



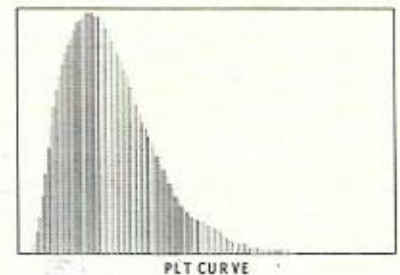
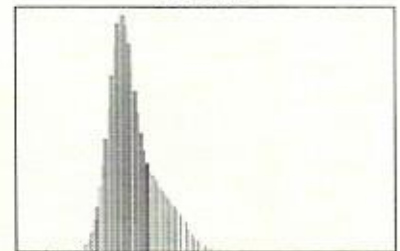
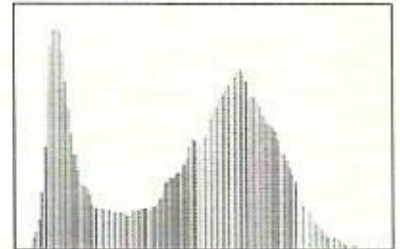


**Id No** : 0288 **Date** : 09-May-2023 **D.Date** : 09-May-2023  
**Patient's Name** : DILSHAD ANWAR **Age** : 55Y 4M 8D **Gender** : Male  
**Specimen** : Blood  
**Doctor Name** : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/2003

### Haematology Report

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

| Parameter Name                     | Results               | Reference Range                                                                                    |
|------------------------------------|-----------------------|----------------------------------------------------------------------------------------------------|
| <b>Hemoglobin (Hb)</b>             | <b>12.9</b> gm/dl     | M:13-18 gm/dl. F:11.5-16.5 gm/dl.<br>Child:10-13 gm/dl.                                            |
| <b>ESR(Westergreen)</b>            | <b>06</b> mm/1st hr   | Infant: (One year):8-10 gm/dl.<br>Male:0-10, F:0-20 mm/1st hr.                                     |
| <b>Total WBC Count(TC)</b>         | <b>7,400</b> /cumm    | Adult: 4000 - 11000/cumm.<br>Children: 5,000-15,000/cumm<br>Infant(One Year):<br>6,000-18,000/cumm |
| <b>Differential WBC Count (DC)</b> |                       |                                                                                                    |
| Neutrophils                        | <b>63</b> %           | Child: 25-66 %, Adult: 40-75 %                                                                     |
| Lymphocytes                        | <b>32</b> %           | Child: 52-62 %, Adult: 20-50 %                                                                     |
| Monocytes                          | <b>03</b> %           | Child: 03-07 %, Adult: 02-10 %                                                                     |
| Eosinophils                        | <b>02</b> %           | Child: 01-03 %, Adult: 01-06 %                                                                     |
| Basophils                          | <b>00</b> %           | Adult: 00-01 %                                                                                     |
| Total Cir. Eosinophils             | <b>148</b> /cumm      | 50-450/cumm                                                                                        |
| <b>Total RBC Count</b>             | <b>4.60</b> m/ul      | M: 4.5-6.5, F:3.8-5.8 m/ul                                                                         |
| HCT/PCV                            | <b>34.0</b> %         | M: 40-54%, F:37-47%                                                                                |
| MCV                                | <b>73.9</b> fL        | 76 - 94 fL                                                                                         |
| MCH                                | <b>28.0</b> pg        | 27 - 32 pg                                                                                         |
| MCHC                               | <b>37.9</b> g/dL      | 29 - 34 g/dL                                                                                       |
| RDW                                | <b>12.5</b> %         | 11 - 16 %                                                                                          |
| PDW                                | <b>17.8</b> fL        | 35 - 56 fL                                                                                         |
| <b>Total Platelete Count (PC)</b>  | <b>2,52,000</b> /cumm | 150,000-450,000/cumm                                                                               |
| MPV                                | <b>8.7</b> fL         | 7.0 - 11.0 fL                                                                                      |
| PCT                                | <b>0.219</b> %        | 0.1 - 0.4 %                                                                                        |
| Bleeding Time(BT)                  | %                     | 10 - 18 %                                                                                          |
| Cloting Time(CT)                   | %                     | 0.1- 0.2 %                                                                                         |



Checked By  
Medical Technologist

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



|                |                                                                       |               |            |
|----------------|-----------------------------------------------------------------------|---------------|------------|
| Bill No        | DIA23050288                                                           | Received Date | 09/05/2023 |
| Patient's Name | DILSHAD ANWAR                                                         |               |            |
| Patient's Age  | 55Y 4M 8D                                                             | Patient's Sex | Male       |
| Ref. by        | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/2003 |               |            |
| Sample         | blood                                                                 |               |            |

### BIOCHEMISTRY REPORT

| Test Name                  | Result     | Reference Range  |
|----------------------------|------------|------------------|
| Fasting Blood Sugar (FBS)  | 6.0 mmol/l | 4.2 – 6.4 mmol/l |
| HbA1C                      | 5.6 %      | 4.0- 6.0 %       |
| Serum Uric Acid            | 5.4 mg/dl  | 3.4-7.0 mg/dl    |
| Serum Creatinine           | 0.76 mg/dl | 0.3 - 1.3 mg/dl  |
| <b>Liver Function Test</b> |            |                  |
| Serum Bilirubin (Total)    | 0.6 mg/dl  | 0.2 - 1.1 mg/dl  |
| Serum ALT (SGPT)           | 29 U/L     | Up to 40 U/L     |
| Serum AST (SGOT)           | 21 U/L     | Up to 37 U/L     |
| Serum Alkaline Phosphatase | 182 U/L    | 98 - 279 U/L     |
| <b>Lipid profile</b>       |            |                  |
| Serum Cholesterol          | 163 mg/dl  | up to 200 mg/dl  |
| Serum HDL- Cholesterol     | 41 mg/dl   | >35 mg/dl        |
| Serum Triglyceride         | 139 mg/dl  | upto 220 mg/dl   |
| Serum LDL- Cholesterol     | 90 mg/dl   | <130 mg/dl       |

Checked By

Medical Technologist  
Radical Hospitals Ltd.

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M BBS, MD (Microbiology)  
Associate Professor  
Dept. of Microbiology

East West Medical College and Hospital



|                |                                                       |               |                 |
|----------------|-------------------------------------------------------|---------------|-----------------|
| Bill No        | DIA23050288                                           | Received Date | 09/05/2023      |
| Patient's Name | DILSHAD ANWAR                                         |               |                 |
| Patient's Age  | 55Y 4M 8D                                             | Patient's Sex | Male            |
| Ref. by        | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM |               | CDC NO:C/O/2003 |
| Sample         | blood                                                 |               |                 |

### SEROLOGICAL REPORT

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

| <u>BLOOD GROUPING Result</u> |           |
|------------------------------|-----------|
| ABO Blood Group              | "B" (+ve) |
| Rh(D)Factor                  | Positive  |

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|                |                                                                            |               |            |
|----------------|----------------------------------------------------------------------------|---------------|------------|
| Bill No        | DIA23050288                                                                | Received Date | 09/05/2023 |
| Patient's Name | DILSHAD ANWAR                                                              |               |            |
| Patient's Age  | 55Y 4M 8D                                                                  | Patient's Sex | Male       |
| Ref. by        | Dr. Mir Md. Raihan MBBS, (DU), CCD(BIRDEM), PGT(Eye), DFM CDC NO: C/O/2003 |               |            |
| Sample         | URINE                                                                      |               |            |

### URINE ROUTINE EXAMINATION

#### PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

|            |            |             |         |
|------------|------------|-------------|---------|
| Quantity   | Sufficient | CELLS / HPF |         |
| Color      | Straw      | R B C       | Nil     |
| Appearance | Clear      | Pus Cells   | 0-2/HPF |
| Sediment   | Nil        | Epithelial  | 2-3/HPF |

#### CHEMICAL EXAMINATIONCASTS / LPF

|              |        |            |     |
|--------------|--------|------------|-----|
| Reaction     | Acidic | R B C      | Nil |
| Albumin      | NIL    | W B C      | 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 |

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|                |                                                                       |               |            |
|----------------|-----------------------------------------------------------------------|---------------|------------|
| Bill No        | DIA23050288                                                           | Received Date | 09/05/2023 |
| Patient's Name | DILSHAD ANWAR                                                         |               |            |
| Patient's Age  | 55Y 4M 8D                                                             | Patient's Sex | Male       |
| Ref. by        | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/2003 |               |            |
| Sample         | URINE                                                                 |               |            |

### DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

| Test Name | Result |
|-----------|--------|
|-----------|--------|

Drug Level of Urine

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

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|                |                                                       |               |                 |
|----------------|-------------------------------------------------------|---------------|-----------------|
| Bill No        | DIA23050288                                           | Received Date | 09/05/2023      |
| Patient's Name | DILSHAD ANWAR                                         |               |                 |
| Patient's Age  | 55Y 4M 8D                                             | Patient's Sex | Male            |
| Ref. by        | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM |               | CDC NO:C/O/2003 |
| Sample         | stool                                                 |               |                 |

## STOOL ANALYSIS

### Physical Examination:

Color : Brown  
Consistency : Soft  
Worm : Nil  
Mucus : Nil  
Blood : Nil

### Chemical Examination:

Reaction : Acid  
Occult Blood Test (OBT) : Not done  
Reducing Substance (RS) : Not done

### Microscopic Examination:

|                        |             |                 |             |
|------------------------|-------------|-----------------|-------------|
| Ova                    | : Not found | Mucus flakes    | : Nil       |
| Cyst                   | : Not found | Cyst of Giardia | : Not found |
| Protozoa (Trophozoite) | : Not found | Macrophage      | : Not found |
| Larva                  | : Not found | Fat Globules    | : (+)       |
| Epithelial Cell        | : Nil       | Vegetable Cell  | : Nil       |
| Pus Cell               | : Nil       | Starch          | : Nil       |
| RBC                    | : Nil       | Muscle fibre    | : Nil       |

Checked By

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East West Medical College and Hospital



|                    |   |                                     |       |   |            |
|--------------------|---|-------------------------------------|-------|---|------------|
| Patient's Name     | : | DILSHAD ANWAR                       | ID NO | : | 23050288   |
| Age                | : | 55 Yrs                              | Date  | : | 09/05/2023 |
| Sex                | : | Male                                |       |   |            |
| Referred by        | : | Dr. Mir Md. Raihan - MBBS (DU), DFM |       |   |            |
| Nature of Specimen | : |                                     |       |   |            |

### Dental Examination Reports

#### On Examination

- |                             |   |        |
|-----------------------------|---|--------|
| 1. Dental Caries            | : | Absent |
| 2. Calculus                 | : | Absent |
| 3. Missing                  | : | Absent |
| 4. Gum Condition            | : | Normal |
| 5. Filling                  | : | No     |
| 6. Root Canal Treatment     | : | No     |
| 7. Any Bridge/Denture/Crown | : | No     |
| 8. Oral Hygiene             | : | Normal |

Comments : Normal



**Dr. Mir Md. Raihan**

MBBS (DU), CCD (Birdem), PGT (ophth)

Reg- A55144 BGD-016(MMC)

DG Shipping Bangladesh Approved

Malaysian Medical Council Approved

General Physician

Radical Hospitals Limited



**DEPARTMENT OF RADIOLOGY & IMAGING**

|                |                                                         |                     |                   |
|----------------|---------------------------------------------------------|---------------------|-------------------|
| ID. No.        | : 23050288                                              | Receive: 09/05/2023 | Print: 09/05/2023 |
| Patient's Name | : <b>DILSHAD ANWAR</b>                                  |                     |                   |
| Age            | : 55 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

|                |   |                                      |         |              |
|----------------|---|--------------------------------------|---------|--------------|
| Patient's Name | : | DILSHAD ANWAR                        |         |              |
| Age            | : | 55 Yrs                               | Date    | : 09/05/2023 |
| Sex            | : | Male                                 | CDC NO: | C/O/2003     |
| Referred by    | : | Dr. Mir Md. Raihan - MBBS, (DU), DFM |         |              |

## Psychometric Test

| Test Name                                           | Remarks                                      |
|-----------------------------------------------------|----------------------------------------------|
| <b>1.APTITUDE TEST</b>                              |                                              |
| Numerical Reasoning test                            | Poor /Good / <del>very good</del> /excellent |
| Verbal Reasoning test                               | Poor /Good / <del>very good</del> /excellent |
| Inductive reasoning test                            | Poor /Good / <del>very good</del> /excellent |
| Diagrammatic Reasoning test                         | Poor /Good / <del>very good</del> /excellent |
| Logical Reasoning test.                             | Poor /Good / <del>very good</del> /excellent |
| Error checking test                                 | Poor /Good / <del>very good</del> /excellent |
| <b>2.Skill Test</b>                                 | Poor /Good / <del>very good</del> /excellent |
| <b>3.Personality Test</b>                           | INFJ / ENFJ / ISFJ / ENTP/ ESFJ /ESFP        |
| <b>4.Watson Glaser test(Critical Thinking Test)</b> |                                              |
| Arguments                                           | Poor /Good / <del>very good</del> /excellent |
| Assumptions                                         | Poor /Good / <del>very good</del> /excellent |
| Deductions                                          | Poor /Good / <del>very good</del> /excellent |
| Interpreting Information's                          | Poor /Good / <del>very good</del> /excellent |
| Inferences                                          | Poor /Good / <del>very good</del> /excellent |
| <b>5.Situational Judgment Test.</b>                 | Poor /Good / <del>very good</del> /excellent |

Poor: <6      Good: 6-7      very good: 7-8      excellent: 8-10

**COMMENTS: HE IS MENTALLY FIT FOR SHIP JOB**



**Dr. Mir Md. Raihan**

MBBS (DU), DFM, CCD (Birdem), PGT (ophth)  
Reg- A55144 BGD-016(MMC)  
DG Shipping Bangladesh Approved  
Malaysian Medical Council Approved  
General Physician  
Radical Hospitals Limited



## AUDIOLOGICAL REPORT

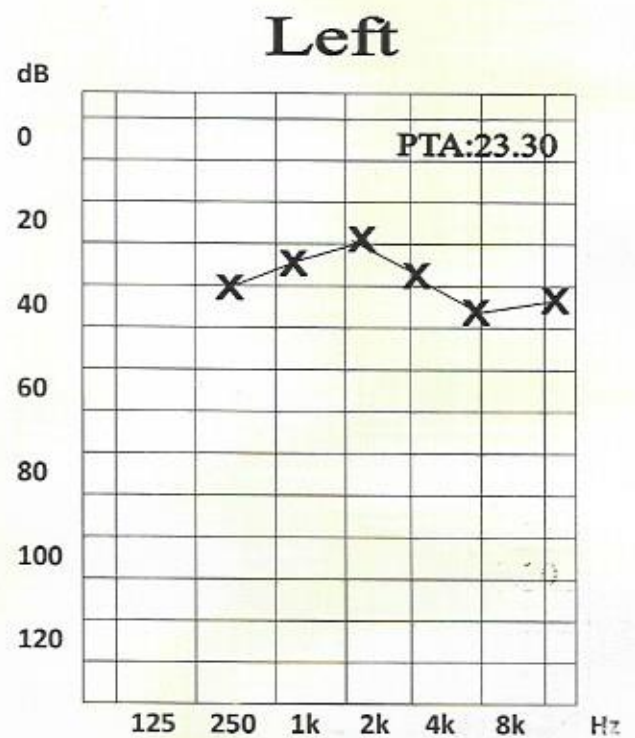
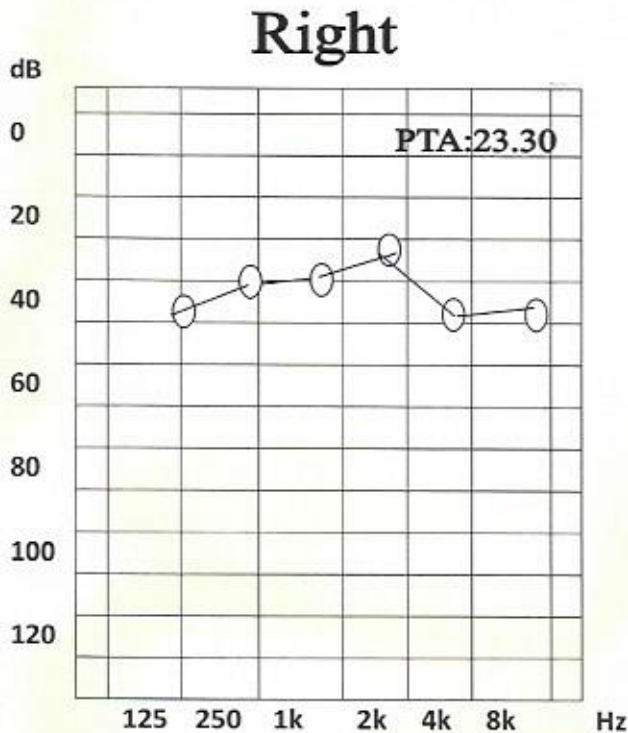
Patient Name : DILSHAD ANWAR

09/05/2023

Age : 55 Yrs

Address : RHL, UTTARA

Referred By : Dr. Mir Md. Raihan , MBBS,(DU), DFM



0-25= Normal Hearing.  
26-40= Mild Hearing Loss.  
41-55= Moderate Hearing Loss.  
56-70= Moderately Severe Hearing Loss.  
71-90= Severe Hearing Loss.  
91-120= Profound Hearing Loss.

|                  | Right Ear | Left Ear |
|------------------|-----------|----------|
| Air Unmasking OX |           |          |
| Bone Unmasking   |           |          |
| Air Masking OX   |           |          |
| Bone Masking ΔΔ  |           |          |

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.

Date: 09/05/2023

## EYE EXAMINATION REPORT

|       |               |           |                 |
|-------|---------------|-----------|-----------------|
| NAME: | DILSHAD ANWAR |           |                 |
| AGE:  | 55 YRS        | RANK: ETO | CDC NO:C/O/2003 |

VISUAL ACUITY:                      RIGHT                      LEFT

UNAIDED                      6/6                      6/6

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**

ID. No. : 23050188      Receive: Print: 09/05/2023  
 Patient's Name : **DILSHAD ANWAR**  
 Age : 55 YRS      Sex : M  
 Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

**ELECTROCARDIOGRAM (E.C.G) REPORT**

Rate : 79 b/min  
 Rhythm : Regular  
 P-Wave : Normal  
 P-R Interval : Normal  
 QRS Complex : Normal  
 ST. Segment : Is electric  
 T. Wave : Normal

Impression : Findings are within normal limit.



**Dr. Debashish Paul**  
 MBBS, MD (Cardiology)  
 Associate Professor  
 Department of Cardiology  
 Sylhet Women's Medical College Hospital



ID: 135

08-05-2023 09:05:02 PM

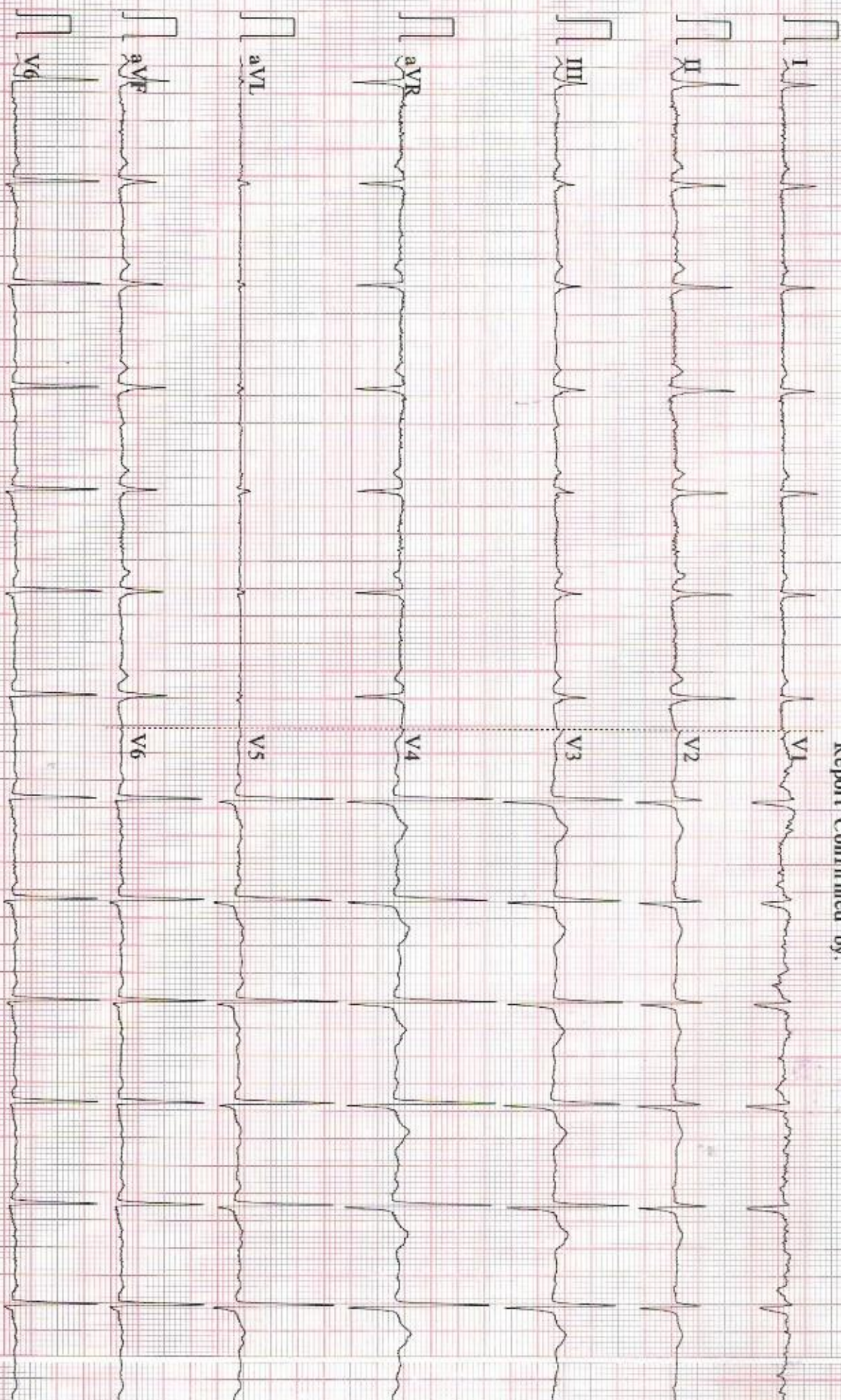
*P. S. MacPherson*  
Male 55 years

## Diagnosis Information:

Sinus rhythm  
Normal ECG

|         |               |     |
|---------|---------------|-----|
| HR      | : 79          | bpm |
| P       | : 118         | ms  |
| PR      | : 156         | ms  |
| QRS     | : 92          | ms  |
| QT/QTc  | : 386/443     | ms  |
| P/QRS/T | : 62/57/60    | °   |
| RV5/SV1 | : 1.828/0.589 | mV  |

Report Confirmed by:





## TREADMILLSTRESS TEST

|               |                     |           |            |     |      |
|---------------|---------------------|-----------|------------|-----|------|
| Patient ID    | 23050288            | Test Date | 09-05-2023 |     |      |
| Patient Name  | DILSHAD ANWAR       | Age       | 55 Yrs     | Sex | Male |
| Attending Dr. | Dr. ROSEYAT PERVEEN |           |            |     |      |

Total Exercise Time : 09:10 Min

Max.HR attained : 163 bpm.

% of max.pred. hR : 98 %

Max. Pred HR : 167 bpm.

Maximum BP : 140/80 mmHg.

Max. work load attained :13.10METS.

Indication : Screening for IHD.

Risk Factors :

Reason for Termina : Attainment of THR.

Test Profile : BRUCE

Symptoms :

Summary Result ⇒ **NEGATIVE**

Comments :

- DILSHAD ANWAR performed stress test in Bruce protocol for the evaluation of IHD (angina pectoris).
- Exercise capacity was good.
- Inotropic and chronotropic responses were normal.
- Stress test was terminated because of Attainment of THR
- ECG at rest showed no abnormality.
- ECG during exercise & Recovery showed no significant ST-T changes.

Conclusion : Stress test is **NEGATIVE** for ECG evidence of promotable myocardial ischemia.

**Dr. ROSEYAT PERVEEN**  
MBBS, MD (Cardiology), NICVD, Dhaka  
Consultant, IBN SINA D-Lab, Uttara, Dhaka

|                    |                                            |       |              |
|--------------------|--------------------------------------------|-------|--------------|
| Patient's Name     | : <b>DILSHAD ANWAR</b>                     | ID NO | : 23050288   |
| Age                | : <b>55 Yrs</b>                            | Date  | : 09/05/2023 |
| Sex                | : <b>Male</b>                              |       |              |
| Referred by        | : <b>Dr. Mir Md. Raihan MBBS,(DU), DFM</b> |       |              |
| Nature of Specimen | :                                          |       |              |

**PULMONARY FUNCTION TEST (SPIROMETRY)**

FVC                = 6  
 FEV                = 5  
 FEV/FVC        = 80%

Comments: Normal Lung Function

Checked By



**Dr. Mir Md. Raihan**

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 Reg- A55144 BGD-016(MMC)  
 DG Shipping Bangladesh Approved  
 Malaysian Medical Council Approved  
 General Physician  
 Radical Hospitals Limited



|              |                                  |           |            |     |      |
|--------------|----------------------------------|-----------|------------|-----|------|
| Patient ID   | 23050288                         | Test Date | 09/05/2023 |     |      |
| Patient Name | DILSHAD ANWAR                    | Age       | 55 YRS     | Sex | Male |
| Ref. By      | Dr. Mir Md. Raihan MBBS (DU),DFM |           |            |     |      |

**BMI REPORT**

$$\begin{aligned}
 \text{Body Mass Index} &= \frac{\text{Weight in kg}}{(\text{Height in Meter})^2} \\
 &= \frac{87 \text{ kg}}{(1.75)^2} \\
 &= 28.4
 \end{aligned}$$

**BMI Categories**

- ❖ Under Weight in = <18.5
- ❖ Normal Weight= 18.5 - 24.9
- ❖ Over Weight=25 - 29.9
- ❖ Obeshyz = BMI of 30 or greater.


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 DG Shipping Bangladesh Approved  
 Malaysian Medical Council Approved  
 General Physician  
 Radical Hospitals Limited

|              |                                                       |               |            |
|--------------|-------------------------------------------------------|---------------|------------|
| Patient ID   | 23050288                                              | Voucher No    |            |
| Test Name    | USG OF WHOLE ABDOMEN                                  | Delivery Date | 09/05/2023 |
| Patient Name | Dilshad Anwar                                         |               |            |
| Age          | 55 YRS                                                | Sex           | Male       |
| Refd. By     | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM |               |            |

**THANK YOU FOR THE COURTESY OF THIS REFERRAL**

**LIVER :-** Enlarged in size 16.5 cm, regular in shape and normal position. The echogenicity of the parenchyma is increased. Intrahepatic biliary channel are not dilated. No focal lesion is seen.

**GALL BLADDER :** Normal size regular in shape. Lumen is normal. Wall thickens is normal.  
No echogenic structure is seen within lumen. CBD is not dilated.

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

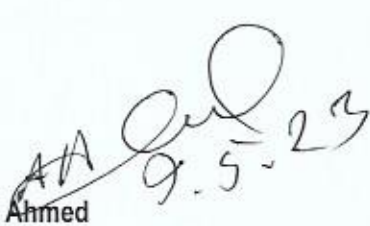
**SPLEEN :-** Is normal in size (9.7 x 3.9)cm and uniform in echo-texture.

**BOTH KIDNEYS :-**Are normal in size RK-11.7cm, LK-12.4 cm regular in shape. 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.

**URINARY BLADDER :** Is well filled. Wall thickness is normal. No intravesicle lesion is seen

**PROSTATE:** Normal in size and volume is 19.0 cc,regular in shape. Echogenicity is homogenous.  
No area of calcification is seen.

**IMPRESSION: Fatty change in liver. Grade-2**

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



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

This is to certify that JE Soussigne\* (e) certifie que MR. DILSHAD ALI date of birth 01-01-68 Sex MALE  
no\* (e) le no\* (e) le sexe

Whose signature follows don't la signature suit [Signature]

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

| Date        | Signature and professional<br>Statut of Vaccinator<br>Signature et titre<br>du vaccinateur                                                                                        | Manufacturer<br>and batch<br>no of vaccine<br>Fabricant du<br>vaccin et numéro<br>du lot | Official stamp of vaccinating centre<br>Cachet officiel du centre de vaccination  |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| 09 MAY 2023 | <u>[Signature]</u><br><b>DR. MIR. MD. RAIHAN</b><br>MBBS (DU), DFM, CCD (Intern), PGT (Civil)<br>BMDC A-55144, MMC-BGD-015<br>DC Shingur Bangladesh Approved<br>General Physician |         |  |
| 1           |                                                                                                                                                                                   |                                                                                          |                                                                                   |
| 2           |                                                                                                                                                                                   |                                                                                          |                                                                                   |
| 3           |                                                                                                                                                                                   |                                                                                          |                                                                                   |
| 4           |                                                                                                                                                                                   |                                                                                          |                                                                                   |

This certificate is valid only if the vaccine used has been approved by the world health organization and vaccinating centre has been designated by health administration for the territory in which that centre is situated.

The validity of this certificate shall extend for a period of ten years, beginning in days after the date of vaccination or in the event of a revaccination within such period of ten years, from the date of the revaccination.

This certificate must be signed by a medical practitioner in his own hand; his official stamp is not an accepted substitute for the signature.

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

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

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

Ce certificat doit être signé par un médecin de sa propre main, son cachet officiel ne pouvant être considéré comme l'équivalent de la signature.

Toute altération ou omission sur le certificat ou l'omission d'une quelconque des mentions qu'il

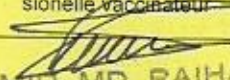
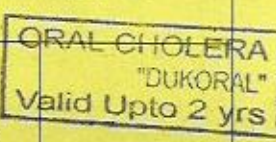


**INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION  
AGAINST CHOLERA  
CERTIFICAT INTERNATIONAL DE VACCINATION OU DE REVACCINATION  
CONTRE LE CHOLERA**

This is to certify that JE Soussigne' (e) certifie que MR. DILSHAD ADWAR date of birth 01-01-68 Sex MALE  
no' (e) le sexe

Whose signature follows  
dont la signature suit

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

|             |                                                                                                                                                                                                                                                                               |                                                                                                                                                                         |
|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date        | Signature and professional<br>Status of Vaccinator<br>Signature et qualite profess-<br>sionelle vaccinateur                                                                                                                                                                   | Approved Stamp<br>Cachet<br>d'authentification                                                                                                                          |
| 09 MAY 2023 | <br><b>DR. MIR MD. RAIHAN</b><br>MBBS (DU), DFM, CCD (Biderm), PGT (OPHTH)<br>BMDC A-55144, MMC-BGD-016<br>DG Shipping Bangladesh Approved<br>General Physician<br>Radical Hospitals Limited | <br> |
| 2           |                                                                                                                                                                                                                                                                               |                                                                                                                                                                         |
| 3           |                                                                                                                                                                                                                                                                               |                                                                                                                                                                         |
| 4           |                                                                                                                                                                                                                                                                               |                                                                                                                                                                         |

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

Notwithstanding the above provision in the case of a pilgrim, this certificate shall indicate that two injections have been given at an interval of seven days and its validity shall commence from the date of the second injection.

The approved stamp mentioned above must be in a form prescribed by the health administration of the territory in which the vaccination is performed.

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

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

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

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

Toute correction ou rature sur le certificat ou l'omission d'une quelconque des mentions qui il comporte peut entraîner la nullité.

Any correction or erasure on the certificate or the omission of any one of the mentions which it contains may render it invalid.