



## HAQUE & SONS LTD.

MEDICAL EXAMINATION CERTIFICATE



• DNV

Accredited By : BMDC Accreditation No. A 55144

PATIENT CONTROL NUMBER: H472

Revision Date: 24th July 2022

## Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh. Tel: +880 31 716214-6, Fex: +880 31 710530

| JRNAME  | 110  | FIRST N  |  | OF SEC.  |                            | MIDDLE NAME  |                                       |              |
|---|--|--|--|--|----------------------------|--|---------------------------------------|--------------|
|   | MONDOL   |  | PUL  | AK   |                            |  |                                       |              |
| SATKHI  |  | PASSPO   | ORT NUMBER   |  |                            | SEAMAN'S BO  | C/O/7326                              |              |
| ATIONALIT   |  | ☑ Male   | ☐ Female   | VESSEL   |                            |  | ADING AREA: W                         | ORLD WID     |
| RMANENT   | FHOME ADDRESS :  |  |  |  | CONTA                      | CT NUMBER :  | 01923-396898                          | (SELF), 0    |
| L: NARIKA   | LY, P.O: SAKHIPUR, THANA:  | DEBHATA,   | DIST: SATKH  | IRA.   | RANK                       |  | 2ND OF                                | FICER        |
| Have you e  | ever had any of the following con  | ditione?   |  |  |                            | 61   |                                       |              |
|   | ere ridd dify of the following con   | didona:  |  |  |                            |  |                                       |              |
| Ç   | ondition   | YES  | NO/  | Con  | dition                     |  | YES                                   | NO           |
| 1 E   | ye/vision problem  |  | 101  | 18 Sleep   | p problems                 |  |                                       | AN           |
|   | igh blood pressure   |  | 1/   | 19 Doy   | ou smoke?                  |  |                                       | Z/           |
| 3 H   | eart/vascular disease  |  | 1  |  | ation/surgery              | 1  |                                       | de           |
| 4 H   | eart surgery   |  | 1  |  | psy/seizures               |  |                                       | 0/           |
| 5 Va  | aricose veins  |  | 14   |  | ness/fainting              |  |                                       | K/           |
| 6 As  | sthma/bronchitis   |  | /4/  | 23 Loss  | of conscious               | sness  |                                       | AX           |
| 7 BI  | lood disorder  |  | 4  | 24 Psyc  | hiatric proble             | ms   |                                       | 16           |
| 8 Di  | iabetes  |  | 1  |  | ession                     |  |                                       | 0/           |
| 9 Tr  | nyroid problem   |  | 1  | 26 Atten   | npted suicide              |  |                                       | 0            |
| 10 Di   | igestive disorder  |  | 1/1  |  | of memory                  |  | D                                     | 6/           |
| 11 Ki   | dney problem   |  | 1  |  | nce problem                |  |                                       | 6/           |
| 12 SI   | kin problem  |  | 14   |  | re headache                | s  |                                       | 6/           |
| 13 AI   | lergies  |  | de   | 30 Ear/r   | nose/throat p              | roblems  |                                       | 161          |
| 14 In   | fectious/contagious diseases   |  | Pr   |  | ricted mobility            |  |                                       | to.          |
| 15 He   | emia   |  | 6  |  | problems                   |  |                                       | .0/          |
| 16 G  | enital disorders   |  | A  |  | utation                    |  | 0                                     | 61           |
| 17 Pr   | regnancy   |  | NA   |  | ures/dislocat              | ions   | - 0                                   | X            |
|   |  |  |  |  |                            |  | YES                                   | NO           |
|   | ave you ever been signed off as  |  | itriated from a :  | hip?   |                            |  |                                       | 2            |
| 36 Ha   | ave you ever been hospitalised?  |  |  | ship?  |                            |  |                                       |              |
| 36 Ha   | ave you ever been hospitalised?<br>ave you ever been declared unfit  | t for sea dut  | y?   |  |                            |  | - 0                                   |              |
| 36 Ha<br>37 Ha<br>38 Ha   | ave you ever been hospitalised?<br>ave you ever been declared unfit<br>as your medical certificate ever b  | t for sea dut<br>been restrict   | y?<br>ted or revoked?  |  | ?                          |  | - 0                                   |              |
| 36 Ha<br>37 Ha<br>38 Ha<br>39 Ar  | ave you ever been hospitalised?<br>ave you ever been declared unfit<br>as your medical certificate ever b<br>e you aware that you have any r   | t for sea dut<br>been restrict<br>medical prob   | y?<br>ted or revoked?<br>blems, disease  | s or illnesse  |                            | unition?   | - 0                                   | 1            |
| 36 Ha<br>37 Ha<br>38 Ha<br>39 Ar<br>40 Do   | ave you ever been hospitalised?<br>ave you ever been declared unfit<br>as your medical certificate ever b<br>re you aware that you have any r<br>o you feel healthy and fit to p   | t for sea dut<br>been restrict<br>medical prob<br>erform the   | y?<br>ted or revoked?<br>blems, disease  | s or illnesse  |                            | upation?   |                                       | 00000        |
| 36 Ha<br>37 Ha<br>38 Ha<br>39 Ar<br>40 Do<br>41 Ar  | ave you ever been hospitalised?<br>ave you ever been declared unfit<br>as your medical certificate ever be<br>we you aware that you have any ro<br>you feel healthy and fit to po<br>e you allergic to any medications   | t for sea dut<br>been restrict<br>medical prob<br>erform the   | y?<br>ted or revoked?<br>blems, disease  | s or illnesse  |                            | upation?   | - 0                                   | 40 dods      |
| 36 Ha<br>37 Ha<br>38 Ha<br>39 Ar<br>40 Do<br>41 Ar  | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever b te you aware that you have any r to you feel healthy and fit to p te you allergic to any medications   | t for sea dut<br>been restrict<br>medical prob<br>erform the<br>s?   | y?<br>ted or revoked?<br>blems, disease:<br>duties of your   | s or illnesse<br>designated  |                            | upation?   |                                       | 400000       |
| 36 Ha<br>37 Ha<br>38 Ha<br>39 Ar<br>40 Do<br>41 Ar<br>Comments  | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever be you aware that you have any re you feel healthy and fit to pe you allergic to any medications   | t for sea dut<br>been restrict<br>medical prob<br>erform the<br>s?<br>OR DUTY  | y? ted or revoked? blems, disease duties of your   | s or illnesse<br>designated  |                            | upation?   |                                       | 40000        |
| 36 Ha<br>37 Ha<br>38 Ha<br>39 Ar<br>40 Do<br>41 Ar<br>Comments  | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever b te you aware that you have any r to you feel healthy and fit to p te you allergic to any medications   | t for sea dut<br>been restrict<br>medical prob<br>erform the<br>s?<br>OR DUTY<br>n or prescrip   | y? ted or revoked? blems, disease duties of your  CN BOAR  | s or illnesse<br>designated<br>D SHIP  |                            | upation?   |                                       | A GOODS      |
| 36 Ha<br>37 Ha<br>38 Ha<br>39 Ar<br>40 Do<br>41 Ar<br>Comments  | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever be you aware that you have any r you feel healthy and fit to pe you allergic to any medications  FIT FO  e you taking any non-prescription   | t for sea dut<br>been restrict<br>medical prob<br>erform the<br>s?<br>OR DUTY<br>n or prescrip   | y? ted or revoked? blems, disease duties of your  CN BOAR  | s or illnesse<br>designated<br>D SHIP  |                            | upation?   |                                       | A GOODS      |
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| 36 Ha 37 Ha 38 Ha 39 Ar 40 Do 41 Ar Comments:  42 Ar If yes, please I hereby au to Dr. Mir M disqualify m | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever b te you aware that you have any r to you feel healthy and fit to p te you allergic to any medications  FIT F( the you taking any non-prescription the list the medications taken and thorize the release of all my previous taken and the provided of the p | t for sea dut<br>been restrict<br>medical prob<br>erform the<br>s?<br>OR DUTY<br>n or prescrip<br>t the purpos<br>vious medica<br>actioner) I a                | y? ted or revoked? blems, disease duties of your  CN BOAR ption medication ie(s) and dosag al records from also certify that                             | s or illnessedesignated  D SHIP  ns? ns? ne(s)   | position/occu              | s, health institutio   | ons and public auth                   | orities      |
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| 36 Ha 37 Ha 38 Ha 39 Ar 40 Do 41 Ar Comments  42 Ar f yes, pleas hereby au o Dr. Mir M disqualify m       | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever b re you aware that you have any r ro you feel healthy and fit to p re you allergic to any medications  FIT FO  re you taking any non-prescription se list the medications taken and thorize the release of all my prev rid. Raihan (approved medical prine from my employment, benefits  Signature of Seafarer MINATION   | t for sea dut<br>been restrict<br>medical prob<br>erform the of<br>s?  OR DUTY  In or prescript<br>of the purpose  | y? ted or revoked? blems, disease duties of your  CN BOAR ption medication ie(s) and dosag al records from also certify that                             | D SHIP  D SHIP | professional contained ab  | s, health institutio   | ons and public auth                   | orities      |
| 36 Ha 37 Ha 38 Ha 39 Ar 40 Do 41 Ar Comments  42 Ar f yes, please hereby au o Dr. Mir M disqualify m      | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever b re you aware that you have any r ro you feel healthy and fit to p re you allergic to any medications  FIT FO  re you taking any non-prescription se list the medications taken and thorize the release of all my prev rid. Raihan (approved medical prine from my employment, benefits  Signature of Seafarer MINATION   | t for sea dut<br>been restrict<br>medical prob<br>erform the of<br>s?  OR DUTY  In or prescript<br>of the purpose  | y? ted or revoked? blems, disease duties of your  CN BOAR ption medicatio e(s) and dosag al records from also certify that s.                            | s or illnessedesignated  D SHIP  ns?  ns(s)  any health my history of  | professional contained abo | s, health institutio   | ons and public authry false statement | orities      |
| 36 Ha 37 Ha 38 Ha 39 Ar 40 Do 41 Ar Comments:  42 Ar If yes, please I hereby au to Dr. Mir M disqualify m | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever b e you aware that you have any r o you feel healthy and fit to p re you allergic to any medications  FIT FO  e you taking any non-prescription se list the medications taken and thorize the release of all my prev red. Raihan (approved medical pro- refrom mylemployment, benefits  Signature of Seafarer  MINATION  Hearing by Audiometry   | t for sea dut<br>been restrict<br>medical prob<br>erform the of<br>s?  OR DUTY  In or prescript<br>of the purpose  | y? led or revoked? blems, disease duties of your  CN BOAR ption medicatio le(s) and dosag al records from also certify that s.  Blood Pressur            | s or illnessedesignated  D SHIP  ns?  ns(s)  any health my history of  | professional contained ab  | s, health institution ove is true and an   | ons and public authry false statement | orities      |
| 36 Ha 37 Ha 38 Ha 39 Ar 40 Do 41 Ar Comments  42 Ar f yes, please hereby au o Dr. Mir M disqualify m      | ave you ever been hospitalised? ave you ever been declared unfit as your medical certificate ever be the you aware that you have any rip to you feel healthy and fit to pre you allergic to any medications.  FIT FC  The you taking any non-prescriptions is list the medications taken and thorize the release of all my previous from my employment, benefits  Signature of Seafarer  MINATION  Height (cm)  Hearing by Audiometry  Adequate Inadequate   | t for sea dut<br>been restrict<br>medical prob<br>erform the<br>s?<br>OR DUTY<br>n or prescrip<br>I the purpos<br>vious medica<br>actioner) I as<br>and claims | y? led or revoked? blems, disease duties of your  CN BOAR ption medicatio le(s) and dosag al records from also certify that s.  Blood Pressur Audiometry | s or illnessedesignated  D SHIP  ns?  ns(s)  any health my history of  | professional contained ab  | s, health institution ove is true and an Diastolic Ingression of the Diastolic Ingress | ins and public authry false statement | orities will |

| Distant Near Near Near Near Near Near Near Near  |   | 11   |  | sual acuity         | AVA        | -             |                |  |   | Visual fiel                             | ds            |
|--|---|--|--|---------------------|------------|---------------|----------------|--|---|---|---------------|
| Distant   Near   West   |   |  |  | Right               |            | -             | -              |  | Normal  | 1                                       | Defective     |
| Normal   Normal   Normal   Doubtful   Defective  | Distant   | 1/16   | 2/2  | Right               | · jc       | Len eye       | Right          | euo  |   | -                                       | A MANAGEMENT  |
| Visual acuity meets the standard laid down in STCW Code Section A-1/9  Colour vision as per STCW CODE Section A-1/9:   |   | 000  | Con  |                     |            |               |                |  | /   |   | 97            |
| Date of last colour vision test: Date (day/month/year) 12./MAY ./2023    Date of last colour vision test: Date (day/month/year) 12./MAY ./2023    Normal   Abnormal  |   | y meets the stan   | idard laid do  | wn in STCW (        | Code Se    | ction A-1/9   | XES I          | NO   |   |   | J. Warren     |
| Head   Varicose veins   Vascular (inc. pedal pulses)   Vascula | Colour visio  | n as per STCW  | CODE Secti   | on A-I/9:           |            | ormal         |                |  | □ Defe  | ctive                                   |               |
| Head   Varicose veins   Vascular (inc. pedal pulses)   Vascula |   |  |  |                     |            |               |                |  |   |   |               |
| Sinuses, nose, throat    Vascular (inc. pedal pulses)  |   |  |  | Normal A            | bnorma     | al            |                |  |   | Norm                                    | al/Abnorma    |
| Mouth/teeth Ears (general)  Fars (general)  Fympanic membrane  Eyes  Opthalmoscopy  Upper and lower extremities  Upper and lower extremities  Spine (C/S, T/S and L/S)  Spine  |   |  |  | 2/2                 |            |               |                |  |   | M                                       | 10 0          |
| Ears (general)  Tympanic membrane Eyes  Opthalmoscopy  Opthalmoscopy  Upper and lower extremities  Opthalmoscopy  Upper and lower extremities  Spine (C/S, T/S and L/S)  Eye movement  Lungs and chest  Breast examination  Heart  Breast examination  Dreast examination  Heart  Breast examination  Heart  Breast examination  Breast examination  Breast examination  Heart  Breast examination  Breast ex |   |  |  | 2/                  |            |               |                |  |   | X                                       | // -          |
| Tympanic membrane  Eyes  G-U system  Upper and lower extremities  Spine (C/S, T/S and U/S)  Pupils  Eye movement  Lungs and chest  Breast examination  Heart  Broast examination  Heart  Blo CHEMICAL (LIVER FUNCTION TEST)  BLOOD R/E  |   |  |  | 11                  |            |               | en and visce   | га   |   | 20                                      |               |
| Eyes Opthalmoscopy Upper and lower extremities Upper and lower extremities Spine (C/S, T/S and US) Upper and lower extremities Upper and U |   |  |  | 71                  |            |               |                |  |   | N                                       | 1 0           |
| Opthalmoscopy Pupils Spine (C/S, T/S and L/S) Eye movement Lungs and chest Breast examination Heart Breast examination He |   | nembrane   |  | 7,                  |            | Anus (        | not rectal exa | m)   |   | 9                                       | , 0           |
| Pupils Eye movement Lungs and chest Breast examination Heart  Spine (C/S, T/S and L/S) Neurologic (full brief) Psychiatric General appearance Skin  SulTS OF ANCILLARY EXAMINATIONS  Chest X-Ray BIO CHEMICAL (LIVER FUNCTION TEST) Marijuana Destrict | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                                     |  |  | 19.                 |            | G-U sy        | stem           |  |   | 6                                       |               |
| Pupilis  Eye movement Lungs and chest Breast examination Heart  Breast examination Heart  Broad Examination  Broad Heart  Broad Hear | Opthalmoso  | ору  |  | 19                  |            | Upper         | and lower ext  | remities   |   | 6,                                      | / 0           |
| Eye movement Lungs and chest Breast examination Heart  Breast examination Heart  BIO CHEMICAL (LIVER FUNCTION TEST) Marijuana ECG BIURUBIN Alcohol Test Desitive BLOOD R/E SGPT URINE R/E  DC(differential count) HAEMOGLOBIN (HGB) DRUG AND ALCOHOL TEST) HBSAG ESR (WESTERGREN) Morphine Positive BLOOD GLUCOSE LEVEL Phencyclidine BLOOD GLUCOSE LEVEL Phencyclidine Positive Desitive Des | Pupils  |  |  | 19                  |            |               |                |  |   | 6                                       | / 0           |
| Lungs and chest Breast examination Heart    Psychiatric   General appearance   Skin  | Eye movem   | ent  |  | de                  |            |               |                |  |   | 1                                       | / 0           |
| Breast examination Heart  General appearance Skin  General appearance Sporting | Lungs and o   | chest  |  | 10-                 |            |               |                | 0  |   | V                                       | 1 0           |
| Skin      |   |  |  | NAT                 |            |               |                | 1  |   | N                                       | 1             |
| ESULTS OF ANCILLARY EXAMINATIONS  Chest X-Ray  BIO CHEMICAL (LIVER FUNCTION TEST)  Marijuana  Positive Negative  BLOOD R/E  SGPT  DC(differential count)  HAEMOGLOBIN (HGB)  DRUG AND ALCOHOL TEST  HBSAG  Reactiv Nonre  BLOOD GLUCOSE LEVEL  Phencyclidine  Positive Negative  BLOOD GLUCOSE LEVEL  Phencyclidine  Positive Negative  Blood Type  Barbiturates  Positive Negative  Positive Negative  Positive Negative  Posychological Exam  HBA1C  PULAK MONDOL  Name of Seafarer  Date  Date  Desement of fitness for service at sea:  the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the minee medically:   | Heart   |  |  | /"2/                |            |               | - approarance  | •  |   | - D                                     |               |
| BIO CHEMICAL (LIVER FUNCTION TEST)  Marijuana  | 193223-574  |  |  | /                   |            |               |                |  |   | 1                                       |               |
| BLOOD R/E  BLOOD R/E  BLOOD R/E  SGPT  DC(differential count)  NOTHERS  DRUG AND ALCOHOL TEST  HBSAg  Reactive Nonre  BLOOD GLUCOSE LEVEL  Phencyclidine  Positive  Positive  Positive  Positive  Positive  Positive  Negative  Nonre  BLOOD GLUCOSE LEVEL  Phencyclidine  Positive  Positive  Positive  Negative  Negative  Positive  Negative  Negative  Others(KUB Ultrasor  Others(KUB Ultrasor  Date  Positive  Name of Seafarer  Date  Date  Date  Name of Seafarer  Date  Dat | SULTS OF  | ANCILLARY EX   | AMINATION  |                     |            |               |                |  |   |   | 1             |
| BLOOD R/E SGPT URINE R/E  DC(differential count) SGOT OTHERS  HAEMOGLOBIN (HGB) DRUG AND ALCOHOL TEST HBSAG Reactive Nonre  ESR (WESTERGREN) SOM Morphine Positive Nagative WDRL Reactive Nonre  BLOOD GLUCOSE LEVEL Phencyclidine Positive Nagative WDRL Reactive Nonre  BLOOD GLUCOSE LEVEL Phencyclidine Positive Nagative Blood Type  RANDOM SOM Barbiturates Positive Negative Psychological Exam  HBA1C SOM Cocaine Positive Negative Others(KUB Ultrasor  POSITIVE NAGATIVE OTHERS  PULAK MONDOL  Name of Seafarer Name of Seafarer  Name of Seafarer  Date  Date |   | y //   | m  |                     | ICAL (L    | IVER FUNC     | ION TEST)      | Marijuana  | 1   | ☐ Positive                              | Negative      |
| DC(differential count)  HAEMOGLOBIN (HGB)  DRUG AND ALCOHOL TEST  HBSAG  ESR (WESTERGREN)  Morphine  Positive  Positive  Positive  Positive  BLOOD GLUCOSE LEVEL  Phencyclidine  Positive  | ECG   | /  | - Francisco  |                     |            | 0             | 5              | Alcohol Test   | I   | Positive                                | Negative      |
| HAEMOGLOBIN (HGB)  DRUG AND ALCOHOL TEST HBsAg Reactive Nonre BROOD GLUCOSE LEVEL Phencyclidine RANDOM RANDOM BBATILITATE  BLOOD GLUCOSE LEVEL Phencyclidine RANDOM REST (Wegative Departive VDRL RANDOM REACTIVE Phencyclidine Reactive Nonre RANDOM REACTIVE Phencyclidine Reactive Nonre Reactiv |   |  |  |                     |            | 2             | 3              | URINE R/E  |   | ./                                      | 190           |
| HAEMOGLOBIN (HGB)    DRUG AND ALCOHOL TEST   HBsAg   Reactive Nonce   Rescrive   Nonce   Positive   Negative   HIV / AIDS Test   Reactive   Nonce   Reactive   Nonce   Reactive   Nonce   Reactive   Nonce   Reactive   Nonce   Reactive   Reactive   Nonce   Reactive   Reactive   Reactive   Nonce   Reactive   Re |   |  | 1780   | SGOT                |            | 21            | 9              |  | OT  | HERS                                    | 7             |
| BLOOD GLUCOSE LEVEL Phencyclidine Positive Negative Positive Reactive None BLOOD GLUCOSE LEVEL Phencyclidine Positive Negative Blood Type RANDOM S-6 Barbiturates Positive Negative Psychological Exam Positive Others (KUB Ultrasor Others (KUB Ultrasor Date Pulak Mondol Name of Seafarer Name of Seafarer Date Positive Others (KUB Ultrasor Date Positive Others)  PULAK MONDOL Name of Seafarer Date Pulak Mondol Name of Seafarer Date Positive Others (KUB Ultrasor Date Pulak Mondol Name of Seafarer Date Pulak  | HAEMOGLO  | DBIN (HGB)   | 1./  | DRU                 | JG AND     | ALCOHOL T     | EST            | HBsAq  | It  |   | Nonreacti     |
| WBC Amphetamine Positive Negative VDRL Reactive Nonreal Reactive R |   |  | 25   |                     |            |               |                |  | est I   |   |               |
| BLOOD GLUCOSE LEVEL Phencyclidine Positive Negative Blood Type RANDOM S-6 Barbiturates Positive Negative Psychological Exam HBA1C Cocaine Positive Negative Others(KUB Ultrasol  Positive Negative Psychological Exam Positive Others(KUB Ultrasol  PULAK MONDOL Name of Seafarer Date  PULAK MONDOL Name of Seafarer Date  Positive Negative Psychological Exam Positive Others(KUB Ultrasol  Positive Negative Psychological Exam  Positive Negative Psychological Exam  Positive Negative Others(KUB Ultrasol  Positive Negative Psychological Exam  Positive Negative Psychological Exam  Positive Negative Others(KUB Ultrasol  Positive Negative Negative Others(KUB Ultrasol  Positive Negative |   | 0  |  |                     |            |               |                | Contract to the Contract of th |   |   |               |
| RANDOM S-6 Barbiturates Positive Negative Psychological Exam HBA1C Cocaine Positive Negative Others(KUB Ultrasor  Positive Negative Psychological Exam Positive Negative Others(KUB Ultrasor  PULAK MONDOL Name of Seafarer Date  Pulak Mondol Name of Seafarer Date  Positive Negative Psychological Exam Positive Others(KUB Ultrasor  Pulak Mondol Date  Positive Negative Psychological Exam Positive Others(KUB Ultrasor  Pulak Mondol Date  Positive Negative Others(KUB Ultrasor  Positive Othe |   | D GLUCOSE I  | 16   |                     |            |               |                | Marian Control   | 1   | - Incacin                               | ZZVZ          |
| ABA1C Cocaine Positive Negative Others(KUB Ultrasor Others)  Beby I declare that I am in knowledge of the contents of the Physical examinations:  PULAK MONDOL  Name of Seafarer  Name of Seafarer  Date  Design of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the minee medically:  |   |  | A STATE OF THE STA |                     |            |               |                | and the second section and the second section is   | Eyam  | 2                                       | 22            |
| eby I declare that I am in knowledge of the contents of the Physical examinations:  PULAK MONDOL  Name of Seafarer  Date  Date  Dessment of fitness for service at sea: the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the minee medically:   |   |  | AT 2 AT 1  |                     |            |               |                |  |   | -                                       | 1             |
| PULAK MONDOL Name of Seafarer Name of Seafarer Date  essment of fitness for service at sea: the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the minee medically:   |   | that I was to  |  |                     | 1000       |               |                | Toureselvon (  | maso  | -/                                      |               |
| PULAK MONDOL  Name of Seafarer  Name of Seafarer  Date  Description in the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the minee medically:  | eby i declare   | inat I am in kno   | wiedge of th   | e contents of       | the Phys   | sical examina | tions:         |  |   | 0 2                                     | MAY 2023      |
| sessment of fitness for service at sea: the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the minee medically:   | 1200  | 200  |  |                     |            | PULAK M       | ONDOL          |  |   | Activity (                              |               |
| the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the minee medically:   | nature of Sea   | afarer   |  |                     |            | Name of So    | afarer         |  |   |   | Date          |
| the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the minee medically:   | nasment of  | fitnes for an  | den et e   |                     |            |               |                |  |   |   |               |
|  |   |  |  | aration, my cl      | linical ex | amination ar  | d the diagnos  | stic test results  | recorded                                      | l above, I o                            | leclare the   |
|  | the basis of t  | ally.  |  |                     |            |               | m              | Not fit for  | lookout                                       | duties                                  |               |
| Deck service Engine service Cotoring service   | the basis of t  | ally:  | Fit fo   | or lookaut dut      | es         |               | 100            | 1 1 4 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  | (A. D. S. | 200000000000000000000000000000000000000 |               |
|  | the basis of t  | ally:  |  |                     | jes        | Engine sec    |                | E  | neina   | 1 0                                     | there are i   |
|  | the basis of t  | ally:  |  |                     | jes        |               |                | Catering ser   | rvice   | 0                                       | ther services |
| 6  | the basis of t<br>minee medic   | ally:  | Deck   | service             | jes        |               |                | Catering ser   | rvice   | 1                                       |               |
| - VVIII I GSIII COURS  | the basis of t<br>minee medic   | ally:  | Deck   | service             |            | 0             | ce             | Catering ser   | rvice   | 1-04-0                                  |               |
| Without restrictions  With restrictions  With restrictions  Unfit  With restrictions  Unfit  With restrictions   | the basis of t  | ally:  | / 54   | and a street of the |            |               |                | Not fit for  | lookout                                       | duties                                  |               |
|  | ne basis of the hinee medic   | Without resi   | Deck<br>trictions<br>dical condition   | service             |            | · With re     | ce             | Catering ser   |   | 100                                     |               |
| cribe restrictions (e.g., specific position, type of ship, trade area):  | the basis of t<br>minee medic<br>t<br>t<br>e Seafarer fr<br>anger the he. | Without resiree from any mealth of other pers  | Deck<br>trictions<br>dical conditions<br>sons on boar  | service             | e aggraw   | · With re     | ce             | Catering ser   |   | 100                                     |               |
| on taken by medical examiner (e.g., referral):   | it it it it is series anger the heart is cribe restriction.               | Without resiree from any mealth of other persions (e.g., specificance)                         | Deck<br>trictions<br>dical condition<br>sons on boar   | service             | e aggraw   | · With re     | ce             | Catering ser   |   | 100                                     |               |
| on taken by medical examiner (e.g., referral):   | it i                                  | Without resiree from any mealth of other persions (e.g., specifications (e.g., specifications) | Deck<br>trictions<br>dical condition<br>sons on boar<br>fic position, to   | service             | e aggraw   | · With re     | ce             | Catering ser   |   | 100                                     |               |
|  | it i                                  | Without resiree from any mealth of other persions (e.g., specifications (e.g., specifications) | Deck<br>trictions<br>dical condition<br>sons on boar<br>fic position, to   | service             | e aggraw   | · With re     | ce             | Catering ser   | afarer ur                                     | nfit for such                           |               |

In Accordance with Medical Examination (Sesting) of the CO (Birden) PGT (Ophth)

BMDC A 55144 (Mark Card Septing 168) and STCW 1978/1996 as Amended, MLC 2006

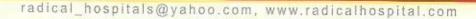
BMDC A 55144 (Mark Card Septing 168) and STCW 1978/1996 as Amended, MLC 2006

Revision Date : 24

General Physician

Radical Hospitals Limited. Revision Date : 24th July 2022

|  | MEDICAL CERTIF   | ICATE FOR                       | PEF                           | RSONNEL SERVICE ON BO  | ARD                               |  |  |
|--|--|---------------------------------|-------------------------------|--|-----------------------------------|--|--|
| SURNAME: MONDOL  |  | GIV                             | EN N                          | IAME (S): PULAK  |                                   |  |  |
| DATE OF BIRTH:   |  | PLA                             | ACE (                         | OF BIRTH   | SEX                               |  |  |
| DAY 07 MONTH (   | 6 YEAR 1990  | 10.75                           |                               | ATKHIRA COUNTRY BANGLADESH   |                                   |  |  |
| POSITION ON BOARD:   | 15 15 15 15 15 15 15 15 15 15 15 15 15 1   | 1000                            | MAILING ADDRESS OF APPLICANT: |  |                                   |  |  |
| MASTER<br>DECK OFFICER<br>ENGINEERING OFFICE<br>RADIO OPERATOR<br>RATING |  | VIL<br>PS-<br>BA                | L-N/<br>-DEE                  | ARIKALY, PO-SAKHIPUR<br>BHATA, DIST-SATKHIRA<br>ADESH              |                                   |  |  |
| DECLARATION OF THE   | AUTHORIZED PHYSICIA  | AN                              |                               |  |                                   |  |  |
|  | VISION   |                                 |                               | COLOR TEST TYPE  | HEARING                           |  |  |
|  | WITHOUT GLASSES  | WITH GLASSI                     | ES 4                          | □ вобк   |                                   |  |  |
| RIGHT EYE  | 666  | ( <del></del> )                 |                               | LANTERN PED MARKET   | SHT EAR/NO                        |  |  |
| LEFT EYE   | 666  |                                 |                               | GREEN BLUENTY LEI  | FT EAR MAN                        |  |  |
| Confirmation that identific  | cation documents were ch   | ecked at the point              | of ex                         | artification: YES NO   |                                   |  |  |
| Hearing meets the stand  | ards in STCW Code, Secti   | ion A-1/9? YES                  | 1                             | NO NOT APLICABLE   |                                   |  |  |
| Unaided hearing satisfac   | tory? YES NO   |                                 |                               | 1  |                                   |  |  |
| Visual acuity meets stand  | dards in STCW Code, Sec  | tion A-1/9? YES                 | d                             |  |                                   |  |  |
| (the visual test it is requir<br>Date of the last colour vis             | dards in STCW Code, Sec<br>ed every six years)<br>sion test: (Day/MenthYear<br>nses necessary to meet th             | 0 2 MAY 2023                    | 7                             | NO 🗆   |                                   |  |  |
| Able for watchkeeping? Y   |  |                                 |                               |  |                                   |  |  |
| Is applicant taking any no   | n-prescription or prescript  | ion medications?                | YES                           | □ No.Ø   |                                   |  |  |
| Is the seafarer free from a<br>endanger the health of ot                 | any medical condition likely<br>her persons on board? YE   | y to be aggravated              | d by s                        | service at sea or to render the seafarers                          | unfit for such service or to      |  |  |
| Hereby I declare that I an   | n in knowledge of the cont   | ents of the Physic              | al Ex                         | amination.   | -                                 |  |  |
| 500  | 4  | PULA                            | KM                            | ONDOL  | 0 2 MAY 2023                      |  |  |
| Signature of   | Applicant  | Nam                             | ne of A                       | Applicant  | Date                              |  |  |
| CIRCLE APPROPIATE<br>ENGINEERING OFFICER                                 | CHOICE: (HE / SHE) IS<br>R/RADIO OPERATOR/F  | S FOUND TO B<br>RATING) (WITHOU | E (E                          | I / NOT FIT) FOR DUTY AS A (M.<br>NY / WITH THE FOLLOWING) RESTRIC | ASTER / DECK OFFCIER .<br>CTIONS: |  |  |
|  | Ĺ  | FIT FOR DUT                     | 140                           | N BOARD SHIP   |                                   |  |  |
| NAME AND DEGREE OF   | PHYSICIAN: DR. MIR   | MD. RAIHAN;                     | M.B                           | .B.S(D.U.), REG. NO. A-55144                                       | 251                               |  |  |
| ADDRESS: REDICAL HO  | SPITALS LIMITED 35, S  | HAH MAKHDUM                     | AVE                           | NUE ,SECTOR-12 UTTARA, DHAKA-1                                     | 230. BANGLADESH                   |  |  |
|  | CERTIFICATING AUTHO  |                                 |                               | AND ADDA   |                                   |  |  |
| DATE OF ISSUE PHYSIC   | CIAN'S CERTIFICATE: 0  | 6-05-2014                       |                               | HOSPITALE NO   |                                   |  |  |
| SIGNATURE OF PHYSIC  |  | STA                             | MP C                          | DE PHYSICIAN * As Per MI G 9006 *                                  | 0 2 MAY 2023                      |  |  |
| EXPIRY DATE OF CERT  |  | 01 MAY 2                        |                               | 13/  |                                   |  |  |
|  | This cer<br>of the STCW Conventi   | tificate is issued in i         | compl<br>led an               | d the Maritime Labour Control                                      |                                   |  |  |
| MSBS (D<br>BMDC<br>DG Shi  | MIR. MD. RAIH<br>U), DFM. CCD (Birdem), PGT (C<br>PA-55144, MMC-BGD-t<br>PD-ng Bangladesh Appro<br>General Physician | AN<br>Ophth)<br>016             |                               | , 2000   |                                   |  |  |
| R  | adical Hospitals Limited.  |                                 |                               |  |                                   |  |  |





Id No : 0049

Date: 02-May-2023

D.Date: 02-May-2023

Patient's Name: PULAK MONDOL

Age: 32Y 10M 25D Gender: Male

Specimen

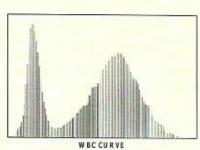
: Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/7326

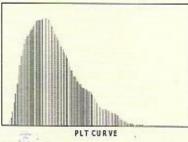
## **Haematology Report**

zer & checked manually)

| Parameter Name  | Results             | Reference Range  |
|---|---------------------|--|
| Hemoglobin (Hb)   | 14.1 gm/dl          | M:13-18 gm/dl. F:11.5-16.5 gm/dl.<br>Child:10-13 gm/dl.<br>Infant: (One year):8-10 gm/dl.          |
| ESR(Westergreen)  | <b>05</b> mm/1st hr | Male:0-10, F:0-20 mm/1st hr.   |
| Total WBC Count(TC)   | 9,900 /cumm         | Adult: 4000 - 11000/cumm.<br>Children: 5,000-15,000/cumm<br>Infant(One Year):<br>6,000-18,000/cumm |
| Differential WBC Count (DC)   |                     | 5/000 15/005/Callilli  |
| Neutrophils   | 62 %                | Child: 25-66 %, Adult: 40-75 %   |
| Lymphocytes   | 32 %                | Child: 52-62 %, Adult: 20-50 %   |
| Monocytes   | 04 %                | Child: 03-07 %, Adult: 02-10 %   |
| Eosinophils   | 02 %                | Child: 01-03 %, Adult: 01-06 %   |
| Basophils   | 00 %                | Adult: 00-01 %   |
| Total Cir. Eosinophils  | 198 /cumm           | 50-450/cumm  |
| Total RBC Count   | 5.26 m/ul           | M: 4.5-6.5, F:3.8-5.8 m/ul   |
| HCT/PCV   | 37.0 %              | M: 40-54%, F:37-47%  |
| MCV   | 70.3 fL             | 76 - 94 fL   |
| MCH   | 26.8 pg             | 27 - 32 pg   |
| MCHC  | 38.1 g/dL           | 29 - 34 g/dL   |
| RDW   | 13.4 %              | 11 - 16 %  |
| PDW   | 16.5 fL             | 35 - 56 fl   |
| Total Platelete Count (PC)  | 2,00,000 /cumm      | 150,000-450,000/cumm   |
| MPV   | 9.7 fL              | 7.0 - 11.0 fL  |
| PCT   | 0.194 %             | 0.1 - 0.%  |
| Bledding Time(BT)   | %                   | 10 - 18 %  |
| Cloting Time(CT)  | %                   | 0.1- 0.2 %   |
| CONTRACTOR |                     | 4.000mm/s/m2008/90   |



RBCCURVE



Checked By Medical Technologist

Dr. Sumaiya Khatun MBBS,MD(Gold Medalist) (BSMMU) Associate Professor Dept. Of Microbiology East West Medical College & Hospital. radical\_hospitals@yahoo.com, www.radicalhospital.com



| Bill No        | DIA23050049                    | Received Date            | 02/05/2023       |
|----------------|--------------------------------|--------------------------|------------------|
| Patient's Name | PULAK MONDOL                   |                          | 74.70,2020       |
| Patient's Age  | 32Y 10M 25D                    | Patient's Sex            | Male             |
| Ref. by        | Dr. Mir Md. Raihan MBBS,(DU),0 | CCD(BIRDEM),PGT(Eye),DFM | CDC NO: C/O/7326 |
| Sample         | BLOOD                          |                          |                  |

## BIOCHEMISTRY REPORT

| Test Name                 | Result          | Reference Range             |
|---------------------------|-----------------|-----------------------------|
| Random Blood Sugar (RBS)  | 5.6 mmol/l      | 4.2 – 6.4 mmol/l            |
| Serum Bilirubin (Total)   | 0.8 mg/dl       | 0.2 - 1.1 mg/dl             |
| Serum AST (SGOT)          | 21 U/L          | Up to 37 U/L                |
| HbA1C<br>Serum ALT (SGPT) | 5.2 %<br>25 U/L | 4.2 - 6.7 %<br>Up to 40 U/L |

## REMARKS (IF ANY)

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

Checked By

Medical Technologis Radical Hospitals Ltd. Dr. Stimarya Khatun M BBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital





| Bill No        | IDA23050049                             | Received Date   | 02/05/2023      |
|----------------|---|-----------------|-----------------|
| Patient's Name | PULAK MONDOL                            |                 |                 |
| Patient's Age  | 32Y 10M 25D                             | Patient's Sex   | Male            |
| Ref. by        | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEN | M),PGT(Eye),DFM | CDC NO:C/O/7326 |
| Sample         | BLOOD                                   |                 |                 |

## SEROLOGYCAL REPORT

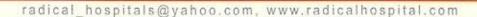
| HIV 1 & 2 (Method : (ICT) | Negative     |
|---------------------------|--------------|
| HBsAg (Method: (ICT)      | Negative     |
| VDRL                      | Non-reactive |

| BLOOD 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





| Sample         | URINE                           |                        |                 |
|----------------|---------------------------------|------------------------|-----------------|
| Ref. by        | Dr. Mir Md. Raihan MBBS,(DU),CC | D(BIRDEM),PGT(Eye),DFM | CDC NO:C/O/7326 |
| Patient's Age  | 32Y 10M 25D                     | Patient's Sex          | Male            |
| Patient's Name | PULAK MONDOL                    |                        |                 |
| Bill No        | DIA23050049                     | Received Date          | 02/05/2023      |

#### URINE ROUTINE EXAMINATION

#### PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

| Quantity   | Sufficient | CELLS / HPF |         |
|------------|------------|-------------|---------|
| Colo       | Straw      | RBC         | Nil     |
| Appearance | Clear      | Pus Cells   | 1-2/HPF |
| Sediment   | Nil        | Epithelial  | 0-1/HPF |

#### CHEMICAL EXAMINATIONCASTS / LPF

| Reaction     | Acidic | RBC        | Nil |
|--------------|--------|------------|-----|
| Albumin      | NIL    | WBC        | Nil |
| Sugar        | NIL    | Epithelial | Nil |
| Ex.Phosphate | Nil    | Granular   | Nil |
| *            |        | Hyaline    | Nil |

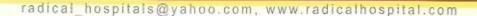
#### ON REQUESTCRYSTALS & OTHERS

| 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 |

Cheeked 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        | DIA23050049                             | Received Date  | 02/05/2023      |
|----------------|---|----------------|-----------------|
| Patient's Name | PULAK MONDOL                            | *              |                 |
| Patient's Age  | 32Y 10M 25D                             | Patient's Sex  | Male            |
| Ref. by        | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM | ),PGT(Eye),DFM | CDC NO:C/O/7326 |
| Sample         | urine                                   |                |                 |

#### DRUG ABUSE TEST

Result

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

RADICAL HOSPITAL LIMITED | DIAGNOSTIC & CONSULTATION CENTRE

RADICAL HOSPITAL

radical\_hospitals@yahoo.com, www.radicalhospital.com

REF: MT. ELM GALAXY

DATE: 02/05/2023

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

## EYE EXAMINATION REPORT

NAME: PULAK MONDOL RANK: 2<sup>ND</sup> OFF CDC NO: C/O/7326

VISUAL ACUITY: RIGHT LEFT

UNAIDED 666

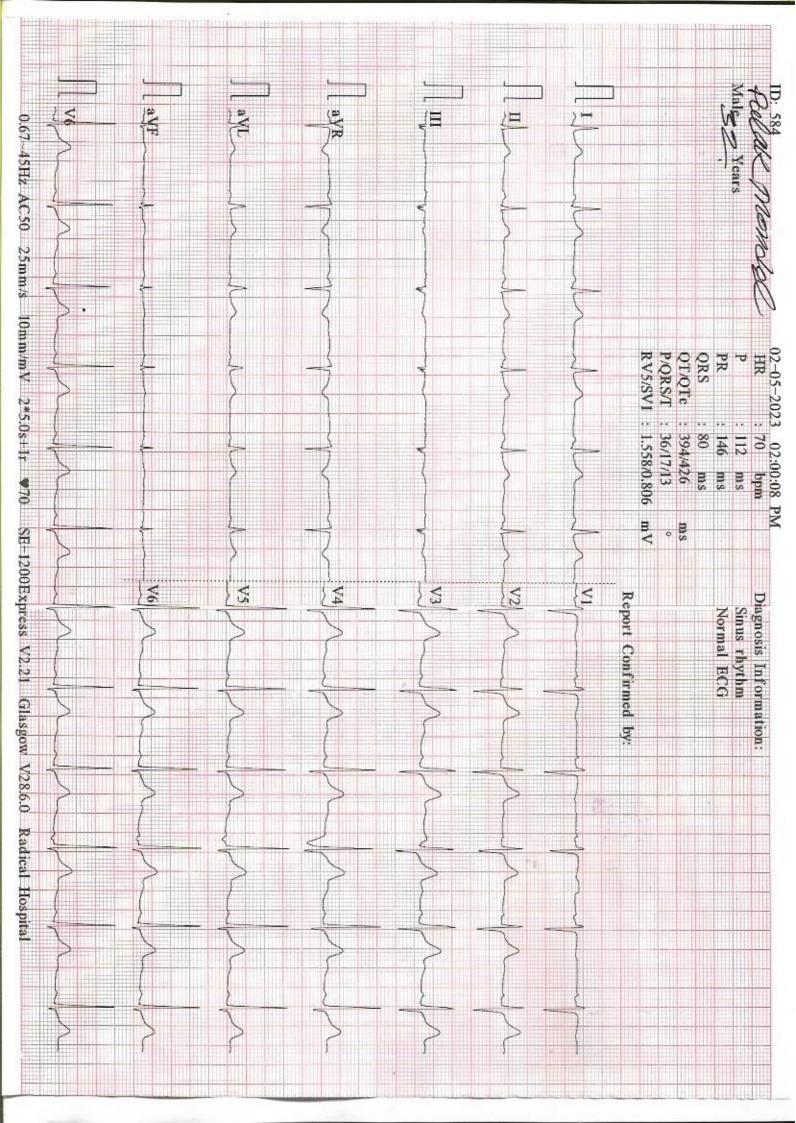
AIDED

COLOUR VISION: NORMAL/BLIND

**OPINION** 

UNFTP/ FIT FOR EMPLOYMENT ON BOARD

Dr. Mir Md. Raihan MBBS, PGT (Ophthalmology) Assistant Registrar (EX) East west Medical College & Hospital



radical\_hospitals@yahoo.com, www.radicalhospital.com



#### DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23050049 Receive:02/05/2023 Print: 02/05/2023

Patient's Name : PULAK MONDOL

Age : 32 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.

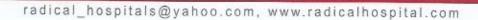
Bony thorax : Reveals no abnormality.

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

This report has been electronically signed.





| Patient ID   | 23050049                    | Voucher No         |  |
|--------------|-----------------------------|--------------------|--|
| Test Name    | USG OF KUB                  | Delivery Date      | 02/05/2023   |
| Patient Name | PULAK MODOL                 | 1631               |  |
| Age          | 32 Yrs                      | Sex                | Male   |
| Refd. By     | Dr. Mir Md. Raihan MBBS,(DU | ),CCD(BIRDEM),PGT( | A STATE OF THE PARTY OF THE PAR |

#### 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 – 10.0 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 14.7 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

# INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that whose signature follows Date of birth 07-06-1950

Sex Mall

has on the date indicated been vaccinated or revaccinated against Cholera

| T. H. Char | Approved Stamp |   | Signature and Professional status of vaccinator   | Date     |
|------------|----------------|---|---|----------|
|            |                | SS, Shah Makhdum<br>Avenue<br>Utlana, Dhaka   | DR. MIT ATD. RAIHAN MBBS (DU); DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited | 25/11/2  |
|            | 100            | 35, Shala Malahdum<br>Avenus<br>Uttara, Dhaka | 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. | S. W. C. |
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|            |                |   |   | 6        |
| 8          |                | 7   |   | 7        |
|            | 10             |   |   | 8        |