REPORT OF MEDICAL EXAMINATION OF SEAFARER BY AN APPROVED MEDICAL EXAMINER

As per **Merchant Shipping (Medical Examination) Amendment Rules, 2000** and **ILO IMO/JMS/2011/2012**
(In Compliance with MLC 2006 & ISM/STCW 2010, Code 1/9)

Name : HOSSAIN MD. SAFAYET (SURNAME / FIRST NAME / MIDDLE NAME) Sex : MALE Serial No. :

Date of Birth : 15-08-1993 PP/CDC No.: B00694456 Nationality: BANGLADESHI

Rank: 3/E Vessel: VICTORIA HIGHWAY Type: PCTC Route : WORLD WIDE

Home Address : FLAT-9/D, BUILD-04, SETU HOMES, 55 BOX NAGAR, 200 ROAD, MIRPUR-1

Company Name & Address: WALLEM SHIP MANAGEMENT

Medical History : Please answer the following to the best of your knowledge

Is there any past/present history of any of the following?	Candidate Declaration Yes	Candidate Declaration No	Examiner Record Yes	Examiner Record No	Is there any past/present history of any of the following?	Candidate Declaration Yes	Candidate Declaration No	Examiner Record Yes	Examiner Record No
Severe one-side headaches (Migrane)		✓		✓	Hernia / Hydrocoele / Appendictis		✓		✓
Head Injury / Concussion / Loss of Memory		✓		✓	High/Low Blood Pressure / Heart Disease		✓		✓
Fits / Epilepsy / Dizziness / Fainting		✓		✓	Asthama / Bronchitis / Tuberculosis		✓		✓
Eye / Vision / Problems (Glasses etc)		✓		✓	Allergy / Skin Disease		✓		✓
Hearing Impairmeot		✓		✓	Infection / Contagious Disease		✓		✓
Ear / Nose / Throat Problem		✓		✓	Addiction to alchohol / drugs / tobacco		✓		✓
Stomach / Bowel Disorders		✓		✓	Fracture / Dislocation / Injury / Amputation		✓		✓
Gall Stones / Kidney Disorders		✓		✓	Major / Minor Operation		✓		✓
Jaundice / Liver Disease		✓		✓	Diabetes		✓		✓
Piles / Vericose veins		✓		✓	Nervous / Mental disease / Sleep disorder		✓		✓
Blood Disorder		✓		✓	Malignant Disease (Cancer)		✓		✓
Female Disorders					Signed off on medical ground/Declared Unfit		✓		✓

Notes :

Candidate's Declaration :- My signature below acknowledges that all statements provided by me in this application are true & correct to the best of my knowledge and belief and I further authorise & consent to the release of any /all of my medical records from any source including Insurance offices, Doctors, Hospitals or other institutions and public authorities. This general medical release will also authorize the release of any /all of my psycological records. If I am being tested for HIV virus. I consent to have the result revealed to my employer. I declare the above statements to be correct.
I hereby certify that the above medical statements are true and will form the basis of my medical examination. I agree that any omission or mis-representation shall preclude me from employment and other medical benefits.

Date : 06 MAR 2023 Safayet Candidate's Signature

Medical Examination :

Height in cms	Weight in Kgs	Blood Pressure in mm of Hg	Pulse-beats/min	Resp. Rate/min	General Appearance
178cm	90				HEALTHY

Compliant with MLC2006, STCW 2010 STANDARD A-1/9	Distant Vision (Snellen's Chart)	Uncorrected	Corrected	Field Of Vision	Audiometry	Hz	500	1000	2000	3000	4000	5000	6000	8000	Compliant with MLC2006, STCW 2010 STANDARD A-1/9
	Right Eye	6/6		Normal ✓	Right Ear	dB					Not Indicated				
	Left Eye	6/6		Abnormal	Left Ear	dB									
					*Hearing		Normal Voice				Whispered Voice				
Colour Vision	Ishihara	Normal ✓		Abnormal	Right Ear		4 METER				2 METER				
	Others	Normal ✓		Abnormal	Left Ear		4 METER				2 METER				

Systemic Examination	Norm	Abnor	Notes		Norm	Abnor
Head & Neck	✓		FIT FOR SEA SERVICE AS AS PER MLC 2006 Enhanced GARD Medicals done	Respiratory System	✓	
Eyes	✓			Cardiovascular System	✓	
Ear / Nose / Throat	✓			Per Abdomen	✓	
Teeth / Oral Cavity	✓			Genito-urinary System	✓	
Muscule-Skeletal System	✓			Others	✓	
Nervous System	✓			Hernia / Hydrocoele	✓	
Reflexes	✓			Varicose Veins	✓	
Skin	✓			Fissure / Fistula / Piles	✓	

Investigations :

Blood	Result	Normal	Urine	Result
Heamoglobin	18.0	M: 13-17 F: 12-15 gm%	Colour	STRAW
Total WBC Count	8130	4000 - 10000 / cu.m	Specific Gravity	1.009
Neu 64% Lymp 25% Eos 2% Baso 0% Mo 9 %			pH	6
ESR	1	1 - 10 mm/hr	Albumin	NIL
SGOT	28	0 - 35 IU / L	Sugar	NIL
SGPT	46	10 - 60 IU / L	Bile Pigment	
S. Cholesterol	116	130 - 220 mg / dl	Bile Salt	
S. Triglycerides	119	upto 200 mg / dl	Occult Blood	
Blood Sugar	5.27	upto 140 mg %	RBC Cells	NIL
Creatinine	0.68	upto 1.5 mg / dl	Leucocytes	NIL
GGTP		upto 55 IU / L	**Spirometry**	
HbsAg	NEGATIVE		**Drug of Abuse**	
HIV I & II	NEGIATIVE		**TMT**	
VDRL	NON-REACTIVE		**ECG**	NORMAL
Others			**USG**	NORMAL
Blood Group	O+		**XRay (Chest PA)**	NORMAL

PHOTO

Result Of Medical Examination

On the basis of the history, clinical examination & diagnostic tests, I, hereby declare the above examinee has been found medically, **FIT**

Remarks / Recommendation : *Unaided Hearing : Satisfactory

I, , certify that all information required under Annexure E & E of M.S (Medical Examination) Rules 2000 are incorporated in this certificate.

Date of Medical Exam: 06 MAR 2023
Date of Medical fitness: 06 MAR 2023
Validity of Medical Certificate: 05 MAR 2025

Radical Hospitals Ltd. As Per MLC-2006 Approved by Department of Shipping

DR. MIR [illegible] SAIHAN
MBBS, BCS (Health), DCP (Delhi)
General Physician
Radical Hospitals Limited

Doctor's Signature

IDENTITY of CANDIDATE CONFIRMED WITH

04.2023.3506

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: HOSSAIN	GIVEN NAME (S): MD. SAFAYET
DATE OF BIRTH: DAY 15 MONTH 08 YEAR 1993	PLACE OF BIRTH CITY DHAKA COUNTRY BANGLADESH / SEX MALE ☑ FEMALE ☐
POSITION ON BOARD: MASTER ☐ DECK OFFICER ☐ ENGINEERING OFFICER ☑ RADIO OPERATOR ☐ RATING ☐	MAILING ADDRESS OF APPLICANT: FLAT-9/D, BUILD-04, SETU HOMES, 55 BOX NAGIAR, 200 ROAD, MIRPUR-1 DHAKA – 1216

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION			COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	☑ BOOK	
RIGHT EYE	6/6	—	☑ LANTERN	RIGHT EAR
LEFT EYE	6/6	—	YELLOW RED GREEN BLUE	LEFT EAR

Confirmation that identification documents were checked at the point of examination: YES ☑ NO ☐

Hearing meets the standards in STCW Code, Section A-1/9? YES ☑ NO ☐ NOT APLICABLE ☐

Unaided hearing satisfactory? YES ☑ NO ☐

Visual acuity meets standards in STCW Code, Section A-1/9? YES ☑ NO ☐

Colour vision meets standards in STCW Code, Section A-1/9? YES ☑ NO ☐
(the visual test it is required every six years)
Date of the last colour vision test: (Day/Month/Year) 06 MAR 2023

Are glasses or contact lenses necessary to meet the required vision standards? YES ☐ NO ☑

Able for watchkeeping? YES ☑ NO ☐

Is applicant taking any non-prescription or prescription medications? YES ☐ NO ☑

Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarers unfit for such service or to endanger the health of other persons on board? YES ☐ NO ☑

Hereby I declare that I am in knowledge of the contents of the Physical Examination.

Safayet	MD. SAFAYET HOSSAIN	06 MAR 2023
Signature of Applicant	Name of Applicant	Date

CIRCLE APPROPIATE CHOICE: (HE / SHE) IS FOUND TO BE (FIT / NOT FIT) FOR DUTY AS A (MASTER / DECK OFFCIER / ENGINEERING OFFICER / RADIO OPERATOR / RATING) (WITHOUT ANY / WITH THE FOLLOWING) RESTRICTIONS:

FIT FOR DUTY ON BOARD SHIP

NAME AND DEGREE OF PHYSICIAN: DR. MIR MD. ROMZAN MBBS.

ADDRESS: RADICAL HOSPITAL LIMITED CONTARA

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: DG SHIPPING BANGLADESH

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06 MAR 2023

SIGNATURE OF PHYSICIAN: _____ STAMP OF PHYSICIAN: _____ DATE: 06 MAR 2023

EXPIRY DATE OF CERTIFICATE: 05 MAR 2025

This certificate is issued in compliance with the requirements of the STCW Convention, 1978, as amended and the Maritime Labour Convention, 2006

Radical Hospitals Ltd. ★ Reg. No: C-2006 ★ Department of Shipping

DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55114, MMC-RGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited

WALLEM SHIPMANAGEMENT(INDIA) PVT. LTD.

REQUISITION FOR SEAFARER'S MEDICAL EXAMINATION

(Confidential Document)

Form	: MHRS 08
Prepared by	: MR
Approved by	: MD
Issued	: Feb '08
Revised	: Mar '17

From : _____

(Please write Name, Address & Contact Details of Manning Centre)

To : RADICAL HOSPITAL LIMITED Uttara, Dhaka, Bangladesh

(Please write Name, Address & Contact Details of the Doctor/ Clinic/Examiner)

Please carry out medical examination of the seafarer, the details and requirements for which

_____ Date : / /

(Name & Signature of Responsible Person from Manning Centre) 06 MAR 2023

Examinee's Details :

Full Name : MD. SAFAYET HOSSAIN Address : FLAT - 9/D, BUILD-09, SETU HOMES, 55 BOX NAGAR, 200 ROAD

Date of Birth : 15-AUG-93 Rank : 3/E Name of vessel to be assigned : M.V. VICTORIA HIGHWAY

Type of vessel : PCTC Trade area : WORLD WIDE

(Container, Tanker, Passenger etc) (e.g. Coastal, Tropical, Worldwide) :

CDC No. : C/017561 Passport No. : B00694456 Crew ID.(from Compas) : 38900

Position Offered/ Applied for : _____ Routine & Emergency Duties (if known) : _____

As per requirements of applicable P&I club :

☐ West of England P&I ☐ UK P&I ☐ Steamship Mutual Underwriting Association

☐ Britannia P&I ☐ Skuld P&I ☐ North of England Association P&I

☐ Standard P&I ☐ Gard P&I ☐ London Steamships P&I

☐ Japan P&I ☐ American Steamships P&I ☐ Others : _____

As per requirements of applicable Flag State :

☐ Liberian ☐ NIS ☐ Panamanian ☐ Marshall Islands ☐ Malta

☐ Danish ☐ ILO ☐ UK ☐ Others : _____

Medical Examination Module (as applicable): _____ (Please refer to "Annex 1" of WSM(I)'s Quality Manual)

FOR SEAFARERS : Please write any past medical history [Injury or Illness] in detail; any history of allergy to drugs should be mentioned in the box provided below :

Please read and sign the following statement :-

"I certify that my past medical history will be/has been fully declared to the Company Doctor and any false statement or undisclosed material and/or information in regard to past or present illness and/or medical condition(s) will disqualify me from any employment benefits and claims."

Safayet

Seafarer's Signature

Date : 06 MAR 2023

Radical Hospitals Ltd. As Per-MLC-2006 Approved by Department of Shipping

Doctor's Signature

Date : 06 MAR 2023

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

Original: Doctor & Copy : Manning Centre

Remark: The document to be uploaded into CMS under "Medical" tab.

04.2023.3506

FPS 41D
Revised : Feb'10

MEDICAL FITNESS CERTIFICATE

LAST NAME OF APPLICANT	FIRST NAME	MIDDLE INITIAL
HOSSAIN	MD. SAFAYET	

DATE OF BIRTH: 08 MONTH | 15 DAY | 1993 YEAR

PLACE OF BIRTH: CITY DHAKA COUNTRY BANGLADESH

EXAMINATION FOR DUTY AS :

- MASTER ☐
- MATE ☐
- ENGINEER ☑
- RADIO OFF ☐
- SEAMAN ☐

MAILING ADDRESS OF APPLICANT
FLAT-9D, BUILD-04, 55 SETU HOMES
200 ROAD, MIRPUR-1, DHAKA-1216

MEDICAL EXAMINATION

HEIGHT	WEIGHT	BLOOD PRESSURE	PULSE	RESPIRATION	GENERAL APPEARANCE
168cm	90kg	120/70mm	78/min	Normal	Good

VISION:

	RIGHT EYE	LEFT EYE
WITHOUT GLASSES	6/6	6/6
WITH GLASSES		

HEARING:
RIGHT EAR Normal LEFT EAR Normal

COLOR TEST TYPE : BOOK ☐ LANTERN ☐ Check if color test is normal
YELLOW Yes RED Red GREEN Green BLUE Yes

HEAD AND NECK: Normal

HEART (CARDIOVASCULAR): Normal

LUNGS: Normal

SPEECH :
Is speech unimpaired for normal voice communication ? Normal

EXTREMITIES: UPPER Normal LOWER Normal

Is applicant suffering from any disease likely to be aggravated by, or to render him unfit for, service at sea or likely to endanger the health of other persons onboard?

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO : MD. SAFAYET HOSSAIN

AND HE / SHE IS FOUND TO BE FIT FOR SEA SERVICE FROM

NAME AND DEGREE OF PHYSICIAN DR MD. RAIHAN MBBS. DFM
(PLEASE PRINT)

ADDRESS RADICAL HOSPITAL LIMITED
UTTARA, DHAKA-1230

NAME OF PHYSICIAN'S LICENSING AUTHORITY DG SHIPPING BANGLADESH

DATE OF ISSUE OF PHYSICIAN'S LICENSE 06 MAY 2014.

SIGNATURE OF PHYSICIAN

This certificate is issued in compliance with the requirements of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73)

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

04-2023-3506

Radical Hospitals Ltd. As Per-MLC-2006 Approved by Department of Shipping

MEDICAL CERTIFICATE FOR FITNESS FOR SERVICE AT SEA

FIT FOR DUTY ON BOARD SHIP

Last/Family Name	First & Middle /Given Name	Position applied for
HOSSAIN	MD. SAFAYET	3/E

Date of Birth	Sex	Nationality	ID (Passport/Discharge book) No.
15-08-1993	MALE	BANGLADESHI	B 00694456

I have evaluated the above-named seafarer after establishing his identity as per the documents mentioned above and in compliance with the medical standards of MLC 2006 Reg 1.2; STCW 2010&the guidance for the conduct of medical examination issued by the Directorate, as amended from time to time. On the basis of the seafarer's personal declaration, my clinical examination, the diagnostic test results obtained, and in consideration of the essential requirements of the position applied for, my opinion is -

(a)	that the hearing meets the required standards for his rank:-	✓ Yes	No
	Unaided hearing is satisfactory	~~Yes~~	No
(b)	Visual acuity meets the required standards for his rank	Yes	No
	Colour Vision meets the the required standard	Yes	No
	that he is fit for look out duty	Yes	No
(c)	that he needs visual aids / informed to carry spares	Yes	~~No~~
(d)	that he is taking regular medication & seafarer does require to take same during his tenure on board vessel	Yes	~~No~~
(e)	that the seafarer is not suffering from any disease likely to be aggravated by, or render him unfit for, service at sea or likely to endanger the health of other persons on board ships	Yes	No

(f) this seafarer is **FIT FOR DUTY without restrictions* as mentioned below**

** This Medical Certificate is issued with following restrictions

** Reasons for being unfit

Physician Signature:

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

Physician Name Printed:

Clinic Stamp

Radical Hospitals Ltd. ★ As Per-MLC-2006 ★ Approved by Department of Shipping

Date: 06 MAR 2023

Valid Till: 05 MAR 2025

Authorizing body of Medical Examiner: Directorate General of Shipping, Govt.of Bangladesh

I acknowledge, that I have been advised of the content of the medical certificate & of the rights for a review and my obligations.

Seafarers signature with Date:- Safayet 06 MAR 2023

Delete whatever is not applicable

WALLEM	**SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER** In accordance with: STCW Convention, 1978, as amended, MLC 2006, ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended (Confidential Document)	Form: OHF 48 Version: 01 Date: 18 Aug 21 Page: 1 of 7

Pre-Sea Exam: ☑ Periodic Exam: ☐ Other: ☐

Examination for duty as:		Fit to perform the duties he/she is to carry out.	Fit to perform the duties he/she is to carry out with the prescribed medicines which will not affect seafarer's health while onboard.	Temporarily unfit to perform the duties he/she is to carry out.	Permanently unfit to perform the duties he/she is to carry out.
Master: Y/N: ____ Deck Officer: Y/N: ____ Eng Officer: Y/N: ____ Ratings: Y/N: ____ Cook: Y/N: ____ Other: Y/N: ____ Please specify _____		☐	☐	☐	☐

To be filled by Manning Centres

Name, Address with Contact details of Manning Centre:					
Vessel to be assigned:	VICTORIA HIGHWAY	Routine & Emergency Duties (if known):		Position Offered/ Applied for:	3/E
Type of vessel (Container, Tanker, Passenger etc):	PCTC				
Trade area (e.g. Coastal, Tropical, Worldwide):	Cosastal ☐	Tropical ☐	WorldWide ☑		

Part I - Examinee's Personal Declaration with Medical History

(Examinee is to be answer the following to the best of examinee's knowledge)

(Assistance should be offered by medical staff)

In case of any wrongful Act or misrepresentation/ suppression of material fact(s) of information or infringement the concerned seafarer shall be fully responsible/ liable for the consequences/ damages / penalties as per the provisions or the applicable laws.

Examinee's Personal Details

Name of Examinee (Family/ last, first, middle):	HOSSAIN, MD. SAFAYET				
Home/ Permanent Address:	VILL- RAMESHWARPUR, P.O - CHAPRABIR HAT P.S- KABIR HAT, DIST - NOAKHALI				
Mailing Address:	FLAT-9/D, BUILD-04, 35 BOX NAGAR ROAD MIRPUR-1				
Date of birth (day/month/year):	15 / 08 / 1993	Sex:	MALE		
Place of Birth:	City: DHAKA Country: BANGLADESH	Nationality:	BANGLADESHI	Rank:	3/E
Civil Status:	MARRIED				
Identity Docs/ Passport /Discharge Book No:	B00[illegible]94456				

Examinee's Medical History

Is there any past / present history of any of the following	Examinee	Examiner's	As Per-MLC-2006 there any past / present history of any of the following	Examinee	Examiner's

04.2023.3506

WALLEM

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER

In accordance with:
STCW Convention, 1978, as amended, MLC 2006,
ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

	Declaration		Record			Declaration		Record	
	Yes	No	Yes	No		Yes	No	Yes	No
Loss of Consciousness/ Fits / Head Injury / Dizziness / Loss of Memory		✓		✓	Malignant Disease (Cancer) including Lymphoma, Leukaemia and related conditions Recurrence – especially Acute Complications, e.g. Harm to Self from Bleeding and to others from Seizures / Tumor		✓		✓
Neuropsychiatric diseases or Depression/ Suicidal Tendency/ Psychosis		✓		✓	Stomach / Bowel Disorders/ Digestive Disorder		✓		✓
Ear (Hearing, tinnitus) Problems / Impairment		✓		✓	Gall Stones/ Jaundice / Kidney Disorders		✓		✓
Mental Diseases, Breakdown / Sleep Disorder		✓		✓	Severe/ Frequent/ One Sided Headaches (Migraine)		✓		✓
Fractures / Dislocations / Injury / Amputation/ Restricted Mobility		✓		✓	Back / Joint Problems/ Wrist Problems/ Slipped Disc		✓		✓
Eye/ Vision Problems (Whether using Glasses/ Contact lenses)		✓		✓	Hernia / Hydrocoele / Appendicitis		✓		✓
Balance Problem		✓		✓	Piles / Varicose Veins		✓		✓
Sinuses/ Nose/ Throat Problems		✓		✓	Allergies / Rash/ Skin Disease		✓		✓
Thyroid Problem		✓		✓	Female Disorders		✓		✓
High / Low Blood Pressure/ Blood Disorder		✓		✓	Major / Minor Operation/ Surgery		✓		✓
Heart Disease, Surgery / Chest Pain/ Vascular Disease (inc. Pedal Pulses)		✓		✓	Contagious Diseases/ Gastrointestinal infection / Other Infections		✓		✓
Chronic Cough/ Asthma / Bronchitis / Tuberculosis/		✓		✓	Sexually Transmitted Disease/ Infections		✓		✓
Shortness of Breath		✓		✓	Addiction to Alcohol/Drugs/Cigarettes /Tobacco.		✓		✓
Rheumatic Fever		✓		✓	Diabetes		✓		✓

for Male Examinee	Yes	No	If "Yes", give details	for Female Examinee	Yes	No
Prostate Problems/ Testicular Lumps		✓		Breast Lumps/ Menstrual Problems		NA
Penile Discharge		✓		Pregnancy		NA
Multiple Partners		✓		Multiple Partners		NA

If "Yes", to any of the above, please explain:

Additional questions :	Yes	No
Have you ever been signed off on medical grounds, declared unfit or repatriated from a ship?		✓
Have you ever been hospitalized?		✓
Have you ever been declared unfit for sea duty?		✓
Has your medical certificate ever been restricted or revoked?		✓
Are you aware that you have any medical problems/diseases or illnesses?		✓
Do you feel healthy and fit to perform the duties of your designated position/occupation?	✓	
Are you currently under a doctor's care/ medication?		✓
Are you allergic to any medications?		✓
Malaria, Typhoid, Viral fever (Dengue, Chikungunya, etc), Chicken Pox		✓
Liver diseases (Hepatitis A,B,C,D & E, Amoebic Abscess)		✓

Arthritis, Spondylosis (Osteoarthritis, Rheumatoid) & Gout		✓
In the last one week have you consumed any of these Drugs/ Medication		✓
Cough Syrup, Sleeping Tablets, Cold, Action 500 etc.		✓
Pain Killers, If Yes, Please State name of Drug Crocin/ Asprin/ Fortwin etc.		✓
Corticosteroids, Anti-epileptic Drugs, Nasal Drops etc.		✓
Any Medicine/ Injections from your family Doctor		✓
To What Extent Do You Use: Alcohol: NONE, Cigarettes: NONE Tobacco: NONE, Drugs: NONE		
Are you taking any non-prescription or prescription medications?		✓
If yes, please list the medications taken and the purpose(s) and dosage(s).		
Date and contact details for previous medical examination (if known):		
Are you coming from or have travelled through high risk areas? If yes, please mention the names of countries that you have been to (including ports of call in your last vessel).		

Family History :	Yes	No
Diabetes		✓
Blood Pressure/ Heart Disease		✓
Mental Illness/ Epilepsy/ Seizure		✓
Cancer		✓
If "Yes", to any of the above, please explain:		

Any other major conditions?

Would you say that your health is: **Excellent** * **Good** * **Fair** *

I MD. SAFAYET HOSSAIN holding Passport/Seaman Book no. G1017561 hereby declare that I have made full disclosure of all of my medical history to the doctors and staff of this clinic. I am aware that the information supplied by me forms the basis upon which I will be offered employment as a seafarer. I understand that in the event of any misrepresentation either by statement or omission I will lose the right to benefit from sick pay and / or compensation which would otherwise be due to me under the Contract of Employment or under any Collective Bargaining Agreement. I also hereby consent to my medical records being made available upon demand to my employers and / or the owners and / or Insurers of the vessel or their authorized representatives. I hereby also certify that the personal declaration above is a true statement to the best of my knowledge and I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to

Dr. MD. RAHMAN (the approved medical practitioner carrying out the medical examinations).

Signature of Examinee:	Safayet	Date(day/month/year):	06 MAR 2023

Height in cms: 180		**Weight in Kg:** 90	**Blood Pressure**	**Systolic** 100 (mmHg)	**Diastolic** 70 (mmHg)
BMI: 27.7		**Temperatures:** 95	**Pulse Rate: Rhythm:**	78b/m	**Respiratory rate** 17
Chest:	**Insp:** 43	**Exp;** 42	**Oral Health**	Normal	**General Condition** Good

Part II – Medical Examination

The Company has set the following BMI limits:
A seafarer with a BMI: 18 or below; or 30 or above is considered temporarily unfit.
For seafarers from Northern Europe, the Indian subcontinent, Russia, Ukraine & Romania with a BMI of between 30 and 35 and where this, in the Government (DGS) approved medical examiner's opinion, is attributable solely to physique with broad shoulders/large muscle bulk with main muscles clearly defined and not obscured by subcutaneous fat and no co-morbid complications (eg. Diabetes, Hypertension, Dyslipidemia etc), then the seafarer in question MUST undergo a stress/ treadmill test.

Radical Hospital Ltd. (As Per MLC 2006) Medical Department

If the results of the stress/ treadmill test are average or above, seafarer can be considered "fit to work", however, the seafarer MUST always be counselled on weight loss and ways/means to improve their health.

BMI MUST also be taken into consideration during the seafarer's pre-employment medical examination and it is the responsibility of each manning centre to instruct their accredited clinic(s) to ensure that a seafarer's BMI is taken during the medical examination, the Company standards applied and if outside the limits, the manning centre must be notified, who will then seek further guidance from the Crewing Dept.

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

Visual fields		
	Normal	Defective
Right eye	✓	
Left eye	✓	

Are glasses or contact lenses necessary to meet the required vision standard? Yes / No

If yes, specify which type and for what purpose:

Colour vision:

Date of last colour vision test:		Type: Book *		Lantern *		Ishihara *		CIE-43-2001 *	
Check if colour test is Normal:	Yellow	*	Red	*	Green	*	Blue	*	
Colour Vision:	Not tested	*	Normal	*	Doubtful	*	Defective	*	

Hearing:

Pure tone and audio metry (threshold values in dB)						
Audiometry	500 Hz	1,000 Hz	2,000 Hz	3,000 Hz	4,000 Hz	6,000 Hz
Right ear	20	20	20	20		
Left ear	20	20	20	20		

Speech and Whisper Test (Meters)		
	Normal	Whisper
Right ear	4	4
Left ear	4	4

Speech (Deck/Navigational Officer): Is speech unimpaired for normal voice communication?

	Normal	Abnormal		Normal	Abnormal
Head	✓		Varicose Veins	✓	
Eyes	✓		Vascular (Inc. Pedal Pulses)	✓	
Eye Movement/Pupils	✓		Abdomen and Viscera	✓	
Ophthalmoscopy	✓		Hernia	✓	
Ears, Tympanic Membrane	✓		Anus (Not Rectal Exam.)	✓	
Sinuses, Nose, Throat	✓		G-U System	✓	
Mouth/Teeth/Gums	✓		Upper & Lower Extremities	✓	
Nervous System	✓		Spine (C/S, T/S and L/S)	✓	
Heart	✓		Neurologic (Full Brief)	✓	
Lung and Chest	✓		Psychiatric	✓	
Breast Examination	✓		Pupils	✓	
Skin	✓		Musculoskeletal System	✓	

Cardiovascular System:

	Normal	Abnormal		Normal	Abnormal
Ischaemic Heart Disease	✓		Hypertension	✓	
Dysrhythmia/ Pacemaker	✓		Congenital Heart Disease	✓	
Valvular Heart Disease	✓		Peripheral Circulation	✓	
Cardiomyopathy	✓		Pulmonary Circulation/ TB	✓	
Aneurysms	✓				

Chest X-ray (PA)	Not performed *				
	Performed * on (day/month/year): 06 MAR 2023		Normal		Abnormal
Result :					

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

Test:	Result:

Investigation:

Blood	Result	Normal
Haemoglobin "Hb"	12 g/dl	13 – 18 gm/ dl
Total WBC count	8730	4,000 - 11,000 / cu.mm
Neu 66 %, Lymp 28 %, Eos 02 %, Bos 0 %, Mob 0 %		
Blood Group & Rh factor (tested only once, need not be repeated)	O+	
BI ESR	1	1 - 15 mm / hr
Platelets	2.640	1.50-4.00 Lakh/ul
Fasting Lipid Profile		
S. Triglycerides	119	25-200 mg/dl
Cholesterol Serum	110	130-220 mg/dl
HDL Cholesterol Serum	41	35-65 mg/dl
LDL Cholesterol Serum	44	85-150 mg/dl
VLDL Cholesterol Serum		07-35 mg/ dl
Total / HDL Cholesterol		3.0-5.0
LDL/ HDL Cholesterol		2.5-3.5

Hepatitis B	Positive	Negative	✓
Hepatitis C	Positive	Negative	✓

Urine	Result
Colour	STRAW
Specific Gravity	1.004
pH	6
Albumin	NIL
Sugar	NIL
Bile Pigment	
Bile Salt	
Occult Blood	
RBC Cells	NIL
Leucocytes	NIL
Stool Test	**Result**
Bacterological	
Parasitical	
Others	

HIV1 &II	NEGIATIVE
VDRL	NEGATIVE

Additional Tests	Result	Normal
(HbA1c)		4.0 % - 6.5 %
RBS/ FBS (Blood test	.	
Total Bilirubin	1.88	0.1 - 1.0 mg/dl
Direct Bilirubin		0.0 - 2.5 mg/dl
Indirect Bilirubin		0.0 - 0.75 mg/dl
SGPT	46	9 - 43 U / L
SGOT	28	0 - 40 IU/L
SGGT		0 - 49 IU/L
Blood Urea	6.4	10 - 50 mg/dl
S. Creatinine	0.68	0.8 - 1.4 mg/dl
BUN	09	5-23mg/dl
PSA	.	Less than 4.00 ng/ml
Malarial Parasite		
Uric Acid		2.4 - 7.5 mg/dl

Drugs: Method:
Results:

Detected	Amphetamines/ Urine *	Barbiturate/ Urine *	Marijuana, THC, Cannabinoids Urine *	Cocaine / Urine *	Opiates & Morphine *
Cut Off Limit	**(1000 ng/ ml)**	**(200 ng/ ml)**	**50 ng/ ml**	**(300 ng/ ml)**	
Not Detected	Amphetamines/ Urine *	Barbiturate/ Urine *	Marijuana, THC, Cannabinoids / Urine *	Cocaine / Urine *	Opiates & Morphine *

Spirometry		TMT		Drugs of Abuse	NEGIATWE
ECG	NORMAL	ECHO		Ultrasound (USG) of the Abdomen & Pelvis	NORMAL

Part III - Result of Medical Examination

Is applicant vaccinated in accordance with WHO requirements: Yes / No

Vaccination status recorded: Yes / No Satisfactory * to be renewed *

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Details:

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

Action taken by medical examiner (e.g. referral):

Examination	Results of the examination		Examination	Results of the examination	
	Pass	Fail		Pass	Fail
Medical History	✓		Fecalysis (food service/ handlers only)	✓	
Physical Examination	✓		Hep B Antigen	✓	
Dental Examination	✓		Hep C Antibodies	✓	
Psychological Test	✓		Stress Test	✓	
Visual Test	✓		Diabetes	✓	
Colour Vision	✓		Ultrasound Examination (Presence of gall & Kidney Stones)	✓	
Audiometry	✓		Alcohol/ Drug Test	✓	
EKG	✓		2D echo Doppler study (for heart patient) Psychometric evaluation	✓	

If failed in any above mentioned examinations and examinations report attached to this form, please provide reasons with examination number:

This examinee is certified free of communicable disease (or viruses for cooks) : Yes / No

I have evaluated the above-named seafarer after establishing his identity as per the documents mentioned above and in compliance with the medical standards of STCW Convention, 1978, as amended, MLC 2006, ILO/IMO/JMS/2011/12- Guidelines on the Medical Examinations of Seafarers and also Merchant Shipping (Medical Examination) Rules by the Government (DGS), as amended from time to time. On the basis of the examinee's history, personal declaration, my clinical examination, the diagnostic test results obtained, and in consideration of the essential requirements of the position applied for, my opinion is –

(a) that the hearing meets the required standards for his / her rank and detect any audible alarms/ Unaided hearing is satisfactory

(b) Visual acuity meets the required standards for his/her rank /Colour Vision meets the required standard (testing only required every 6 years unless considered necessary)/ that he / she if fit / unfit for look out duty

(c) that he / she needs / does not need visual aids / informed to carry spares

(d) that he/she is/is not taking regular medication & seafarer does /does not require to take same during his tenure onboard vessel that he/she is/is not taking any medication that has side effects that will impair judgment, balance, or any other requirements for effective and safe performance of routine and emergency duties onboard?

(e) that the seafarer is not suffering from any disease, medical condition, disorder or impairment which renders him/her that will prevent the effective and safe conduct or likely to be aggravated by, or unfit for, routine and emergency service at sea or likely to endanger the health of other persons onboard ships.

	Deck service	Engine service	Catering service	Other services (training/ examination)
Fit:	*	* ✓	*	*
Unfit:	*	*	*	*

this seafarer is **UNFIT FOR DUTY**/ FIT FOR DUTY with/ without restrictions*** as mentioned below,

* This Medical Certificate is issued with following restrictions (e.g. specific position, type of ship, trade area & other as applicable) :

** Reasons for being unfit

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WALLEM

SEAFARER'S PRE-SEA AND PERIODIC MEDICAL FITNESS EXAMINATIONS CERTIFIED BY AN APPROVED EXAMINER

In accordance with:
STCW Convention, 1978, as amended, MLC 2006,
ILO/IMO/JMS/2011/12 Guidelines on the Medical Fitness Examinations of Seafarers and Merchant Shipping (Medical Examination) Rules of DG Shipping, Govt. of India as amended

(Confidential Document)

Form: OHF 48
Version: 01
Date: 18 Aug 21
Page: 7 of 7

This is to certify MD. SAFAYET HOSSAIN was physically examined and he/she is found to be FIT for sea service/ look-out duty for the period from _____ Place of medical examination RADICAL HOSPITAL LIMITED Date of medical examination: 06 MAR 2023 Uttara, Dhaka, Bangladesh Medical certificate validity date (day/month/year): 05 MAR 2025 Name of Examiner (Please Print):

(Validity should not be more than 2 years)

_____ Degree: _____ Address: _____

_____ Tel./Fax/Email: _____

Name of Medical Examiner/ Physician Certificate /License Issuing Authority:

_____

Date of issue of Medical Examiner/Physician Certificate/ License: _____ Registration No.:

_____

Safayet

Examinee's Signature

(This signature is affixed in the presence of the Medical Examiner

(print name of medical examiner if not legible) and I acknowledge, that I have been advised of the content of the medical certificate & of the right to a review in accordance with paragraph (6) of section A-I/9 of STCW Code and my obligations.)

Date: 06 MAR 2023

Official Stamp & Signature with Govt. (DGS) Approval/ No.....of Medical Examiner

RADICAL HOSPITAL LIMITED
Uttara, Dhaka, Bangladesh

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

Original: Master & Crewing Dept
cc: Seafarer

Remark: This form is to be uploaded in Crew Management System, Medical tab by the Manning centre.