



HAQUE & SONS LTD.



Rummana Haque Tower, 1267/A, Goshaidanga, Agrabad C/A, Chattogram, Bangladesh.

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Accredited By : BMDC
Accreditation No. A 55144

PATIENT CONTROL NUMBER:
HSL-004400

MEDICAL EXAMINATION CERTIFICATE

SURNAME SAGAR		FIRST NAME AND MD		MIDDLE NAME NAYEEMUR RAHMAN	
PLACE AND DATE OF BIRTH SIRAJGANJ 30-Nov-1994		PASSPORT NUMBER A11090281		SEAMAN'S BOOK NUMBER CO8115	
NATIONALITY : BANGLADESHI		SEX : ☒ Male ☐ Female		VESSEL TYPE : OIL/CHEM TANKER	
PERMANENT HOME ADDRESS : DAULATPUR NATUN, WARD NO.07, BELKUCHI, DAULATPUR-6740, SIRAJGANJ, BANGLADESH				CONTACT NUMBER : +8801733202272(SELF)	
				RANK : 4TH ENGINEER	

Have you ever had any of the following conditions?

Condition	YES	NO	Condition	YES	NO
1 Eye/vision problem	☐	☒	18 Sleep problems	☐	☒
2 High blood pressure	☐	☒	19 Do you smoke?	☐	☒
3 Heart/vascular disease	☐	☒	20 Operation/surgery	☐	☒
4 Heart surgery	☐	☒	21 Epilepsy/seizures	☐	☒
5 Varicose veins	☐	☒	22 Dizziness/fainting	☐	☒
6 Asthma/bronchitis	☐	☒	23 Loss of consciousness	☐	☒
7 Blood disorder	☐	☒	24 Psychiatric problems	☐	☒
8 Diabetes	☐	☒	25 Depression	☐	☒
9 Thyroid problem	☐	☒	26 Attempted suicide	☐	☒
10 Digestive disorder	☐	☒	27 Loss of memory	☐	☒
11 Kidney problem	☐	☒	28 Balance problem	☐	☒
12 Skin problem	☐	☒	29 Severe headaches	☐	☒
13 Allergies	☐	☒	30 Ear/nose/throat problems	☐	☒
14 Infectious/contagious diseases	☐	☒	31 Restricted mobility	☐	☒
15 Hernia	☐	☒	32 Back problems	☐	☒
16 Genital disorders	☐	☒	33 Amputation	☐	☒
17 Pregnancy	☐	☒	34 Fractures/dislocations	☐	☒

If any of the above questions were answered "yes", please give details.

Additional questions

	YES	NO
35 Have you ever been signed off as sick or repatriated from a ship?	☐	☒
36 Have you ever been hospitalised?	☐	☒
37 Have you ever been declared unfit for sea duty?	☐	☒
38 Has your medical certificate ever been restricted or revoked?	☐	☒
39 Are you aware that you have any medical problems, diseases or illnesses?	☐	☒
40 Do you feel healthy and fit to perform the duties of your designated position/occupation?	☒	☐
41 Are you allergic to any medications?	☐	☒

Comments:

FIT FOR DUTY ON BOARD SHIP

42 Are you taking any non-prescription or prescription medications?	☐	☒
---	--------------------------	-------------------------------------

If yes, please list the medications taken and the purpose(s) and dosage(s)

I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to Dr. Mir Md. Raihan (approved medical practitioner) I also certify that my history contained above is true and any false statement will disqualify me from my employment, benefits and claims.

Nayem

Signature of Seafarer

MEDICAL EXAMINATION

Weight 80 kg	Height (cm) 172	BMI 27.0	Blood Pressure: Systolic 120 mm	Diastolic 80 mm	PULSE: 78 b/min																																								
<table border="1"> <thead> <tr> <th colspan="2">Ear</th> <th colspan="2">Hearing by Audiometry</th> <th colspan="4">Audiometry</th> <th colspan="2">Hearing by Whisper Test</th> </tr> <tr> <th></th> <th></th> <th></th> <th></th> <th>500</th> <th>1000</th> <th>2000</th> <th>3000</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Right</td> <td>☐ Adequate ☐ Inadequate</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>☒ Adequate ☐ Inadequate</td> <td></td> </tr> <tr> <td>Left</td> <td>☐ Adequate ☐ Inadequate</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>☐ Adequate ☐ Inadequate</td> <td></td> </tr> </tbody> </table>						Ear		Hearing by Audiometry		Audiometry				Hearing by Whisper Test						500	1000	2000	3000			Right	☐ Adequate ☐ Inadequate							☒ Adequate ☐ Inadequate		Left	☐ Adequate ☐ Inadequate							☐ Adequate ☐ Inadequate	
Ear		Hearing by Audiometry		Audiometry				Hearing by Whisper Test																																					
				500	1000	2000	3000																																						
Right	☐ Adequate ☐ Inadequate							☒ Adequate ☐ Inadequate																																					
Left	☐ Adequate ☐ Inadequate							☐ Adequate ☐ Inadequate																																					
Hearing meets the standards as laid down in STCW Code Section A-1/9 ? YES ☐ NO ☒																																													

	Visual acuity				Visual fields	
	Unaided		Aided		Normal	Defective
	Right eye	Left eye	Right eye	Left eye		
Distant	6/6	6/6			☒	☐
Near					☒	☐

Visual acuity meets the standard laid down in STCW Code Section A-1/9

Colour vision as per STCW CODE Section A-1/9:

☒ Normal☐ Doubtful☐ Defective

Date of last colour vision test: Date (day/month/year)

30 OCT 2023

	Normal	Abnormal		Normal	Abnormal
Head	☒	☐	Varicose veins	☒	☐
Sinuses, nose, throat	☒	☐	Vascular (inc. pedal pulses)	☒	☐
Mouth/teeth	☒	☐	Abdomen and viscera	☒	☐
Ears (general)	☒	☐	Hernia	☒	☐
Tympanic membrane	☒	☐	Anus (not rectal exam)	☒	☐
Eyes	☒	☐	G-U system	☒	☐
Ophthalmoscopy	☒	☐	Upper and lower extremities	☒	☐
Pupils	☒	☐	Spine (C/S, T/S and L/S)	☒	☐
Eye movement	☒	☐	Neurologic (full brief)	☒	☐
Lungs and chest	☒	☐	Psychiatric	☒	☐
Breast examination	☒	☐	General appearance	☒	☐
Heart	☒	☐	Skin	☒	☐

RESULTS OF ANCILLARY EXAMINATIONS

Chest X-Ray	☒	BIO CHEMICAL (LIVER FUNCTION TEST)	Marijuana	☐ Positive	☒ Negative
ECG	☒	BILIRUBIN	Alcohol Test	☐ Positive	☒ Negative
BLOOD R/E	☒	SGPT	URINE R/E	☒	☐
DC(differential count)	☒	SGOT	OTHERS	☒	☐
HAEMOGLOBIN (HGB)	☒	DRUG AND ALCOHOL TEST		HBsAg	☐ Reactive
ESR (WESTERGREN)	☒	Morphine	☐ Positive	☒ Negative	HIV / AIDS Test
WBC	☒	Amphetamine	☐ Positive	☒ Negative	VDRL
BLOOD GLUCOSE LEVEL	☒	Phencyclidine	☐ Positive	☒ Negative	Blood Type
RANDOM	☒	Barbiturates	☐ Positive	☒ Negative	Psychological Exam
HBA1C	☒	Cocaine	☐ Positive	☒ Negative	Others(KUB Ultrasound)

Hereby I declare that I am in knowledge of the contents of the Physical examinations:

30 OCT 2023

Signature of Seafarer

MD NAYEEMUR RAHMAN SAGAR

Name of Seafarer

Date

Assessment of fitness for service at sea:

On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the examinee medically:



Fit for lookout duties



Not fit for lookout duties

	Deck service	Engine service	Catering service	Other services
Fit	☒	☒	☒	☒
Unfit	☐	☐	☐	☐



Without restrictions



With restrictions

Is the Seafarer free from any medical conditions likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?

Yes

No

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

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

30 OCT 2023

29 OCT 2025

Fitness Date:

Valid Until:

DR. MD. NAYEEMUR RAHMAN SAGAR

General Physician

PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

THE REPUBLIC OF LIBERIA

LAST NAME OF APPLICANT SAGAR			FIRST NAME MD		MIDDLE INITIAL NAYEEMUR RAHMAN
DATE OF BIRTH 11 30 1994 MONTH DAY YEAR			PLACE OF BIRTH SIRAJGANJ BANGLADESH CITY COUNTRY		SEX MALE ☒ FEMALE ☐
EXAMINATION FOR DUTY AS: MASTER ☐ RATING ☐ MATE ☐ MOU DECK ☐ ENGINEER ☒ MOU ENGINE ☐ RADIO OFF ☐ SUPERNUMERARY ☐			MAILING ADDRESS OF APPLICANT: DAULATPUR NATUN, WARD NO.07, BELKUCHI, DAULATPUR-6740, SIRAJGANJ, BANGLADESH		
MEDICAL EXAMINATION (SEE PAGE 2) STATE DETAILS ON PAGE 2					
HEIGHT 172cm	WEIGHT 80kg	BLOOD PRESSURE 120/80 mmHg	PULSE 78b/min	RESPIRATION 19b/min	GENERAL APPEARANCE Good
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6 LEFT EYE 6/6			
DATE OF LAST COLOR VISION TEST (Month/Day/Year) 30 OCT 2023			Testing Required every 6 years		
COLOR VISION MEETS STANDARDS IN STCW CODE, TABLE A-1/9?			YES ☒ NO ☐		
COLOR TEST TYPE: BOOK " LANTERN " CHECK IF COLOR TEST IS NORMAL			YELLOW ☒ RED ☐ GREEN ☐ BLUE ☐		
HEARING RT. EAR Normal		LEFT EAR Normal			
HEAD AND NECK Normal		HEART (CARDIOVASCULAR) Normal			
LUNGS Normal		SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? Yes			
EXTREMITIES: UPPER Normal		LOWER Normal			
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY, OR TO RENDER HIM UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? IF YES, EXPLAIN IN DETAILS OF MEDICAL EXAMINATION ON PAGE 2.					
SIGNATURE OF APPLICANT Nayemur		DATE OF EXAM 30 OCT 2023		EXPIRY DATE 29 OCT 2025	
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN.					
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: MD. NAYEEMUR RAHMAN SAGAR (NAME OF APPLICANT)					
FIT FOR DUTY ON BOARD SHIP					
(HE) (SHE) IS FOUND TO BE (FIT) (NOT FIT) FOR DUTY AS A: (MASTER, MATE, ENGINEER, RADIO OFFICER, RATING, MOU DECK, MOU ENGINE or SUPERNUMERARY).					
NAME AND DEGREE OF PHYSICIAN		DR. MIR MD, RAIHAN ; M.B.B.S (D.U), REG.NO.A-55144			
ADDRESS REDICAL HOSPITALS LIMITED, 35, SHAH MAKHUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230, BANGLADESH					
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY DG SHIPPING, BANGLADESH					
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE		6-May-14			
SIGNATURE OF PHYSICIAN		DATE OF EXAMINATION: 30 OCT 2023			

This certificate is issued by authority of the Deputy Commissioner of Maritime Affairs, R.L. and in compliance with the requirements of the Maritime Labour Convention, 2006 for the Medical Examination of Seafarers.

The Medical Certificate shall be valid for no more than two (2) years from the date of the Examination for those over 18 years of age and for no more than one (1) year for those under 18 years of age.

RLM-I05M (REV. 12/17)

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



MEDICAL REQUIREMENT

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifications shall be required to have a physical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer certificate, application for seafarer's identity document, or application for certification of special qualifications. This physical examination must be carried out not more than 12 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. Such proof of examination must establish that the applicant is in satisfactory physical condition for the specific duty assignment undertaken and is generally in possession of all body faculties necessary in fulfilling the requirements of the seafaring profession. In addition, the following minimum requirements shall apply:

- (a) All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whispered voice in the better ear at 15 feet and in the poorer ear at 5 feet.
Deck officer applicants must have (either with or without glasses) at least 20/20 vision in one eye and at least 20/40 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/160 in both eyes. Deck officer applicants must also have normal color perception and be capable of distinguishing the colors red, green, blue and yellow.
- (b) Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and at least 20/50 in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/200 in both eyes. Engineer and radio officer applicants must also be able to perceive the colors red, yellow and green.
- (c) An applicant's blood pressure must fall within an average range, taking age into consideration.
- (d) Applicants afflicted with any of the following diseases or conditions shall be disqualified: epilepsy, insanity, senility, alcoholism, tuberculosis, acute venereal disease or neurosyphilis, AIDS and/or the use of narcotics.
- (e) Deck/Navigation officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (f) Applicants for able seaman, bosun, GP-I, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigation officer's certificate.
- (g) Applicants for fireman/watertender, oiler/motorman, pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an engineer officer's certificate.
- (h)

DETAILS OF MEDICAL EXAMINATION

(To be completed by examining physician)

1. COMPLETE PHYSICAL EXAMINATION INCLUDING HEARING TEST.

2. PATHOLOGICAL EXAMINATION : A) Complete Blood Count., B) Blood Sugar Estimation,

C) Serological Test(VDR) D) Hepatitis B Surface Antigen Test (HbsAg),

E) Urinlysis F) Drug Test G) Alcohol Test.

3. X - RAY EXR PA VIEW

4. E.C.G. TEST

5. EYE EXAMINATION FOR V/A & C/V


DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
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General Physician
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30 OCT 2023

RLM-105M (REV. 12/17)



Medical Exam Form
CONFIDENTIAL FORM

Pre-sea Exam ☒ Periodic Exam ☐

Name (last, first, middle): SAGAR, MD NAYEEMUR RAHMAN

Date of birth (day/month/year): 30 / 11 / 1994 Sex: male female ☒ ☐

Home address: DAULATPUR NATUN, WARD NO.07, BELKUCHI, DAULATPUR-6740,
SIRAJGANJ, BANGLADESH

Passport No./Discharge Book No.: A11090281

Department (deck/engine/radio/food handling/other): ENGINE

Routine and emergency duties (if known): _____

Type of ship (eg. Bulkcarrier, chemical/oil/gas tanker, container, other cargo ships): OIL/CHEMICAL
TANKER Trade area (e.g., coastal, tropical, worldwide): WORLDWIDE

Examinee's personal declaration

(Assistance should be offered by medical staff)

Have you ever had any of the following conditions:

Condition	Yes	No	Condition	Yes	No
1. Eye/vision problem	☐	☒	18. Sleeping problems	☐	☒
2. High blood pressure	☐	☒	19. Do you smoke?	☐	☒
3. Heart/vascular disease	☐	☒	20. Operation/surgery	☐	☒
4. Heart surgery	☐	☒	21. Epilepsy/seizures	☐	☒
5. Varicose veins	☐	☒	22. Dizziness/fainting	☐	☒
6. Asthma/bronchitis	☐	☒	23. Loss of consciousness	☐	☒
7. Blood disorder	☐	☒	24. Psychiatric problems	☐	☒
8. Diabetes	☐	☒	25. Depression	☐	☒
9. Thyroid problem	☐	☒	26. Attempted suicide	☐	☒
10. Digestive disorder	☐	☒	27. Loss of memory	☐	☒
11. Kidney problem	☐	☒	28. Balance problem	☐	☒
12. Skin problem	☐	☒	29. Severe headaches	☐	☒
13. Allergies	☐	☒	30. Ear/nose/throat problems	☐	☒
14. Infectious/contagious diseases	☐	☒	31. Restricted mobility	☐	☒
15. Hernia	☐	☒	32. Back problems	☐	☒
16. Genital disorders	☐	☒	33. Amputation	☐	☒
17. Pregnancy	☐	☒	34. Fractures/dislocations	☐	☒

If any of the above questions were answered "yes," please give details below.



Additional questions

- | | Yes | No |
|---|-------------------------------------|-------------------------------------|
| 35. Have you ever been signed off as sick or repatriated from a ship? | ☐ | ☒ |
| 36. Have you ever been hospitalized? | ☐ | ☒ |
| 37. Have you ever been declared unfit for sea duty? | ☐ | ☒ |
| 38. Has your medical certificate ever been restricted or revoked? | ☐ | ☒ |
| 39. Are you aware that you have any medical problems, diseases or illnesses? | ☐ | ☒ |
| 40. Do you feel healthy and fit to perform the duties of your designated position/occupation? | ☒ | ☐ |
| 41. Are you allergic to any medications? | ☐ | ☒ |

Comments:

FIT FOR DUTY ON BOARD SHIP

42. Are you taking any non-prescription or prescription medications? ☐ ☒

If yes, please list the medications taken and the purpose(s) and dosage(s).

I hereby certify that the personal declaration above is a true statement to the best of my knowledge.

Signature of examinee: _____

Date (day/month/year): 30 OCT 2023 / _____

Witnessed by: (Signature) _____

Name: (Typed or printed) _____

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.

I hereby authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to Dr. _____ (the approved medical examiner).

Signature of examinee: _____

Date (day/month/year): 30 OCT 2023 / _____

Witnessed by: (Signature) _____

Name: (Typed or printed) _____

DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
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DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.

Date & Contact details for previous medical examination (if known): _____



MEDICAL EXAMINATION

Sight

Use of glasses or contact lenses: Yes/No (If yes, specify which type and for what purpose)

Visual Acuity						
	Unaided			Aided		
	Right eye	Left eye	Binocular	Right eye	Left eye	Binocular
Distant	6/6	6/6	/			
Near	15	15	/			

Visual fields		
	Normal	Defective
Right eye	/	
Left eye	/	

Colorvision:

☐ Not tested

☒ Normal

☐ Doubtful

☐ Defective

Hearing

Pure tone and audio metry (threshold values in dB)

	500 Hz	1,000 Hz	2,000 Hz	3,000 Hz		
Right ear	20	20	20			
Left ear	20	20	20			

Speech and whisper test (metres)

	Normal	Whisper
Right ear	4	4
Left ear	4	4

Height: 172 (cm)

Weight: (kg) 80 (kg)

Pulse rate: 78 (/minute)

Rhythm: Regular

Blood pressure: Systolic: 120 (mm Hg) Diastolic: 80 (mm Hg)

Normal Abnormal

Normal Abnormal

Head

Sinuses, nose, throat

☒ ☐

Mouth/teeth

☒ ☐

Ears (general)

☒ ☐

Tympanic membrane

☒ ☐

Eyes

☒ ☐

Ophthalmoscopy

☒ ☐

Pupils

☒ ☐

Eyemovement

☒ ☐

Lungs and chest

☒ ☐

Breast examination

☒ ☐

Heart

☒ ☐

Skin

Varicose veins

☒ ☐

Vascular (inc. pedal pulses)

☒ ☐

Abdomen and viscera

☒ ☐

Hernia

☒ ☐

Anus (not rectal exam.)

☒ ☐

G-U system

☒ ☐

Upper and lower extremities

☒ ☐

Spine (C/S, T/S and L/S)

☒ ☐

Neurologic (full brief)

☒ ☐

Psychiatric

☒ ☐

General appearance

☒ ☐

Chest X-ray: ☐ Not performed ☒ Performed on (day/month/year):

30 OCT 2023

Results:

Normal chest X-ray



Urinalysis: Glucose: Nil Protein: Nil

Blood Analysis: Hepatitis B Test Negative V.D.R.L. Not Reactive
Immunodeficiency Virus Anti bodies Negative

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

Test

Result

Medical Examiners comments:

FIT FOR DUTY ON BOARD SHIP

Vaccination status recorded: ☒ Yes ☐ No

Assessment of fitness for service at sea

On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the examinee medically:

☒ Fit for lookout duty ☐ Not fit for look-out duty

	Deck service	Engine service	Catering service	Other services
Fit	☐	☒	☐	☐
Unfit	☐	☐	☐	☐

Without restrictions ☒ With restrictions ☐

Visual aid required: Yes ☐ No ☒

Describe restrictions (eg. Specific positions, type of ship, trade area)

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

29 OCT 2025

Medical certificate's date of expiration (day/month/year):

Date of examination (day/month/year): 30 OCT 2023

Number of Medical Certificate:

Official stamp:

Signature of medical practitioner:

Name of medical examiner: (Typed or printed)

Address of medical practitioner:

Authorized by: DR. SHARON BANERJEE (competent authority)

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.

RADICAL HOSPITAL LIMITED

Uttara, Dhaka, Bangladesh



SEAFARER'S MEDICAL EXAMINATION REPORT/CERTIFICATE
CONFIDENTIAL DOCUMENT

This certificate is issued by authority of the Maritime Administrator and in compliance with the requirements of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73), as amended, STCW Convention, 1978 as amended and the Maritime Labour Convention, 2006.

SURNAME SAGAR	GIVEN NAME(S) MD NAYEEMUR RAHMAN
NATIONALITY BANGLADESHI	ID DOCUMENT NO: C/O/8115
DATE OF BIRTH 11 30 1994 MONTH DAY YEAR	PLACE OF BIRTH SIRAJGANJ CITY BANGLADESH COUNTRY SEX ☒ MALE ☐ FEMALE
EXAMINATION FOR DUTY AS: MASTER ☐ DECK OFFICER ☐ ENGINEERING OFFICER ☒ RADIO OFFICER ☐ RATING ☐	MAILING ADDRESS OF APPLICANT: DAULATPUR NATUN, WARD NO.07, BELKUCHI, DAULATPUR-6740, SIRAJGANJ, BANGLADESH

DECLARATION OF APPROVED MEDICAL PRACTITIONER:
I CONFIRM THAT IDENTIFICATION DOCUMENTS WERE CHECKED: YES / NO

MEDICAL EXAMINATION (SEE LAST PAGE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE

HEIGHT 172cm	WEIGHT 80kg	BLOOD PRESSURE 120/80	PULSE 78b/min	RESPIRATION 19b/min	GENERAL APPEARANCE Good
VISION: WITHOUT GLASSES 6/6	RIGHT EYE 6/6	LEFT EYE 6/6	HEARING: RT. EAR	LEFT EAR	

COLOR TEST TYPE: BOOK ☐ LANTERN ☒ CHECK IF COLOR TEST IS NORMAL - YELLOW ☒ RED ☒ GREEN ☒ BLUE ☒

DATE OF LAST COLOR VISION TEST: 30 OCT 2023

ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARD? Yes ☐ No ☒

HEAD AND NECK Normal	HEART (CARDIOVASCULAR) Normal
LUNGS Normal	SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? ☒
EXTREMITIES: UPPER Normal	LOWER Normal

IS APPLICANT VACCINATED IN ACCORDANCE WITH WHO RECOMMENDATIONS? Yes ☒ No ☐

IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY WORKING ABOARD A VESSEL, OR TO RENDER HIM/HER UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD?
Yes ☐ No ☒

IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICATIONS? Yes ☐ No ☒

Nayem

30 OCT 2023

SIGNATURE OF APPLICANT

DATE

THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN



THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO:

MD NAYEEMUR RAHMAN SAGAR

NAME OF APPLICANT

THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE DISEASE: YES ☒

No ☐

SEAFARER IS FOUND TO BE ✓ FIT / NOT FIT FOR DUTY AS A (MASTER / DECK OFFICER / ENGINEERING OFFICER / RADIO OFFICER /
RATING/CHIEF COOK/ COOK) (WITHOUT ANY / WITH THE FOLLOWING) RESTRICTIONS:

NAME AND DEGREE OF PHYSICIAN _____

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.

ADDRESS RADICAL HOSPITAL LIMITED
Uttara, Dhaka, Bangladesh

NAME OF PHYSICIAN'S CERTIFYING AUTHORITY

DR. SHAPINU DINNADATTA

DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE _____

06 MAY 2014.

SIGNATURE OF PHYSICIAN :



DATE OF EXAMINATION: 30 OCT 2023

EXPIRY DATE OF CERTIFICATE : 29 OCT 2025

SEAFARER ACKNOWLEDGMENT

I, MD NAYEEMUR RAHMAN SAGAR (NAME OF SEAFARER), CONFIRM THAT I HAVE BEEN INFORMED OF THE
CONTENT OF CERTIFICATE AND THE RIGHT TO GET A REVIEW.



MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's identification and Record Book certification of special qualifications shall be required to have a physical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer certificate, application for seafarer's identity document, or application for certification of special qualifications. This physical examination must be carried out not more than 24 months immediately preceding applications 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.2/1997)*. Such proof of examination must establish that the applicant is in satisfactory physical and mental condition for the specified 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 physicians should, where appropriate, examine the seafarer's 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 whispered 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 20/20 (1.00) vision in one eye and at least 20/40 (0.50) in the other. If the applicant wears glasses, he must have vision without glasses of at least 20/160 (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 20/30 (0.63) vision in one eye and at least 20/50 (0.40) in the other. If the applicant wears glasses, he must have vision without glasses of at least 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/Navigation 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, International 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 use of narcotics.
- (h) **Physical Requirements**
 - Applicants for able seaman, bosun, GP-I, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigation officer's certificate.
 - Applicants for fireman/water tender, oiler/motor, pumpman, electrician, wiper, tanker rating and survival craft/rescue boat crewman must meet the physical requirements for an engineer officer's certificate.

IMPORTANT NOTE:

The seafarer must retain the original of the 'Medical Examination Report/Certificate' as evidence of physical qualification while serving on board a vessel. 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 right of a copy to his report. The medical examination report shall be used only for determining the fitness of the seafarer for work and enhancing health care. 'Fitness for duty' does not denote automatic employment. Final selection will be subject to meeting BSMs own minimum criteria for fitness, set out in the procedure manuals.

EXAMINATION:

(To be completed by examining physician; alternatively the examining physician may attach a form similar or identical to the model provided - Medical Exam Form).

30 OCT 2023



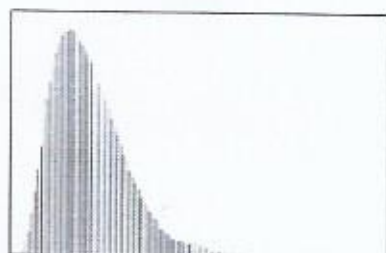
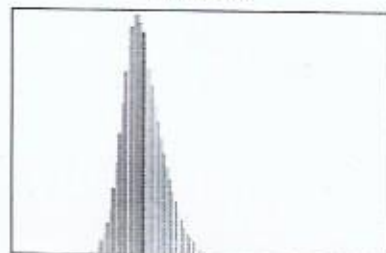
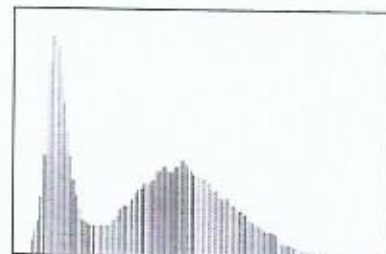
DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birm), PGT (Ophth)
BMD A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospitals Limited.

Id No : 23101076 **Date** : 30-Oct-2023 **D.Date** : 30-Oct-2023
Patient's Name : MD NAYEEMUR RAHMAN SAGAR **Age** : 28Y 11M 0D **Gender** : Male
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFMC/O/8115

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	16.1 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl.
ESR(Westergreen)	04 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	7,100 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	63 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	32 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	03 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	213 /cumm	50-450/cumm
Total RBC Count	5.42 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	43.8 %	M: 40-54%, F:37-47%
MCV	80.8 fL	76 - 94 fL
MCH	29.7 pg	27 - 32 pg
MCHC	36.8 g/dL	29 - 34 g/dL
RDW	12.1 %	11 - 16 %
PDW	15.9 fL	35 - 56 fL
Total Platelete Count (PC)	2,40,000 /cumm	150,000-450,000/cumm
MPV	7.6 fL	7.0 - 11.0 fL
PCT	0.182 %	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	DIA23101076	Received Date	30/10/2023
Patient's Name	MD NAYEEMUR RAHMAN SAGAR		
Patient's Age	28Y 11M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS, (DU), CCD(BIRDEM), PGT(Eye), DFM		CDC NO: C/O/ 8115
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.0 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.45 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	20.0U/L	Up to 37 U/L
HbA1C	5.62 %	4.2 - 6.7 %

REMARKS (IF ANY)

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

Checked By



Medical Technologist.
Radical Hospitals Ltd.



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

Bill No	DIA23101076	Received Date	30/10/2023
Patient's Name	MD NAYEEMUR RAHMAN SAGAR		
Patient's Age	28Y 11M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/8115
Sample	BLOOD		

SEROLOGICAL REPORT

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

BLOOD GROUPING Result	
ABO Blood Group	"B" (+ve)
Rh(D)Factor	.Positive

Checked By


Medical Technologist
Radical Hospitals Ltd.


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

Bill No	DIA23101076	Received Date	30/10/2023
Patient's Name	MD NAYEEMUR RAHMAN SAGAR		
Patient's Age	28Y 11M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/8115
Sample	URINE		

URINE ROUTINE EXAMINATION**PHYSICAL EXAMINATION MICROSCOPIC EXAMINATION**

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

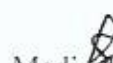
CHEMICAL EXAMINATION CASTS / LPF

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

ON REQUEST CRYSTALS & OTHERS

Bile Salt	Not Done	Urates	Nil
Bile Pigment	Not Done	Uric Acid	Nil
Ketones	Not Done	Calcium oxalate	Nil
Urobilinogen	Not Done	Amor. Phos	Nil
B.J. Protein	Not Done	Hippurate crystal	NIL

Checked By


 Medical Technologist.
 Radical Hospitals Ltd.


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

Bill No	DIA23101076	Received Date	30/10/2023
Patient's Name	MD NAYEEMUR RAHMAN SAGAR		
Patient's Age	28Y 11M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO	C/O/8115
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

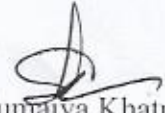
Test Name	Result
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Drug Level of Urine

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

Checked By


Medical Technologist.
Radical Hospitals Ltd.


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



REF: MT. BOWMORE

DATE: 30/10/2023

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

EYE EXAMINATION REPORT

NAME: MD NAYEEMUR RAHMAN SAGAR

RANK: 4TH ENG

CDC NO: C/O/8115

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

Patient's Name	:	MD NAYEEMUR RAHMAN SAGAR	Date	:	30/10/2023
Age	:	29 Yrs	CDC NO:	:	C/O/8115
Sex	:	Male			
Referred by	:	Dr. Mir Md. Raihan - MBBS, (DU), DFM			

Psychometric Test

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

ID: 104

30-10-2023 14:05:31

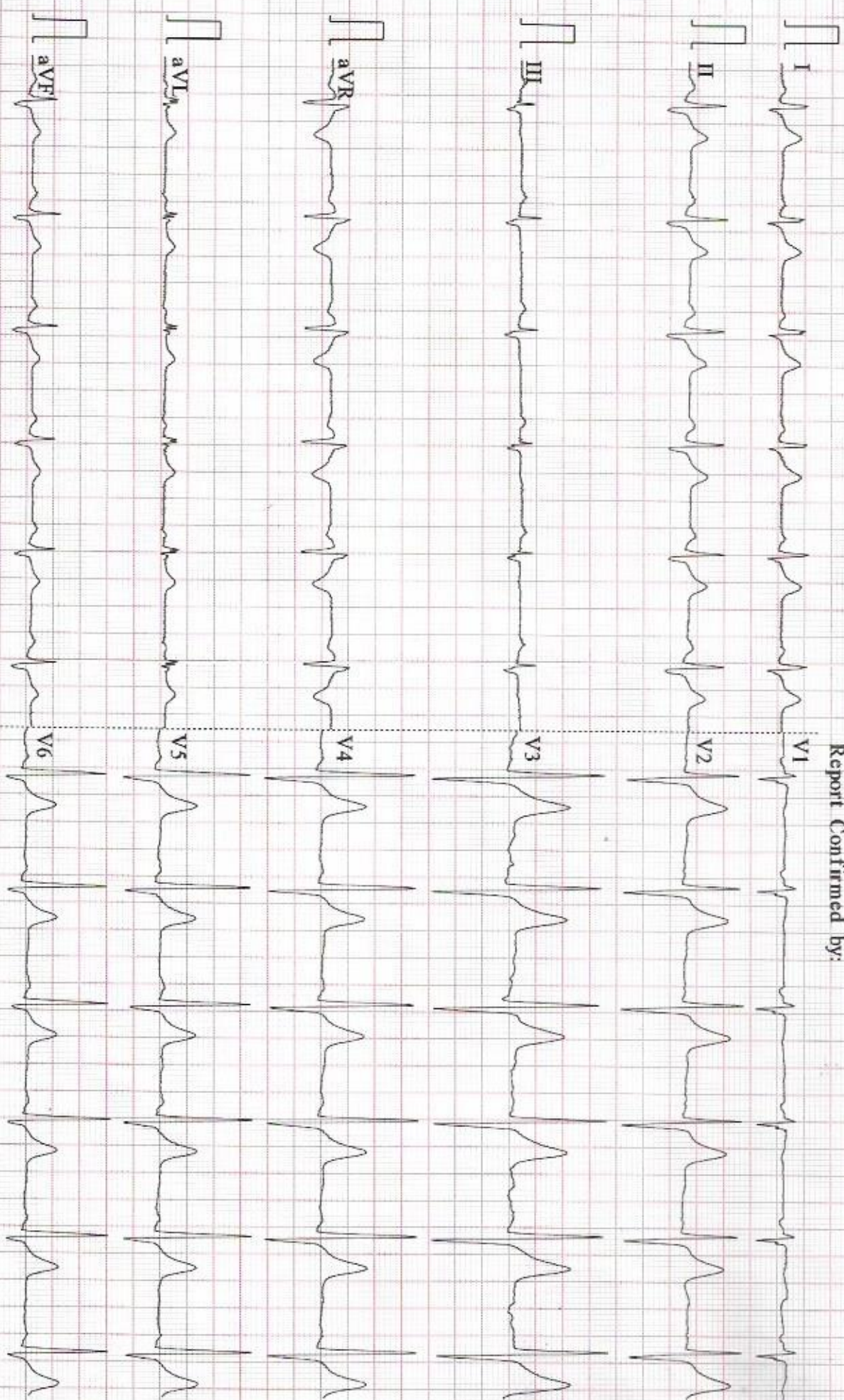
Male 29 Years

Mr. McNamee
Dr. [Signature]

HR : 70 bpm
P : 140 ms
PR : 164 ms
QRS : 108 ms
QT/QTc : 378/408 ms
P/QRS/T : 63/38/33 °
RV5/SV1 : 1.74/0.506 mV

Diagnosis Information:
Sinus rhythm
Normal ECG

Report Confirmed by:



0.67-100Hz AC50 25mm/s 10mm/mV 2*5.0s 70

SE-1200Express V2.21 Glasgow V28.6.0 Radical Hospital

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.	: 23101076	Receive: 30/10/2023	Print: 30/10/2023
Patient's Name	: MD NAYEEMUR RAHMAN SAGAR		
Age	: 29 Yrs	Sex	: M
Refd. by	: Dr. Mir Md. Raihan MBBS, (DU), CCD (BIRDEM), PGT (Eye), DFM		

X-RAY OF CHEST (DIGITAL)

Diaphragm : Both hemidiaphragm are normal in position.
C-P angles are clear.

Heart : Normal in T.D.

Lung : Lung fields are clear.

Bony thorax : Reveals no abnormality.

Comments : Normal chest skiagram.



Prof. Dr. Md. Mojibor Rahman
 MBBS, DMRD (Radiology & Imaging)
 Head of the Department (Radiology & Imaging)
 Sylhet Women's Medical College Hospital

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

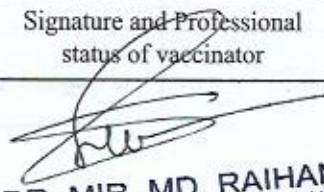
This is to certify that
whose signature follows

Date of birth 30-NOV-1994 Sex MALE

Nayem

MD. NAYEEMUR RAHMAN SAGAR (90/815)

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

Date	Signature and Professional status of vaccinator	Origin and batch no. of vaccine	Official stamp of vaccination centre
30 OCT 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.		
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4			

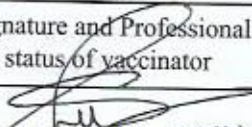
This certificate is valid on only if the vaccine used has been approved by the World Health Organization and if the vaccinating centre has been designated by the health administration for the territory in which that centre is situated.

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

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

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that } Date of birth 30-NOV-1994 Sex MALE
whose signature follows } MD. NAYEEMUR RAHMAN SAGAR (C/O/8/15)
Nayem
has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
1 30 OCT 2023	 DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birm), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician Radical Hospitals Limited.	
2		

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4			
5		5	6
6			
7		7	8
8			

Continued overleaf Suite our erso