REPORT OF MEDICAL EXAMINATION OF SEAFARER BY AN APPROVED MEDICAL EXAMINER. As per Merchant Shipping (Medical Examination) Rules 2000 and ISM / STCW code 1/9 and ILO convention 147 (MLC 2006) DR. MIR MD. RAIHAN MBBS, (DU), DFM RADICAL HOSPITAL LIMITED. 35 SHAH MAKDUM AVENUE, UTTARA, DHAKA-1230. TEL: +88027920116, +88 01955567000. EMAIL: radical_hospitals@yahoo.com Name: HOSSAIN KAMAL Sex: MALE Serial No: PP/CDC: PA0189403 Date of Birth: 1982 Rank: COOK Vessel: Type: Route: Home Address: ZIRAHI, WARD NO:02, RAIPURA, KATA GHATBAZAR, NARSINGDI Company Name **Medical History** Please answer the following to the best of your knowledge. Is there any past / present history of any of Candidate Examiner Examiner Declaration Record the following Declaration Yes No Yes No No Yes Yes | No-Severe one-sided headaches (Migraine) Hemia / Hydrocoele / Appendicitis Head Injury / Concussion / Loss of Memmory High / Low blood pressure / Heart disease Fits / Epilepsy / Dizziness / Fainting Asthama / Bronchitis / Tuberculosis Eye / Vision Problems (Glasses, etc. Allergy / Skin disease Hearing Impairment
Ear / Nose / Throat problems Infection / Contagious Disease Addication to alcohol / drugs / tobacco Stomach / Bowel disorders Fracture / Dislocation / Injury / Amputation Gall stones / Kidney disorders Major / Minor Operation Jaundice / Liver Disease Diabetes Piles / Varicose veins Nervous / Mental disease / Sleep disorder Blood Disorder Mallignant disease (Cancer) Female Disorder Signed off on medical grounds / Declared Unfit Notes Medical Examination 43-41 120 167pm bho CWV Distant Vision Corrected Field of Vision Uncorrected Audiometry 1000 | 2000 Right Eye Norma Abnormal Ishihara Norme Abnormal Right Ear Left ear Colour Vision Hearing Normal Systemic Examination Normal Abnormal Notes Abnormal Head & Neck Respiratory system FIT FOR SEA SERVICE Cardiovascular system Ears / Nose / Throat Per Abdomen Teeth / Oral Cavity AS COOK Genito-urinary system Musculo-Skeletal system AS PER MLC 2006 Nervous system Hemia / Hydrocoele Enhanced GARD Medicals done Fissure/Fistula/Piles Investigations Blood Result Normal Urine Hemoglobin 14-16 gm % Total WBC count 4000-11000 / cu.mm CIL-mm Specific Gravity Neu 63 00% NO 0 pH Malarial parasite Pond hour 1--15 mm/hr Albumin ESR Sugar 9--43 U/L Bile pigment S.Cholesterol .mg/dl 145--260 mg / dl Bile salts S.Triglycerides upto 200 mg/dl mg/dl Occult blood Blood Sugar RBC cells HbsAc Leucocytes HIV I & II Others Spirometry: GGTP U/L Blood Group Drugs of ECG: Nonm TMT: Abuse: X-Ray Chest: USG: Result of Medical Examination On the basis of the examinee's history, clinical examination and diagnostic tests, I,Dr. MIR MD Raihan , hereby declare the examinee medically Temporarily unfit Permanently unfit Should be re-examined in days / weeks / months. Remarks Recommendations certify that all information required under Annexure E & F of M.S. (Medical Examination) Rules 2000 is incorpor ed in this Certificate This certificate is valid till: 0.5 MAY 2025 Candidate's Signature Doctor's DR. MIR. MD. RAIHAN Date: MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) As Per-ML@2006 0 6 MAY 2023 BMDC A-55144, MMC-BGD-016 DG Snipping Bangladesh Approved General Physician Radical Hospitals Limited

84.2023.3886

MEDICAL SERVICES UNIT Form – A. ABROAD RECRUITMENT PRE EMPLOYMENT HEALTH SCREENING QUESTIONNAIRE



This questionnaire is only intended to screen the candidates for their health status during recruitment abroad. It is not designed, nor intended to replace subsequent medical assessment including physical examination and laboratory / radiology investigations that are highly specific to evaluate candidate ability to perform identified tasks as per the position applied for within ADNOC or its group companies.

The final fitness certificate shall be released subject to repeating medical assessment/investigations at ADNOC and receiving medical clearance from related government entities after arriving in UAE, with no additional liability in whatsoever means, to ADNOC or its group companies.

| First Name: | st Name: KAMAL Middle Name: HOSSAIN | | | | N | Family Name: | | | |
|--|-------------------------------------|------------------------|---------------------|----------------------|-------------------------------|-------------------------------------|--------------------------------------|-----------|----------|
| Date of birth | : 15-FE | B-1982 | Gender: | MALE | i | | Nationality: BANG | LADES | Н |
| Company: / | ADNOC | L & S | Job Title | : coo | K | | Marital Status: MARRIED | | |
| Home Address (Mobile): E-mail: kamalhossain5829@gmail.co | | | | | gmail.com | Reason for examinat MEDICAL CHEC | ion: :K-UP | | |
| Previous Em | ployment | | Marin M. | Line | | | | | |
| Jobs | | | Compan | ny | | | From (Year) | To (year) | |
| 1. COOK | | | ADN | OCL&S | | | 24-OCT-2010 | TILL NO | W |
| 2. | Term - | | | | | | | | |
| 3. | | | | | | | | | |
| 4. | | | | | | | | | |
| Previous Exp | oosure | ATTICK ST | ENVIOLE ! | | | | | | The same |
| Family Histo Tick if Yes □Heart dise □Allergy | ease | □Asthma □Cancer | □Ме | betes ental Disor | | ligh Blood Others (spe | cify): | | |
| | Age | State of Heal Death | olth - Cause of Age | | State of Health - Ca Death | use of | | | |
| Father | 50 | NORK | IAL 7 | | Wife / Husban | d 37 | | | |
| Mother | 62 | NORN | IAL | | Children | n 20 | | | |
| Siblings | | | | | | 16 | 建 | | V |
| Personal Hi | istory | | | | | | | | |
| Do you hav | | you ever had | Yes | No | | you have o the past? | or have you ever had | Yes | No |
| High Blood | pressure | | | | Kic | iney diseas | e | | _ |
| Angina (Ch | est pain) | | | | Kic | dney stones | STEP VI | | _ |
| Heart disea | ise | | | | | xiety/Depr ress/ Panic | ession/ Phobias/ attack | | |
| Cardiac sur | gery | | | Hospi | Fe | eep Disturb ar of confir | ance/ Fear of heights/ ned spaces | | |

Page 1 of 2

MSU/QRM/OHU/ARQ/1.1/16

| Do you have or have you ever had in the past? | | | Do you have or have you ever had in the past? | Yes | No |
|--|---|--|--|---------------------|---------------------|
| Asthma | | | Do you have any eye sight problems not corrected by glasses/contact lenses? | | |
| Chronic Bronchitis | | | Other eye problems / Glaucoma / Keratoconus / Restricted vision | | |
| Tuberculosis | | | Do you have any hear problems? | | |
| Peptic ulcer | | | Tinnitus | | |
| Hepatitis B/C | | | Chronic ear infection | | |
| Piles / Hemorrhoids | | | Diabetes (□Insulin dependent) Diabetes (□Non-Insulin dependent) | | |
| Hernia | | | Thyroid Disease | | |
| Chronic constipation | | | Anemia | | |
| Chronic diarrhea | | | Thalassemia | | |
| Other bowel disease | | | Sickle cell | | |
| Epilepsy | pilepsy | | Allergies that required medical advice | | |
| Stroke | | | Are you taking any medication on regular basis? If yes, please specify | | |
| Migraine | | | Are you having any hospital treatment or investigations at the moment? If yes, please specify | | / |
| Vertigo/balance problem | | | Are you waiting for any hospital treatment or investigation? If yes, please specify | | / |
| Back problems (neck/shoulder problems) | | | Do you have any other medical conditions? If yes, please specify | | |
| Joint problems (Flat-Feet) | | | Do you smoke? If yes, please specify the daily amounts. | | |
| Fractures / Deformities | | | Do you drink alcohol? If yes, please specify the daily amounts. | | / |
| Eczema | | | Do you/have you taken any drugs? If yes, which one? | | |
| Vitiligo | | | Others, skin condition | = 10:00 | / |
| FEMALES | | | | 72.4 | |
| Date of Last period | | | Is menstrual Blood loss heavy | es | □No |
| Are the periods regular ☐ Yes ☐ No | Are the | periods painful No | Are you taking contraceptive pills □Yes □No | | |
| Number of pregnancy: | | | Number of Live birth(s): | | |
| line with ADNOC policies or pertinent ADNOC or the assessing Physician from | Ministry of m any lega and acknow | f Health Laws or I liability by doin Jedge that furnis | dical information to relevant departments as local regulatory agency requirements. I do g so. I also declare the above provided intended in the falsified information would have serious the serious shing falsified information would have serious the serious seriou | hereby formation | release on to be |
| | AY 2023 | | gnature: V | | |

Page 2 of 2



MEDICAL SERVICES UNIT Form B – RECRUITMENT ABROAD PRE EMPLOYMENT MEDICAL ASSESSMENT



| Date of I | Examination: | | ADNO |
|---------------------|----------------------|---------------------------------|--|
| First Na | me: KAMAL | Middle Name: HOSSAIN | Family Name: |
| Date of I | Birth: 15-FEB-1982 | Gender: Male Female | e Nationality: BANGLADESH |
| Compan | y: ADNOC L & S | Job Title: COOK | Marital Status: MARRIED |
| Job Title | : COOK | Reason for Examination: MEI | DICAL CHECK-UP |
| Home A | ddress: | ZIRAHI, WARD NO:02, RAIPURA, K. | |
| Illnesses | | 22-MAY-2021 | , , , , , , , , , , , , , , , , , , , |
| System | Examination | Findings | Comment on Abnormal Findings or History |
| | Pulse | 186/~. | |
| ua | Blood Pressure | 1201/80/mg | |
| asc | Heart Apex | Cm, | |
| Cardiovascular | Heart Sounds | my | |
| pu | Heart Murmurs | m | |
| ర | Varicose Veins | m | |
| | Nasal Airway | m) | |
| | Thyroid | m | |
| Ţ | Trachea | com com | |
| atc | Chest Shape/Movement | m | |
| Respiratory | Percussion | NM | |
| Res | Air Entry | min. | |
| | Breath Sounds | m | |
| | Adventitia | cmo | |
| | Teeth | m | |
| | Tongue/Fauces | NW | |
| 7 | Abdomen | m | |
| nta | Liver | m | |
| imentary | Spleen | NM | |
| AII | Lymphadenopathy | nm | |
| | Hernial Orifices | cwo. | |
| | Anus, Rectum/P.R. | MM) | |
| | Kidney | m | |
| OD O | Genitalia | m | 1 |
| z | Hair | m | * |
| INTGN | Skin | m | |
| = | Nails | m | |
| | Hands | m | |
| tal | Limbs | m | |
| Muscuo- skeletal | Back | NY) | |
| S _K | Joints | EM. | |
| | Injuries | Wasnite My | |

| | | | | 413 | | | | | | | |
|--|--|-----------|------------|----------|-------------------------|--------------|--|---------------------------------------|---------------------------|-------------------------------|------------------------------------|
| | Cranial | Nerves | | 1 | II | III | IV | ٧ | VI | | TA TA |
| | Reflexes | | ВІ | VII | VIII | IX Va | X | XI | XII | | |
| E | Neriexe. | , | Rt | | Sup | Kn | An | PI | , | | |
| ste | | | Lt | m | m | 110 | m | | | | |
| s S | Power | | LL | M | 000 | my | 100 | MIL | 1 | | |
| 70/ | Tone | | | | | has | | 1 | | | |
| er | Coordination | | | | | ומל | m | 1 | | | |
| - | Sensation Emotional Stability | | | | | rom | $\overline{}$ | | | | |
| | | | | | | MV | | | | | |
| | Intellige | nce | | | | | mol | | 1 | | |
| | Meatus | | | | | ſ | _ | m | _ | | |
| Ears | Ear Drui | ns | | | | (| Vur | 4.700 molt on | 1 | | |
| E | Webber | /Rinne | | Rt | | | Lt. | T | | | |
| | Hearing | | | Rt | N | 3 | Lt. | | m) | | |
| | Light Re | | | | | No | nn | 4 | | | |
| Eyes | Accomn | | n | | | No | | 1 | | | |
| б | Nystagn | nus | | | | | $\mathcal{N}^{\mathcal{N}}$ | | | | |
| | Fundi | | | | | 7 | m | ~1 | | | |
| | | | Visual Ac | - | | 1973 | | H | | Colo | r Vision |
| Uncorrec | tod | R | 6 [0 | ear | | [| Distar | ce | | Normal | Abnormal |
| Oncorrec | .teu | L | 61 | | | | | | | / | |
| Correcte | d | R | - 0/ | 6. | | | _ | - | _ | | |
| | | L | | | | | | | | | |
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| | 441 | | | | | iscell | | | | A Part Tool | THE RESERVE OF THE PERSON NAMED IN |
| Height: | | | eight: | | _ | BMI: | | _ | | Pulse: 795 | BP: 120/90 |
| Chest Exp | pansion: | Vit | al Capacit | y: | | Force | | pira | tory | Chest X-ray: / | |
| Audiome | try | m | | | | Volum | ie: | | | . \ | IWD |
| | oup: B7 | | emoglobi | n. 10 | | | | 1.1 | Norm. | · · · · · · | |
| | B: Ne | | | | | | | | Hen | Urine P atitis A (Food han | Protein: NI |
| | | 900 | | | | 146 | 871/ | V7 | , | acitis A (FOOG Han | alers): |
| Examinin | g Physicia | an's Eva | luation/F | Recom | menc | lation | : | Vari | | | |
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| | or the job | | o be re-ev | aluate | | | ONL | 701 | YON | BOARD SHIP | |
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| □Tempo | or the job | it and to | |) | ed late | | | | | | |
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| Physician | or the job orarily unf | it and to | |) | ed late | RAIF | [AN | MBI | BS, D | | 4074 |
| Physician Physician | or the job orarily unf Name (Po Signature | rint nam | |) | ed late | RAIF | [AN | MBI | BS, D | FM | 4074 |
| Physician Physician Facility N | or the job orarily unf Name (Po Signature ame & Sta | rint nan | ne) DR | MIR | MD. | RAII Cont | IAN act P | MBI hone | BS, D | FM nail: +880171613 | 4074 |
| Physician Physician Facility N | or the job orarily unf Name (Po Signature | rint nan | | MIR D | MD. | RAIH Cont | IAN act P | MBI hone | BS, D | FM nail: +880171613 | 4074 |
| Physician Physician Facility N | or the job orarily unf Name (Po Signature ame & Sta | rint nan | ne) DR | MIR D | MD. R. N BS (DU), MDG. | RAIH Cont | IAN act P VID. CD (Bird 4. MM | MBI hone RA m), Pi C-BC | BS, D e / en THA GT (Ophi | FM nail: +880171613 | 4074 |
| Physician Physician Facility N Date of E | or the job orarily unf Name (Po Signature ame & Sta xaminatio | rint nan | ne) DR | MIR D | MD. R. N BS (DU), MDG. | RAIH Cont | IAN act P OD (Bird 4. MM nglade I Phys spital | MBI hone RA m), Pi C-BC | BS, D e / en THA GT (Ophi | FM nail: +880171613 | 4074 |
| Physician Physician Facility N | or the job orarily unf Name (Po Signature ame & Sta xaminatio | rint nan | ne) DR | MIR D | MD. R. N BS (DU), MDG. | RAIH Cont | IAN OD (Bird MM) nglade I Physis | MBI RA mm), PC C-BC ssh A | BS, De / en | FM nail: +880171613 N th) 6 | 4074 |
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MEDICAL SERVICES UNIT RECRUITMENT ABROAD PRE EMPLOYMENT MEDICAL FITNESS REQUIREMENT



INFORMATION FOR APPLICANTS:

The following medical information (including lab/radiology and related assessment reports) must be provided in original to proceed further with your recruitment formalities:

- FORM A Pre-Employment Health Screening Questionnaire to be completed and signed by the candidate.
- FORM B- Pre-Employment Medical Assessment to be completed, signed & stamped by the examining Physician of the healthcare facility.
- 3. Laboratory Investigations:
 - a) Complete Blood Count
 - b) Blood Group
 - c) FBS
 - d) Lipid profile
 - e) Liver function tests
 - f) Gamma GT
 - g) Creatinine
 - h) Urea Nitrogen
 - i) Urates
 - j) HBsAg & Anti-HCV IGM
 - k) Anti-HIV (1&2)
 - 1) Thyroid Hormones (for candidates over 50 years of age)
 - m) PSA (for candidates over 50 years of age)
 - n) HbA1C (for candidates over 40 years or diabetic)
 - o) Urinalysis (general)

4. Other tests:

- a) Audiometry test (audiogram)
- b) Vision Acuity & Color vision test
- c) Spirometry (Vitalograph)
- d) Resting ECG

5. Special tests

- Stress ECG (for candidates above 35 years of age and for job titles including drivers (heavy & light duty), crane operators, fire fighters, forklift drivers –irrespective of age.
- Stool general and culture for food handlers

6. Radiology Investigations:

Chest x-ray (P.A) — All candidates shall undergo chest X-ray in their home country only if indicated and/or as per the recommendation of examining Physician. According to the visa screening standard of Health Authority Abu Dhabi (HAAD) all candidates shall undergo chest x-ray upon arrival in UAE as a part of their medical fitness assessment.

SPECIAL NOTE ON MEDICAL FITNESS:

All the above mentioned requirements are only intended to screen the candidates for their health status during recruitment abroad. It is not designed, nor intended to replace subsequent medical assessment including physical examination and laboratory / radiology investignment would be conducted upon arrival in UAE.

The final fitness certificate shall only be released subject and receiving medical clearance from related as medical in whatsoever means, to ADNOC or its grown ompanies.

prepeating medical assessment/investigations at ADNOC leading (after arriving in UAE), with no additional liability

ISSUED ON BEHALF OF THE DEPARTMENT OF SHIPPING GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

Form No: SMC

Seafarer's Signature



SL NO.___

14.2023,3886

BMDC A-55144, MMC-5GD-616
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.
Name & Signature of the practitioner:

SEAFARER MEDICAL CERTIFICATE

This certificate is issued in accordance with Bangladesh Merchant Shipping Ordinance, 1983 and Bangladesh Merchant Shipping Officers and Ratings Training, Certification, Recruitment, Work Hours and Watch keeping Rules, 2011 in compliance with the International Convention on Standards of Training Certificate and Watch keeping for Seafarers, 1978 as amended (STCW'78) and Regulation 1.2 of the Maritime Labour Convention, 2006

| Seafarers, 1978 as amended (STCW'78) and Regulation | on 1.2 of the Maritime Labour Convention, 2006 |
|--|--|
| SEAFARER INFORMATION: | |
| Name: Last HOSSAZN First KAN | |
| Gender: (Male/Female). JYPHLENationality: BBI | NGILADER 277 Date: 0 6 MAY 2023 |
| Occupation: Deck/Engine/Catering/Other (specify) | / |
| Father's/ Husbad'sname: VMNVU 1772P | c.d.c.no. <i>PD0289403</i> |
| Mother's Name: Mother | Seaman ID No |
| Address: House No:Street/ Road No: | 0 - 1 - 11 - |
| Locality/Village: ZZRAHZ | |
| PO RAIPURA | Date of Birth: 15-02-1982 |
| PS KATA GHAT BAZAR | |
| District: IVARSINBDZ | (DD/MM/YYYY) |
| | 35.550 |
| DECLARATION OF THE RECOGNIZED MEDICAL PRACTITION | POSITION OF THE PROPERTY OF THE PARTY OF THE |
| | vernment of the People's Republic of Bangladesh and confirm |
| the followings: | |
| Confirmation that identification documents were check Hearing mosts the standards in continue A V/A | |
| Hearing meets the standards in section A-I/9 Unaided hearing satisfactory? | :YES/NO |
| Visual acuity meets standards in section A-I/9? | :YES/NO |
| Colour vision meets standards in section A-I/9? | :YES/NO |
| Date of last colour vision test | 0 6 MAY 2023 |
| 6. Fit for lookout duties? | XES/NO |
| 7. Is the seafarer free from any medical condition likely t | |
| render the seafarer unfit for service or to render the heal | A BANK IN THE SAME AND THE SECOND AND THE SAME AND |
| 8. Any limitations or restrictions on fitness? | :YES/NØ |
| If YES, specify limitations or restrictions: | |
| Duties: | |
| | OSPITAL LIMITED |
| Medical/Other: Uttara, Dh | aka, Bangladesh |
| | |
| Medical fitness category : Fit-No restriction | Fit-Subject to restrictions Unfit |
| 10. Date of examination/Issue (DD/MM/VVVV) 0.6 MAY 2 | 023 |
| To Bate of Grammation issue (BB/WW/1111) | |
| 11. Date of expiry (DD/MM/YYYY)0.5.MAY. 2025 | |
| Z.a. | sal Hospita |
| I have read the contents of the certificate and have been informed of the right to | DR. MIR. MD. RAIHAN |
| review. | MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 |

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifig:itions 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 24 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. The examination shall be conducted in accordance with the International Labor Organization World Health Organization, Guidelines for Conducting Pre-sea and Periodic Medical Fitness Examinations for Seafarers (ILO/WHO/D.211997). Such proof of examination must establish that the applicant is in satisfactory physical and mental condition for the specific duty assignment undertaken and is generally in possession of all body faculties necessary in fulfilling the requirements of the seafaring profession.

In conducting the examination, the certified physician should, where appropriate, examine the seafarers previous medical records (including vaccinations) and information on occupational history, noting any diseases, including alcohol or drug -related problems and/or injuries. In addition, the following minimum requirements shall apply:

(a) Hearing:

 All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whis pered voice in better ear at 15 feet (4.57m) and in poorer ear at 5 feet (1.52m).

(b) Eyesight:

- Deck officer applicants must have (either with or without glasses) at least 6/6 [20/20] (1.00) vision in one eye and at least 6/12 [20/40] (0.50) in the other. If the applicant wears glasses, he must have vision without glasses of at least 6/45 [20/150] (0.13) in both eyes. Deck officer applicants must also have normal color perception and be capable of distinguishing the colors red, green, blue and yellow.
- Engineer and radio officer applicants must have (either with or without glasses) at least 6/9 [20/30] (0.67) vision in
 one eye and at least 6/15 [20/50] (0.40) in the other. If the applicant wears glasses, he must have vision without
 glasses of at least 6/60 [20/200] (0.10) in both eyes. Engineer and radio officer applicants must also be able to
 perceive the colors red, yellow and green.

(c) Dental:

- Seafarers must be free from infections of the mouth cavity or gums.
- (d) Blood Pressure:
 - An applicant's blood pressure must fall within an average range, taking age into consideration.

(e) Voice:

 Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.

(f) Vaccinations:

 All applicants shall be vaccinated according to the requirements indicated in the WHO publication, Interna-tional Travel and Health, Vaccination Requirements, and Health Advice, and shall be given advice by the certified physician on immunizations. If new vaccinations are given, these shall be recorded.

(g) Diseases or Conditions:

 Applicants afflicted with any of the following diseases or conditions shall be disqualified: epilepsy, insanity, senility, alcoholism, tuberculosis, acute venereal disease or neurosyphilis, AIDS, and/or the useofnarcotics.
 Applicants diagnosed with, suspected of, orexposed to any communicable disease transmit table by food shall be restricted from working with food or in food - related areas until symptom-free for at least 48 hours.

(h) Physical Requirements:

- Applicants for able seaman, bosun, GP-1, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigational officer's certificate.
- Applicants for fireman/watertender, oiler/motorman, pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an enineer officer's certificate.

IMPORTANT NOTE:

An applicant who has been refused a medical certificate or has had a limitation imposed on his/her ability to work, shall be given the opportunity to have an additional examination by another medical practitioner or medical referee who is independent of the shipowner or of any organization of shipowners or seafarers.

Medical examination reports shall be marked as and remain confidential with the applicant having the fight of a copy to his/her report. The medical examination report shall be used only for determining the fitness of the seafarer for work and enhancing health care.

DETAILS OF MEDICAL EXAMINATION:

(To be completed by examining physician; alternatively, the examining physician may attach a form similar or identical to the model provided in Appendix1):

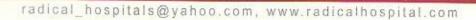
DR. MIR. MD. RAIHAN

1. Complete physical Examination.

2. Pathological Examination:

a.CBC b.ESR c.HBSAG d.LFT e.ECG f.RBS g.URINER/M/E
0 6 MAY 2023

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.





Id No : 0172

Patient's Name: KAMAL HOSSAIN

Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

Date: 06-May-2023 D.Date:

Age: 41Y 2M 21D

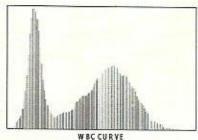
D.Date: 06-May-2023

Gender: Male

Haematology Report

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

| Parameter Name | Results | Reference Range | | |
|-----------------------------|--------------------|--|--|--|
| Hemoglobin (Hb) | 15.5 gm/dl | M:13-18 gm/dl. F:11.5-16.5 gm/dl Child:10-13 gm/dl. | | |
| ESR(Westergreen) | 06 mm/1st hr | Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr. | | |
| Total WBC Count(TC) | 7,800 /cumm | Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm | | |
| Differential WBC Count (DC) | | 0,000-18,000/Cullilli | | |
| Neutrophils | 63 % | Child: 25-66 %, Adult: 40-75 % | | |
| Lymphocytes | 29 % | Child: 52-62 %, Adult: 20-50 % | | |
| Monocytes | 06 % | Child: 03-07 %, Adult: 02-10 % | | |
| Eosinophils | 02 % | Child: 01-03 %, Adult: 01-06 % | | |
| Basophils | 00 % | Adult: 00-01 % | | |
| Total Cir. Eosinophils | 156 /cumm | 50-450/cumm | | |
| Total RBC Count | 5.82 m/ul | M: 4.5-6.5, F:3.8-5.8 m/ul | | |
| HCT/PCV | 41.0 % | M: 40-54%, F:37-47% | | |
| MCV | 70.4 fL | 76 - 94 fL | | |
| MCH | 26.6 pg | 27 - 32 pg | | |
| MCHC | 37.8 g/dL | 29 - 34 g/dL | | |
| RDW | 14.3 % | 11 - 16 % | | |
| PDW | 12.2 fL | 35 - 56 fl | | |
| Total Platelete Count (PC) | 1,94,000 /cumm | 150,000-450,000/cumm | | |
| MPV | 8.1 fL | 7.0 - 11.0 fL | | |
| PCT | 0.157 % | 0.1 - 0.% | | |



RBC CURVE

PLT CURVE

Checked By Medical Technologist

Dr. Sumaiya Khatun MBBS,MD(Gold Medalist) (BSMMU)

Associate Professor Dept. Of Microbiology East West Medical College & Hospital.



Result

Invoice No : DIA23050172 Bed/Ward No:

Outdoor

Inv.Date: 06-05-2023

Patient's Name : KAMAL HOSSAIN

Age: 41Y 2M 21D

Gender:

Male

Ref. By

: Dr. Mir Md. Raihan MBBS,(DU),CCD (BIRDEM),PGT(Eye),DFM (Forensic Medicine) Associate

Specimen

: Blood

Biochemical Report

| Test Name | Result Unit | | Normal Value | |
|---------------------------------|-------------|--------|--------------------|--|
| S. Urea | 17 | mg/dL | 10-40 | |
| Plasma Glucose Fasting | 5.8 | mmol/L | 4.2 - 6.2 | |
| HbA1C | 4.8 | % | <6.5 | |
| Gamma Glutamyl Transferase(GGT) | 32 | U/L | 0 - 55 U/L | |
| LIPID PROFILE | | | | |
| Total Cholesterol | 172 | mg/dL | Upto 200 | |
| HDL Cholesterol | 40 | mg/dL | M:35-55 F:40-65 | |
| LDL Cholesterol | 91 | mg/dL | <150 | |
| Triglyceride | 141 | mg/dL | 50-150 | |
| Liver Function Test | | | | |
| S. Bilirubin (Total) | 0.8 | mg/dl | 0.2-1.1 | |
| SGPT (ALT) | 26 | U/L | Up to 40 | |
| SGOT (AST) | 29 | U/L | Up to 37 | |
| S. Alkaline Phosphatase | 176 | U/L | Up to 270 | |
| | | | | |

Checked By

The

Medical Technologist Radical Hospitals Ltd. Uttara. Dhaka Dr. Sumaiya Khatun

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



Result

Invoice No : DIA23050172 Bed/Ward No: Outdoor Inv.Date : 06-05-2023

Patient's Name: KAMAL HOSSAIN Age: 41Y 2M 21D Gender; Male

Ref. By : Dr. Mir Md. Raihan MBBS,(DU),CCD (BIRDEM),PGT(Eye),DFM (Forensic Medicine) Associate

Specimen : Blood

Biochemical Report

| Test Name | Result | Unit | Normal Value |
|---------------------|--------|--------|---------------------------------|
| Renal Function Test | | | Marie and an area of the same |
| S.Creatinine | 0.8 | mg/dl | Male:0.6-1.3 Female: 0.5-1.2 |
| S.Urea | 19 | mg/dl | 10-40 |
| S. Sodium | 119 | mmol/L | 135-146 |
| S. Potassium | 3.1 | mmol/L | 3.5-5.5 |
| S. Chloride | 98 | mmol/L | 96-110 |

Checked By

Medical Technologist Radical Hospitals Ltd. Uttara, Dhaka Dr. Sumaiya Khatun

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



Invoice No : DIA23050172 Bed / Ward: Outdoor Inv. Date : 06-05-2023

Patient's Name : KAMAL HOSSAIN Age : 41Y 2M 21D Gender: Male

Ref. By : Dr. Mir Md. Raihan MBBS,(DU),CCD (BIRDEM),PGT(Eye),DFM (Forensic Medicine) Associat

Specimen : Blood

Serological Report

| Test Name | Result | Unit | Normal Value |
|--|----------|----------|-----------------------------------|
| HBsAg (ICT Method) | Negative | | |
| ICT for Syphilis | Negative | | |
| HIV 1/2 (ICT Method) | Negative | | |
| ТРНА | Negative | | |
| Anti HCV (ELISA) | 0.6 | OD Ratio | Negative: <1.0 Positive: >=1.0 |
| Blood Group & Rh Factor Blood Group (ABO) | B+VE | | |
| Rh Factor (D) | Positive | | |

Checked By

Medical Technologist Radical Hospitals Ltd. Uttara Dhaka Dr. Sumaiya Khatun

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



| Invoice No | ; | DIA23050172 | Bed / Ward No | | Inv. Date | 06-05-2023 |
|----------------|---|--------------------------------------|-----------------------|------------------|-----------------|---------------|
| Patient's Name | | KAMAL HOSSAIN | Age : | 41Y 2M 21D | Gender : | Male |
| Reff. By | : | Dr. Mir Md. Raihan MBBS,(DU),CCI | D (BIRDEM),PGT(Eye),D | DFM (Forensic Me | edicine) Associ | ate Professor |
| Specimen | : | (Forensic Medicine Department) Urine | | | | |

| Specimen : Urine | | |
|-------------------------------|----------------------|--|
| URINE EX | MAMINATION REPORT | |
| | nysical Examination | |
| Colour | Straw | |
| Appearance | Clear | |
| Sediment | Nil | |
| Specific Gravity | Not Done | |
| Ch | emical Examination | |
| pH | Acidic | AND A STATE OF THE PARTY OF THE |
| Albumin | Nil | |
| Glucose | Nil | |
| Ketone Bodies | Not Done | |
| Urobilinogen | Not Done | |
| Nitrite | Not Done | |
| Bilirubin | Not Done | |
| Microalbumin | Not Done | |
| Mici | roscopic Examination | |
| Epithelial Cells | 1-2 | /HPF |
| Pus Cells | 0-1 | /HPF |
| Red Blood Cells (RBC) | Nil | /HPF |
| Calcium Oxalate | Nil | |
| Amorphous Phosphate Cryastals | Nil | |
| Triple Phosphate Crystals | Nil | |
| Uric acid crystals | Nil | |
| Granular Cast | Nil | |
| Candida | Nil- | |
| Hayaline Cast | Nil | |
| Cysteine Cast | Nil | (2) |

Medical Technologist Radical Hospitals Ltd. Uttara Dhaka Dr. Sumaiya Khatun MBBS, MD(Gold Medalist) (BSMMU) Associate Professor Dept. Of Microbiology East West Medical College & Hospital.



Invoice No : DIA23050172 Inv. Date: 06-05-2023 Bed / Ward No: Outdoor Patient's Name: KAMAL HOSSAIN Age: 41Y 2M Gender: . Dr. Mir Md. Raihan MBBS,(DU),CCD (BIRDEM),PGT(Eye),DFM (Forensic Medicine) Associate

Stool Specimen

STOOL EXMAMINATION REPORT PHYSICAL EXAMINATION Consistency Soft Colour Straw Mucus Trace Blood Nill CHEMICAL EXAMINATION Reaction Not done Occult Blood Tes Not done Reducing substa Not done

| The state of the s | | | | |
|--|--|--|--|--|
| Microscopic Examination | | | | |
| 0-1 | | | | |
| 1-2 | | | | |
| Nil | | | | |
| Nil . | | | | |
| Nil | | | | |
| | | | | |

Checked By

Medical Technologist Radical Hospitals Ltd. Uttara Dhaka

Dr. Sumaiya Khatun

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



Date: 06/05/2023

EYE EXAMINATION REPORT

| NAME: | KAMAL HOSSAIN | |
|-------|---------------|--|
| AGE: | 41 YRS | |

VISUAL ACUITY:

RIGHT

LEFT

6/6

UNAIDED

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. : 23050172 Receive:06/05/2023 Print: 06/05/2023

Patient's Name : KAMAL HOSSAIN

Age : 41 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.

Page 1 of 1



Test Name

| Bill No | DIA23050172 | Received Date | 06/05/2023 | | | |
|----------------|---|-----------------|------------|--|------|--|
| Patient's Name | KAMAL HOSSAIN | an and a second | | | | |
| Patient's Age | 41Y 2M 21D | Patient's Sex | Male | | Male | |
| Ref. by | Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM | | | | | |
| Sample | URINE | | | | | |

Result

DRUG ABUSE TEST

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

radical_hospitals@yahoo.com, www.radicalhospital.com

DEPARTMENT OF RADIOLOGY & IMAGING

Sex

ID. No. : 23050172 Receive: Print: 06/05/2023

Patient's Name : KAMAL HOSSAIN

Age : 41 YRS

Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 96 b/min

Rhythm : Regular

P-Wave : Normal

P-R Interval : Normal

QRS Complex : Normal

ST. Segment : Is electric

T. Wave : Normal

Impression : Findings are within normal limit.

Dr. Debashish Paul

MBBS, MD (Cardiology)

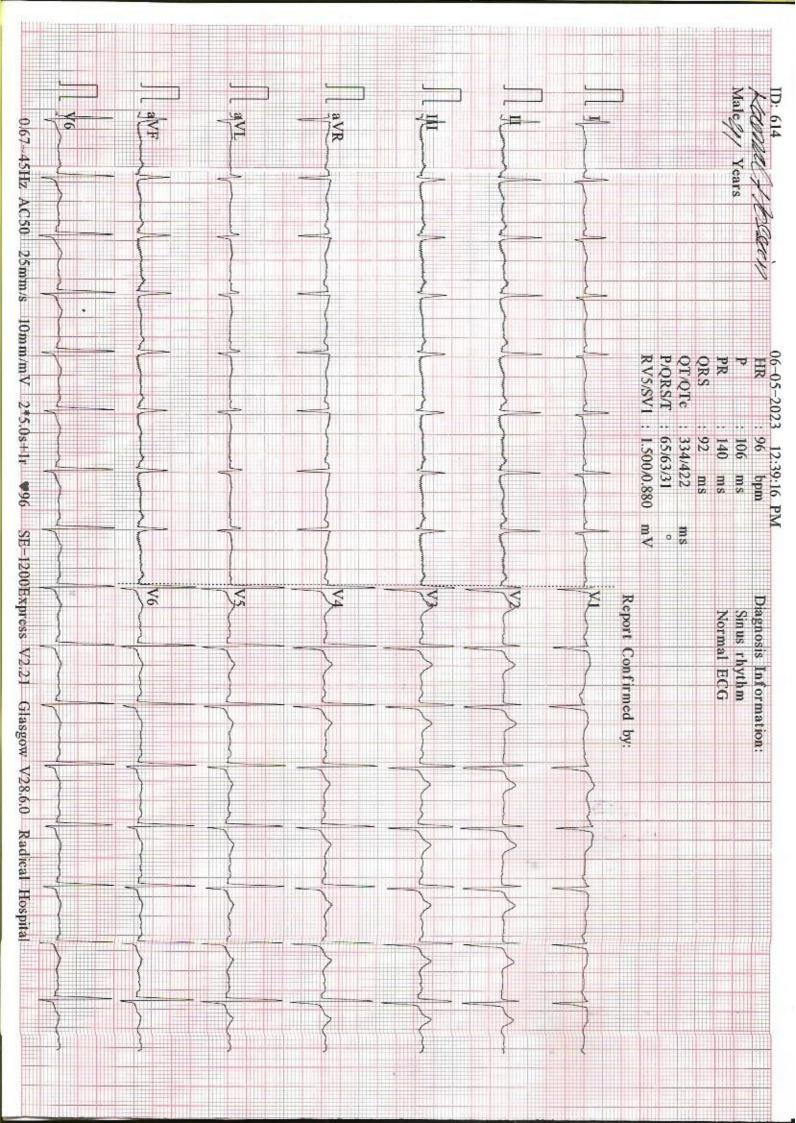
Associate Professor

Department of Cardiology

Sylhet Women's Medical College Hospital

This report has been electronically signed

Page 1 of 1





| Patient's Name | 10 | KAMAL HOSSAIN | ID NO | : | 23050172 | |
|--------------------|----|-----------------------------------|-------|---|------------|-----------|
| Age | : | 41 Yrs | Date | | 06/05/2023 | |
| Sex | : | Male | | | 00.00.2020 | |
| Referred by | : | Dr. Mir Md. Raihan MBBS,(DU), DFM | | | | |
| Nature of Specimen | : | | | | | Service . |

PULMONARY FUNCTION TEST (SPIROMETRY)

 $\begin{array}{ll} FVC & = 6 \\ FEV & = 5 \\ FEV/FVC & = 80\% \end{array}$

Comments: Normal Lung Function

Checked By

Dr. Mir Md. Raihan

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

AUDIOLOGICAL REPORT

Patient Name : KAMAL HOSSAIN

06/05/2023

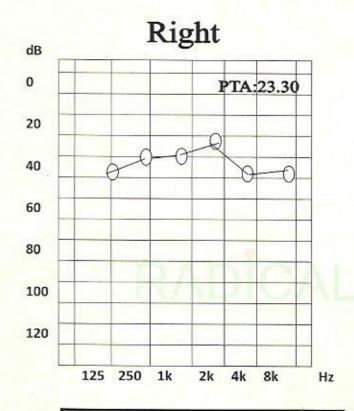
Age

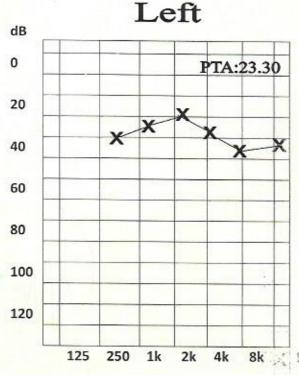
: 41 Yrs

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 Right Ear Left Ear Air MaskingOX

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.

BMDC A-55144, MMC-BGD-015 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited

Bone Masking AA