Yes / No (if yes, specify which type and for what purpose)

	Visual acuity					
	Unaided			Aided		
	Right eye	Left eye	Binocular	Right eye	Left eye	Binocular
Distant	6/6 6/6	6/6 6/6	/			
Near	NS NS	NS NS	/			

	Visual fields	
	Normal	Defective
	Right eye	Left eye
Right eye	/	/
Left eye	/	/

Color vision:

☐ Not tested☒ Normal☐ Doubtful☐ Defective

Hearing

Pure tone and audio metry (threshold values in dB)

	500 Hz	4,000 Hz	2,000 Hz	3,000 Hz	4,000 Hz	6,000 Hz
Right ear	20	20	20			
Left ear	20	20	20			

Speech and whisper test (metres)

	Normal	Whisper
Right ear	4	4
Left ear	4	4

Height: 163 (cm)

Weight: 72 (kg)

Pulse rate: 78 (/minute)

Rhythm: Regular

Blood pressure: Systolic: 120 (mm Hg)

Diastolic: 80 (mm Hg)

Urinalysis: Glucose: Nil

Protein: Nil

	Normal	Abnormal
Head	☒	☐
Sinuses, nose, throat	☒	☐
Mouth/teeth	☒	☐
Ears (general)	☒	☐
Tympanic membrane	☒	☐
Eyes	☒	☐
Ophthalmoscopy	☒	☐
Pupils	☒	☐
Eye movement	☒	☐
Lungs and chest	☒	☐
Breast examination	☒	☐
Heart	☒	☐

	Normal	Abnormal
Skin	☒	☐
Varicose veins	☒	☐
Vascular (inc. pedal pulses)	☒	☐
Abdomen and viscera	☒	☐
Hernia	☒	☐
Anus (not rectal exam.)	☒	☐
G-U system	☒	☐
Upper and lower extremities	☒	☐
Spine (C/S, T/S and L/S)	☒	☐
Neurologic (full brief)	☒	☐
Psychiatric	☒	☐
General appearance	☒	☐

Chest X-ray: ☐ Not performed ☒ Performed on (day/month/year):

16 MAR 2023

Results: Normal EM X-Ray

(CONTROLLED DOCUMENT)

Quality Manual: Naaf Marine Services, Chittagong, Bangladesh: July 2012





NAAF MARINE SERVICES

NMS/F-04

Date

1 July 2012

TITLE:- PRE-JOINING MEDICAL EXAMINATION
REPORT/CERTIFICATE

Issue No

00

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Appendix 1
Medical Exam Form
CONFIDENTIAL FORM

Other diagnostic test(s) and result(s):

Test Blood Pressure Result Normal

Medical practitioner's comments and assessment of fitness, with reasons for any limitations:

- (a) the hearing and sight of the seafarer concerned, and the colour vision in the case of a seafarer to be employed in capacities where fitness for the work to be performed is liable to be affected by defective colour vision, are all satisfactory; and
(b) the seafarer concerned is not suffering from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board.



Signature of medical practitioner

Vaccination status recorded (optional, but recommended by Administrator): ☒ Yes ☐ No

Assessment of fitness for service at sea

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

☒ Fit for look-out duty ☐ Not fit for look-out duty

Fit ☒ Unfit ☐ Deck service ☐ Engine service ☒ Catering service ☐ Other services ☐

Without restrictions ☒ With restrictions ☐ Visual aid required ☐ Yes ☐ No

Describe restrictions (e.g., specific positions, type of ship, trade area)

Action taken by medical practitioner (e.g., referral):

Medical certificate's date of expiration (day/month/year): 15 MAR 2025

Date of medical certificate issued (day/month/year): 16 MAR 2023

Number of medical certificate:

Official stamp:

Signature of medical practitioner:

Name of medical practitioner: (Typed or printed)

License number of medical practitioner:

Address of medical practitioner: Radical Hospital Limited

Authorized by: DR. MIR. MD. RAIHAN

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

(competent authority)

(CONTROLLED DOCUMENT)

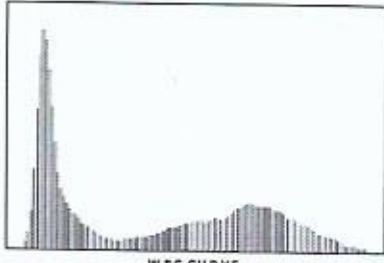
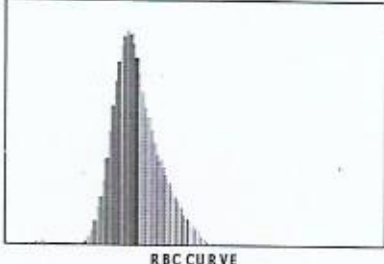
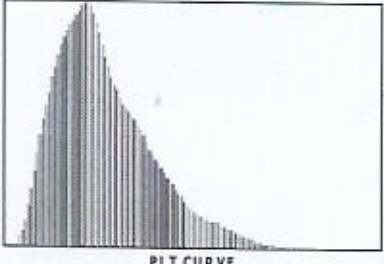
Quality Manual: Naaf Marine Services, Chittagong, Bangladesh: July 2012



Id No : 0399 **Date** : 15-Mar-2023 **D.Date** : 15-Mar-2023
Patient's Name : MOHAMMED FERDOUS HASAN **Age** : 53Y 11M 24 **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM **CDC NO:**C/O/2293

Haematology Report

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

Parameter Name	Results	Reference Range	
Hemoglobin (Hb)	13.6 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl.	
ESR(Westergreen)	07 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.	
Total WBC Count(TC)	8,500 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm	
Differential WBC Count (DC)			
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	170 /cumm	50-450/cumm	
Total RBC Count	4.44 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul	
HCT/PCV	36.6 %	M: 40-54%, F:37-47%	
MCV	82.4 fL	76 - 94 fL	
MCH	30.6 pg	27 - 32 pg	
MCHC	37.2 g/dL	29 - 34 g/dL	
RDW	13.7 %	11 - 16 %	
PDW	16.6 fL	35 - 56 fL	
Total Platelete Count (PC)	2,21,000 /cumm	150,000-450,000/cumm	
MPV	9.4 fL	7.0 - 11.0 fL	
PCT	0.208 %	0.1 - 0.4 %	
Bleeding 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	DIA23030399	Received Date	15/03/2023
Patient's Name	MOHAMMED FERDOUS HASAN		
Patient's Age	53Y 11M 24	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/2293
Sample	BLOOD		

SEROLOGICAL REPORT

Test Name

Result

HIV 1 & 2 (Method : (ICT)

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

Bill No	DIA23030399	Received Date	15/03/2023
Patient's Name	MOHAMMED FERDOUS HASAN		
Patient's Age	53Y 11M 24	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/2293
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

Test Name	Result
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Drug Level of Urine

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

Checked By


 Medical Technologist
 Radical Hospitals Ltd.


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

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23030399 Receive: 15/03/2023 Print: 15/03/2023
Patient's Name : **MOHAMMED FERDOUS HASAN**
Age : 53 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

ID: 00000000

15-03-2023 12:06:54 PM

MOHAMMAD FERDOUS HASAN

Male 54 Years

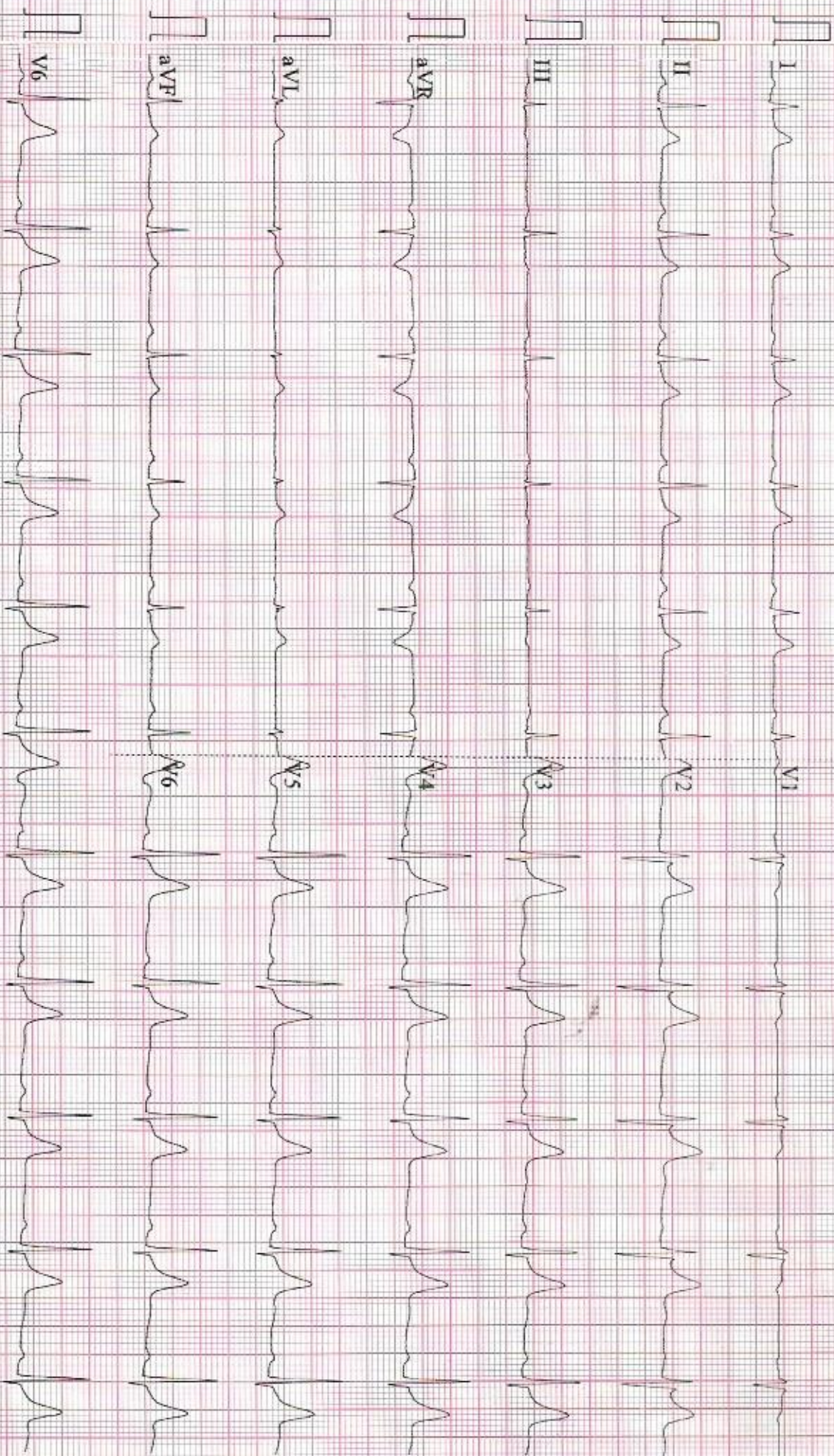
Diagnosis Information:

Sinus rhythm

Normal ECG

HR	: 65	bpm
P	: 90	ms
PR	: 164	ms
QRS	: 78	ms
QT/QTc	: 372/387	ms
P/QRS/T	: 56/60/33	°
RV5/SV1	: 1.29/0.522	mV

Report Confirmed by:



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23030399 Receive: Print: 15/03/2023
Patient's Name : **MOHAMMED FERDOUS HASAN**
Age : 53 YRS Sex : M
Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 65 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 ID	23030399	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	15/03/2023
Patient Name	MOHAMMAD FERDOUS HASAN		
Age	53 YRS	Sex	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		

THANK YOU FOR THE COURTESY OF THIS REFERRAL

LIVER :- Normal in size 12.6cm, regular in shape and normal 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.

No echogenic structure is seen within lumen. CBD is not dilated.

PANCREASE :- Normal size regular in shape. Echogenecity is homogenous. PD not dilated.

SPLEEN :- Is normal in size(10.0 x 3.5)cm and uniform in echo-texture.

BOTH KIDNEYS :- Are normal in size RK-10.3cm, LK-10.7cm regular in shape. The cortical echogenicity are normal with clear cortico-medullary 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 normal. No intravesicle lesion is seen

PROSTATE: Mildly enlarged in size and volume is 31.5cc,regular in shape. Echogenicity is homogenous.

No area of calcification is seen.

IMPRESSION: Mildly enlarged prostate.

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

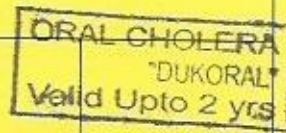
**INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION
AGAINST CHOLERA
CERTIFICAT INTERNATIONAUX DE VACCINATION OU DE REVACCINATION
CON TRE LE CHOLERA**

MOHAMMED FERDOUS HASAN

This is to certify that JE Soussigne' (e) certifie que | date of birth | **19.03.1969** Sex | **M**
no' (e) le | | sexe |

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 fièvre jaune a la date indiquée.

Date 16 MAR 2023	Signature and professional Status of Vaccinator Signature et qualite profess- sionelle vaccinateur 	Approved Stamp Cechet d'authentification 
2	DR. MIR. MD. RAIHAN MBBS (DU), DPM, CCD (Bldem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.	
3		
4		

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

Notwithstanding the above provision in the case of a pilgrim, this 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 part of it. May render it invalid.

La validité de ce certificat couvre une période de six mois commençant six jours après la première injection du vaccin ou, dans le cas d'une revaccination, à compter de la date de cette revaccination.

Nonobstant les dispositions ci-dessus dans le cas d'un pèlerin le présent certificat doit faire mention de deux injections pratiquées à sept jours d'intervalle et sa validité commence le jour de la seconde injection.

Le cachet d'authentification doit être conforme au modèle présent par l'administration sanitaire du territoire où la vaccination est effectuée.

Toute correction ou rature sur le certificat ou l'omission d'une quelconque des mentions qu'il comporte peut en affecter la validité.

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION
AGAINST YELLOW FEVER
CERTIFICAT INTERNATIONAUX DE VACCINATION OU DE REVACCINATION
CONTRE LA FIEVRE JAUNE

MOHAMMED FERDOOS HASAN

This is to certify that
JE Soussigne' (e) certifie que | date of birth | 19/03/1969 | Sex | M
no' (e) le | | sexe |

Whose signature follows
don't la signature suit

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

Date	Signature and professional Status of Vaccinator Signature et titre du vaccinateur	Manufacturer and batch no of vaccine Fabricant du vaccin et numéro de lot	Official stamp of vaccinating centre Cachet officiel du centre de vaccination
16 MAR 2023	 DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Bdmc), PGT (Opth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.		
2			
3			
4			

This certificate is valid only if the vaccine used has been approved by the world health organization and vaccinating centre has been designated by 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 in days after the date of vaccination or in the event of a revaccination within such 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 the signature.

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

Ce certificat n'est valable que si le vaccin employé a été approuvé par l'Organisation Mondiale de la Santé et si le centre a été désigné par l'administration sanitaire du territoire dans lequel ce centre est situé.

La validité de ce certificat couvre une période de dix ans commençant dix jours après la date de la vaccination ou, dans le cas d'une ré vaccination, ou, à l'expiration de dix ans, le jour de cette revaccination.

Ce certificat doit être signé par un médecin de sa propre main, son cachet officiel ne pouvant être considéré comme remplaçant le lieu de signature.

Toute correction ou rature sur le certificat ou l'omission d'une quelconque des mentions qu'il comporte peut affecter sa validité.