

HAQUE & SONS LTD.

Tel: +880-2-333316214-6, Fax: +880-2-333310530



Accredited By : BMDC Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh.

PATIENT CONTROL NUMBER

H2376

Revision Date: 24th July 2022

Accreditation No. A55144

THE RAGHOBPUR, PABNA SADAR GORSTHAN, 659, PABNA SADAR, PABNA DAR- 6600, PABNA, BANGLADESH Have you ever had any of the following conditions? Condition See Pabna SADAR, PABNA RAGHOBPUR, PABNA SADAR, PABNA RAGHOBPU	ke?	8-751626
PABNA 1-Jan-1996 B00055692 ATIONALITY: BANGLADESHI SEX: Male Female VESSEL TYPE: RMANENT HOME ADDRESS: JTH RAGHOBPUR, PABNA SADAR GORSTHAN, 659, PABNA SADAR, PABNA DAR- 6600, PABNA, BANGLADESH Have you ever had any of the following conditions? Condition 1 Eye/vision problem	CO10388 BULK CARRIER TRADING AREA: W DNTACT NUMBER: 008801678 ANK: ORDINARY: YES ems ke?	8-751626 SEAMAN
ATIONALITY: BANGLADESHI SEX: Male Female VESSEL TYPE: RMANENT HOME ADDRESS: JTH RAGHOBPUR, PABNA SADAR GORSTHAN, 659, PABNA SADAR, PABNA DAR- 6600, PABNA, BANGLADESH Have you ever had any of the following conditions? Condition 1 Eye/vision problem 2 High blood pressure 3 Heart/vascular disease 4 Heart surgery 5 Varicose veins CONDITIONALITY: BANGLADESH VESSEL TYPE: CONDITIONALITY: BANGLADESH VESSEL	BULK CARRIER TRADING AREA: WONTACT NUMBER: 008801678 ANK: ORDINARY: YES ems ke?	8-751626 SEAMAN NO
RMANENT HOME ADDRESS: JTH RAGHOBPUR, PABNA SADAR GORSTHAN, 659, PABNA SADAR, PABNA DAR- 6600, PABNA, BANGLADESH Have you ever had any of the following conditions? Condition See Problem Have you ever had any of the following conditions? Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions? Condition Have you ever had any of the following conditions?	ONTACT NUMBER: 008801678 ANK: ORDINARY: YES ems ke?	8-751626 SEAMAN NO
THE RAGHOBPUR, PABNA SADAR GORSTHAN, 659, PABNA SADAR, PABNA DAR- 6600, PABNA, BANGLADESH Have you ever had any of the following conditions? Condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins	YES ems	SEAMAN NO
Have you ever had any of the following conditions? Condition Eye/vision problem Heart/vascular disease Heart surgery Varicose veins PAR- 6600, PABNA, BANGLADESH YES NO Condition 18 Sleep problem 19 Do you smo 20 Operation/su 21 Epilepsy/sei 22 Dizziness/fa	YES ems	NO
Condition YES NO Condition Sleep problem High blood pressure Heart/vascular disease Heart surgery Varicose veins Condition Sleep problem Heart Sleep problem Do you smoo	ems 🗆 ke?	71005
Condition YES NO Condition 1 Eye/vision problem 2 High blood pressure 3 Heart/vascular disease 4 Heart surgery 5 Varicose veins Condition 18 Sleep proble 19 Do you smo 20 Operation/si 21 Epilepsy/sei 22 Dizziness/fa	ems 🗆 ke?	310000
4 Heart surgery 5 Varicose veins C B 21 Epilepsy/sei. 22 Dizziness/fa	ke?	10
4 Heart surgery 5 Varicose veins C 21 Epilepsy/sei 22 Dizziness/fa	ke?	1.51
4 Heart surgery 5 Varicose veins C B 21 Epilepsy/sei. 22 Dizziness/fa		
4 Heart surgery 5 Varicose veins C B 21 Epilepsy/sei. 22 Dizziness/fa	urgery	
	v.3v.)	9999
		19
6 Asthma/bronchitis □ □ 23 Loss of cons	sciousness 🗆	
H 전에		
	problems \Box	5
9 Thyroid problem 26 Attempted s	ALC:	9
10 Digestive disorder 27 Loss of men	93250900	
11 Kidney problem 28 Balance pro		9
12 Skin problem 29 Severe head		<u> </u>
	roat problems	
14 Infectious/contagious diseases	100000000000000000000000000000000000000	19
15 Hemia 🗆 🗗 32 Back proble		9
16 Genital disorders 🗆 🖃 33 Amputation		0
17 Pregnancy APA 34 Fractures/di	slocations	U
35 Have you ever been signed off as sick or repatriated from a ship?	YES	NO
36 Have you ever been hospitalised?		1
37 Have you ever been declared unfit for sea duty?		19
38 Has your medical certificate ever been restricted or revoked?	0	0
39 Are you aware that you have any medical problems, diseases or illnesses?		0
40 Do you feel healthy and fit to perform the duties of your designated position	n/occupation?	
[18] - [18] [18] [18] [18] [18] [18] [18] [18]		4
Comments		
FIT FOR DUTY ON BOARD SHIP		
42 Are you taking any non-prescription or prescription medications?	0	T
If yes, please list the medications taken and the purpose(s) and dosage(s)	Æ.	
42 Are you taking any non-prescription or prescription medications? If yes, please list the medications taken and the purpose(s) and dosage(s)		horities

-		The same of the sa	sual acuity				17	٧	isual field	5
-	Right eye	Unaided e Left eye	Right ey	Aide	d Left eye			Normal		Defective
Distant	616		ruginoj	_	Lon ojo	Right	eve			(C. 1150-10)
Near	- (Lefter		_		5
Visual acuity m	eets the s	standard laid do	wn in STCW Co	ode Se	ction A-1/9					
Colour vision a	s per STC	CW CODE Secti	on A-I/9:		lormal	☐ Doubt	ful [Defec	ctive	
Date of last col	lour vision	test: Date (day	/month/year) _	5 M/	AY 2023					
			Normal Ab	norma	al				Norma	l Abnorma
Head			G-			cose veins				
Sinuses, nose,	throat		D.			cular (inc. pedal	nulses)			the state of the s
Mouth/teeth	unout		TT'			omen and visce	2.0			
Ears (general)					Hem		· u		19	
Tympanic men						 s (not rectal exa	m)			
Eves			П			system	/			
Opthalmoscopy	v			0		er and lower ex	tremities			
Pupils	*					e (C/S, T/S and				
Eye movement			11-11-11			rologic (full brief				0
Lungs and che			17	D		chiatric	,			
Breast examina			arra-		77.75	anauric eral appearance			70 R990R98	
Heart	arui I		1		Skin	Contract to the second	5.0			
		anerweek	1 1000	- T. S.	OMI				N. S.	
	ICILLARY	EXAMINATION			i i			100/10		Alcono - No
Chest X-Ray		MM	BIO CHEMIC	CAL (L	IVER FUN	CTION TEST)	Marijuana			☐ Negative
ECG		mo	BILIRUBIN		0	7	Alcohol Test	I	☐ Positive	☐ Negative
E	BLOOD R	É	SGPT		N.	E	URINE R/E	- 115	7	MO
DC(differential	count)	M	SGOT		Z	6		OT	HERS	
HAEMOGLOBI	IN (HGB))	14.2	DRU	G AND	ALCOHO	LTEST	HBsAg	1	Reactive	Nonreacti
ESR (WESTER	RGREN)	07	Morphine	1	Positive	☐ Negative	HIV / AIDS Te	st [Reactiv	Nonreacti
WBC		2.800	Amphetamine	1	Positive	☐ Negative	VDRL			Nonreacti
BLOOD	GLUCOS		Phencyclidine	_	Positive		Blood Type		Bi	HVE)
RANDOM		5.2	Barbiturates	1	Positive	☐ Negative	Psychological	Exam	N	mo
HBA1C		4.5%	Cocaine	1	Positive	☐ Negative	Others(KUB U		N	IE
abu I daglara th	at Lamin	knowledge of the	a contents of t	ha Dh	union ovam	inations:			- V.	
			ie contents of t						0 5 M	AY 2023
Vajmus		D		1		AKIB NAHID				
nature of Seafa	rer				Name of	Seafarer				Date
sessment of fit	examine	e's personal dec	claration, my cli		xamination	U.S. 1271 (A. 1000 (A	stic test results of Not fit for			eclare the
	у:		k service		Engine so	ervice	Catering ser	vice	Ot	her services
minee medicall	у:					9-33		vice	Ot	
minee medicall	у:					9-33	-10	vice	Ot	0
the basis of the minee medically	у:					9-33	-10	vice	Ot	0
fit he Seafarer free danger the healt scribe restriction	Without e from any th of other ns (e.g., s)	restrictions redical condit persons on box	ions likely to be ard? Yes type of ship, tra	} E	With	restrictions	-10	afarer u	3	service or to
fit he Seafarer freedanger the healt	Without e from any th of other ns (e.g., s)	restrictions redical condit persons on box pecific position, miner (e.g., refe	ions likely to be ard? Yes type of ship, tra	aggra	With	restrictions	to render the se	afarer u	nfit for such	service or to
it he Seafarer free langer the healt	Without e from any th of other ns (e.g., s)	restrictions redical condit persons on box	ions likely to be ard? Yes type of ship, tra	aggra	With No Deal:	restrictions	to render the se	afarer u	nfit for such	service or to
it Seafarer free langer the healt scribe restriction taken by me	Without e from any th of other ns (e.g., s)	restrictions redical condit persons on box pecific position, miner (e.g., refe	ions likely to be ard? Yes type of ship, tra	aggra	With No Deal:	restrictions ervice at sea or	to render the se	afarer u	nfit for such	service or to
fit the Seafarer free danger the healt scribe restriction taken by me	Without e from any th of other ns (e.g., s)	restrictions redical condit persons on box pecific position, miner (e.g., refe	ions likely to be ard? Yes type of ship, tra	aggra	With No Deal:	restrictions ervice at sea or	to render the se	afarer u	nfit for such	service or to

PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

THE REPUBLIC OF LIBERIA

BLOOD PRESSURE	BANGLADESH COUNTRY MAILING ADDRESS OF APP SOUTH RAGHOBPUR, PAB PABNA SADAR, PABNA SAD E FOR MEDICAL REQUIREMENTS: PULSE RESPIRATION 1937	SAKIB SEX MALE FEMALE LICANT: ENA SADAR GORSTHAN, 659, DAR- 6600, PABNA, BANGLADESH STATE DETAILS ON REVERSE SIDE GENERAL APPEARANCE
1996 PABNA YEAR CITY AS: RATING MOU DECK MOU ENGINE SUPERNUMERARY TION (SEE REVERSE SID BLOOD PRESSURE	BANGLADESH COUNTRY MAILING ADDRESS OF APP SOUTH RAGHOBPUR, PAB PABNA SADAR, PABNA SAD PABNA SADAR, PABNA SAD FOR MEDICAL REQUIREMENTS: PULSE RESPIRATION 1934	MALE FEMALE LICANT: INA SADAR GORSTHAN, 659, DAR- 6600, PABNA, BANGLADESH STATE DETAILS ON REVERSE SIDE
YEAR CITY AS: RATING MOU DECK MOU ENGINE SUPERNUMERARY TION (SEE REVERSE SID BLOOD PRESSURE	COUNTRY MAILING ADDRESS OF APPLIED SOUTH RAGHOBPUR, PAB PABNA SADAR, PABNA SAD E FOR MEDICAL REQUIREMENTS: PULSE RESPIRATION 1934	LICANT: NA SADAR GORSTHAN, 659, DAR- 6600, PABNA, BANGLADESH) STATE DETAILS ON REVERSE SIDE
RATING MOU DECK MOU ENGINE SUPERNUMERARY TION (SEE REVERSE SID BLOOD PRESSURE [10/80 mmm]	MAILING ADDRESS OF APPLICATION MAILING ADDRESS OF APPLICATION PABNA SADAR, PABNA	LICANT: NA SADAR GORSTHAN, 659, DAR- 6600, PABNA, BANGLADESH) STATE DETAILS ON REVERSE SIDE
RATING MOU DECK MOU ENGINE SUPERNUMERARY TON (SEE REVERSE SID BLOOD PRESSURE	SOUTH RAGHOBPUR, PAB PABNA SADAR, PABNA SAD E FOR MEDICAL REQUIREMENTS: PULSE RESPIRATION 1934	NA SADAR GORSTHAN, 659, DAR- 6600, PABNA, BANGLADESH STATE DETAILS ON REVERSE SIDE
MOU DECK MOU ENGINE SUPERNUMERARY TION (SEE REVERSE SID BLOOD PRESSURE	PABNA SADAR, PABNA SAU E FOR MEDICAL REQUIREMENTS: PULSE RESPIRATION 193/	DAR- 6600, PABNA, BANGLADESH STATE DETAILS ON REVERSE SIDE
MOU ENGINE SUPERNUMERARY TON (SEE REVERSE SID BLOOD PRESSURE	e FOR MEDICAL REQUIREMENTS:	STATE DETAILS ON REVERSE SIDE
SUPERNUMERARY TION (SEE REVERSE SID BLOOD PRESSURE IN UNIT MANY	PULSE RESPIRATION 193/	
BLOOD PRESSURE	PULSE RESPIRATION 193/	
BLOOD PRESSURE	PULSE RESPIRATION 193/	
110/80 mmy	785min 193/	GENERAL APPEARANCE
1110/00	78 min 193/	
IGHT EYE LI		in awar
6/6 / 6	EFT EYE	
9/ 0	116	
1		
ON TEST (Month/Day/Year)	N 5 MAY 2023 Testing Requ	nired every 6 years
NDARDS IN STCW CODE, T		NO \square
		Total and the second se
NTERN " CHECK IF COLOR TI	EST IS NORMAL. YELLOW MY	RED MYGREEN MY BLUE W
000	LEFT YEAR	~~~
Nonmil	inanti (cinaro riaconin)	Nonmi
1 .		
Manund	IS SPEECH UNIMPAIRED FOR NO	RMAL VOICE COMMUNICATION
	- 1	1
		Manna
HEALTH OF OTHER PERS	ONS ON BOARD? IF TES, EXPLAIN IN	, DETAILS OF MEDICAL EXAMINATION ON
5 Sakib	0 5 MAY 2023	0 4 MAY 2025
PPLICANT	DATE OF EXAM	EXPIRY DATE
TURE SHOULD BE AFFIXE	D IN THE PRESENCE OF THE EXAMINI	NG PHYSICIAN.
A PHYSICAL EXAMINATIO	N WAS GIVEN TO:	AJMUS SAKIB NAHID
	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	APPLICANT)
		ADIO OFFICER, RATING, MOU DECK, MOU
		ATT
PHYSICIAN DR. MIE	R MD . RAIHAN : M.B.B.S (D.U), RE	G.NO.A-55144
DSPITALS LIMITED, 35, 8	HAH MAKHDUM AVENUE, SECTOR-	12, UTTAKA, DHAKA-1230, BANGLADES
ERTIFICATING AUTHO	RITY DG SHIPPING, BANGLADES	Н
ICIAN'S CERTIFICATE	6-May-14	The same of the sa
1/2	- DATE OF EVAN	41NATION: 0 5 MAY 2023
AN TO	DATE OF EXAM	ination,
authority of the Deputy Co	mmissioner of Maritime Affairs, R.L. ar	nd in compliance with the requirements of t
Maritime Labour Conve	ntion, 2006 for the Medical Examinatio	n of Seafarers.
		nination for those over 18 years of age and
	one (1) year for those under 18 years of	age.
DR. MIR. MD. MBBS (DU), DFM, CCD (Bird	om) PCT (Onbth)	50 JE
BMDC A-55144, MM	C-RCD 046	* (As Par All Grann) +
DG Shipping Banglade	and A	183
E C C C C C C C C C C C C C C C C C C C	FROM ANY DISEASE LIKES E HEALTH OF OTHER PERS S SAKIB APPLICANT TURE SHOULD BE AFFIXE A PHYSICAL EXAMINATIO FIT FOR DUTY RY). PHYSICIAN DR. MILE OSPITALS LIMITED, 35, S CERTIFICATING AUTHO SICIAN'S CERTIFICATE AN authority of the Deputy Co Maritime Labour Conve II be valid for no more than	HEART (CARDIOVASCULAR) SPEECH (DECK/NAVIGATIONAL IS SPEECH UNIMPAIRED FOR NO SPEECH UNIMPAIRED

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 at (c) 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.
- (c) 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.

2. 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

0 5 MAY 2023

RLM-105M (REV. 06/16)



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





Id No : 0153

Date: 05-May-2023

D.Date: 05-May-2023

Patient's Name: NAJMUS SAKIB NAHID

Age: 27Y 4M 4D

Gender: Male

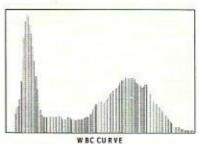
Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO: C/O/ 10388

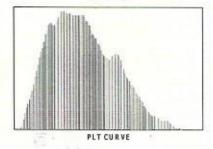
Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb) ESR(Westergreen)	14.2 gm/dl 07 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)	8,800 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		3,111
Neutrophils	67 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	29 %	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	176 /cumm	50-450/cumm
Total RBC Count	4.74 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	38.5 %	M: 40-54%, F:37-47%
MCV	81.2 fL	76 - 94 fL
MCH	30.0 pg	27 - 32 pg
MCHC	36.9 g/dL	29 - 34 g/dL
RDW	13.6 %	11 - 16 %
PDW	12.1 fL	35 - 56 fl
Total Platelete Count (PC)	2,02,000 /cumm	150,000-450,000/cumm
MPV	12.4 fL	7.0 - 11.0 fL
PCT	0.126 %	0.1 - 0.%



RBCCURVE



214

Checked By Medical Technologist d

Dr. Sumaiya Khatun MBBS,MD(Gold Medalist) (BSMMU) Associate Professor Dept. Of Microbiology

East West Medical College & Hospital.



Bill No	DIA23050153	Received Date 05/05/202		2023	
Patient's Name	NAJMUS SAKIB NAHID		Duto	00/00/2	-020
Patient's Age	27Y 4M 4D	F	atient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT((Eye),DFM	С	DC NO	C/O/ 10388
Sample	BLOOD				2.3.10300

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.2 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.7 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	26 U/L	Up to 37 U/L
HbA1C	4.5 %	4.2 - 6.7 %

IN VIEW OF THE LIVER FUNCTION TEST RESULT, HIS BLOOD IS FREE FROM TOXIC EFFECT OF CHEMICALS

Checked By

Medical Technologis Radical Hospitals Ltd. r Sumaiva V

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



Bill No	DIA23050153	Received	Date	05/05/2	2023
Patient's Name	NAJMUS SAKIB NAHID				OSPANIE NO CA
Patient's Age	27Y 4M 4D	F	atient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM	I),PGT(Eye),DFM	С	DC NO	C/O/ 10388
Sample	BLOOD	a cur-			

SEROLOGYCAL REPORT

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

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

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	DIA23050153	Received Date 05/05/20		2023	
Patient's Name	NAJMUS SAKIB NAHID				
Patient's Age	27Y 4M 4D		Patient's	Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),	PGT(Eye),DFM	1 C	DC NO	C/O/ 10388
Sample	URINE				

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	Pus Cells	2-3/HPF
Sediment	Nil	Epithelial	0-2/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



REF: MV. OSAKA STAR DATE: 05/05/2023

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

EYE EXAMINATION REPORT

NAME: NAJMUS SAKIB NAHID RANK: D/CDT CDC NO: C/O/10388

VISUAL ACUITY:

RIGHT

LEFT

616.

UNAIDED

616

AIDED

COLOUR VISION:

NORMAL / BLIND

OPINION

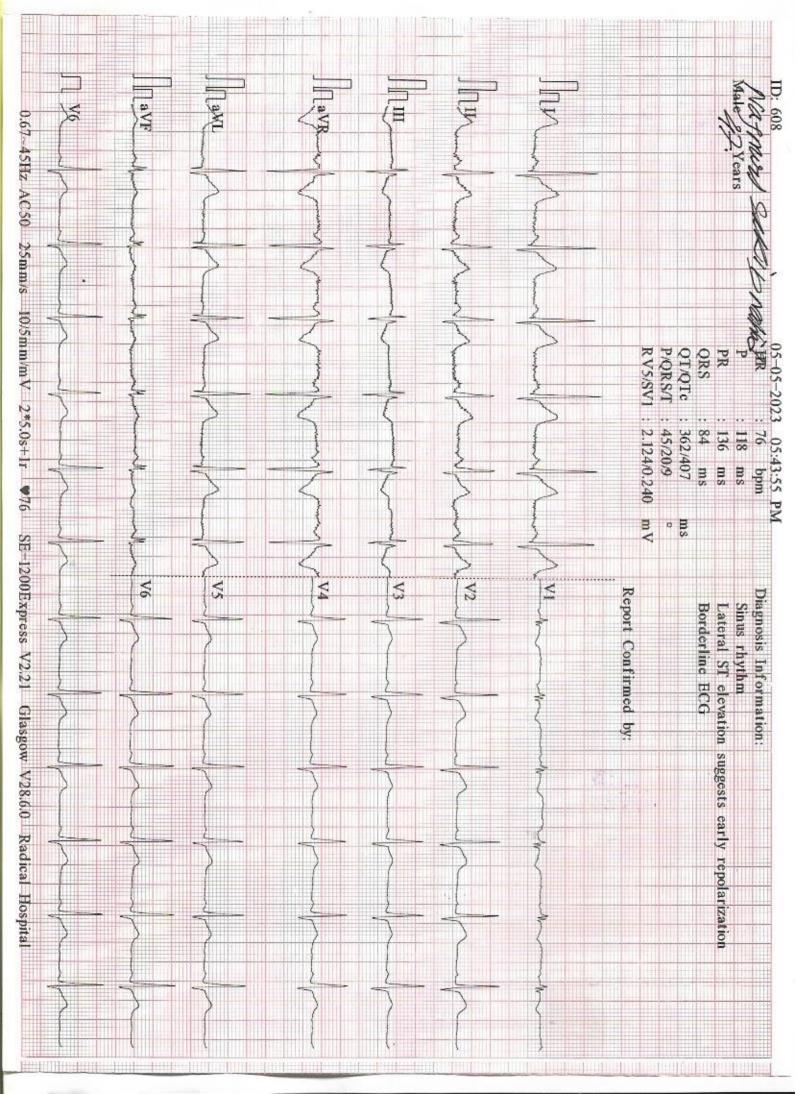
UNFIT / FIT FOR EMPLOYMENT ON BOARD

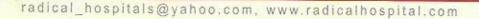
Dr. Mir Md. Raihan

MBBS, PGT (Ophthalmology)

Assistant Registrar (EX)

East west Medical College & Hospital







DEPARTMENT OF RADIOLOGY & IMAGING

Receive:05/05/2023 Print: 05/05/2023 ID. No. 23050153

Patient's Name NAJMUS SAKIB NAHID

Age 27 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

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that whose signature follows Date of birth 01-01-96 Sex MALE

Najmus Sakib

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
SEP 20-	DR. SABRINA MOSTAFA MBBS (D.U) Reg. No. BMDC Bheka A-68208 Seafarer's Medical Practitioner Approved by D C Shioping, Dhaka	STOR VACCIONAL STORM OF STREET	
"5M, U.3 8EP	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 Elmited.	SS, Shah Malabelan Aventas Uttern, Dhalta	
3	~	3	4
4			
5		5	6
6	*,		
7		7	8
8			(b)

Continued overleaf Suite our erso

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER the approved stump mentioned

This is to certify that whose signature follows of many vaccination or, in the event of revaccination on the date of that

Date of birth 01-01-1996

The Validity of this certificate sha Nojune a Soriphree years, beginning eight days after

has on the date indicated been vaccinated or revaccinated against yellow-fever

Date	Signature and Professional status of vaccinator	Origin and batch no, of vaccine	Official stamp of vaccination centre
150 3m	DR. SABRINA MOSTAFA MBBS (D.U) Reg. No. BMDC, Dhaka A-68208 Seafarer's Medical Practitioner Approved by, D.G. Shipping, Dhaka	1313 CO DAKAR	1 2
SEP	case for	* NO	* SANGLASE
2 40		(St. The section) 78)	
3	Seature of Motorsk Practitioner Approved by Jud Techniq, Draw,		34
4	DR. SABRINA MOSTAFA Mest 10 m	(aneco)	

This certificate is valid on only if the vaccine used has been approved by the World Health Organization and if the vaccinating centre has been designated by the 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 ten days after date vaccination or in the extent of a revaccination within such period of ten years, from the date of that revaccination. 91-01-08 MUTE

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