

HAQUE & SONS LTD.

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

Accredited By : BMDC
Accreditation No : A 55144

PATIENT CONTROL NUMBER
201833

MEDICAL EXAMINATION CERTIFICATE

SURNAME SIDDIQUI	FIRST NAME TANVIR	MIDDLE NAME AHMED
PLACE AND DATE OF BIRTH BAGERHAT 29-Dec-1982	PASSPORT NUMBER A02188579	SEAMAN'S BOOK NUMBER CO4546
NATIONALITY : BANGLADESHI SEX : ☒ Male ☐ Female	VESSEL TYPE : CHEM. TANKER	TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : SABA TINI NIR, VILL: DASHANI, P.O: DASHANI, P.S : BAGERHAT, DIST: BAGERHAT.		CONTACT NUMBER : +8801941617225 (SELF)
RANK :		CHIEF 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

Question	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?	☐	☒
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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 practioner) I also certify that my history contained above is true and any false statement will disqualify me from my employment, benefits and claims.

Rumana

Signature of Seafarer

MEDICAL EXAMINATION

Weight 86kg	Height (cm) 177	BM 27.4	Blood Pressure: Systolic 120 Diastolic 80	PULSE 78																								
<table border="1"> <tr> <th colspan="2">Ear</th> <th colspan="4">Audiometry</th> <th colspan="2">Hearing by Whisper Test</th> </tr> <tr> <td>Right</td> <td>☐ Adequate ☐ Inadequate</td> <td>500</td> <td>1000</td> <td>2000</td> <td>3000</td> <td>☐ Adequate ☐ Inadequate</td> <td>☐ Adequate ☐ Inadequate</td> </tr> <tr> <td>Left</td> <td>☐ Adequate ☐ Inadequate</td> <td colspan="4"></td> <td>☐ Adequate ☐ Inadequate</td> <td>☐ Adequate ☐ Inadequate</td> </tr> </table>					Ear		Audiometry				Hearing by Whisper Test		Right	☐ Adequate ☐ Inadequate	500	1000	2000	3000	☐ Adequate ☐ Inadequate	☐ Adequate ☐ Inadequate	Left	☐ Adequate ☐ Inadequate					☐ Adequate ☐ Inadequate	☐ Adequate ☐ Inadequate
Ear		Audiometry				Hearing by Whisper Test																						
Right	☐ Adequate ☐ Inadequate	500	1000	2000	3000	☐ Adequate ☐ Inadequate	☐ Adequate ☐ Inadequate																					
Left	☐ Adequate ☐ Inadequate					☐ 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	Right eye	Left eye
Distant	6/6	6/6		☒	
Near					

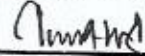
Visual acuity meets the standard laid down in STCW Code Section A-1/9
 Colour vision as per STCW CODE Section A-1/9: ☒ Normal ☐ Doubtful ☐ Defective

Date of last colour vision test: Date (day/month/year) **06 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
ECG	☒	BILIRUBIN	☐ Positive ☒ Negative
BLOOD R/E	☒	SGPT	☐ Positive ☒ Negative
DC(differential count)	☒	SGOT	URINE R/E
HAEMOGLOBIN (HGB)	14.7	DRUG AND ALCOHOL TEST	
ESR (WESTERGREN)	08	Morphine	☐ Positive ☒ Negative
WBC	5.900	Amphetamine	☐ Positive ☒ Negative
BLOOD GLUCOSE LEVEL	5.5	Phencyclidine	☐ Positive ☒ Negative
RANDOM	5.2%	Barbiturates	☐ Positive ☒ Negative
HBA1C	5.2%	Cocaine	☐ Positive ☒ Negative
		OTHERS	
		HBsAg	☐ Reactive ☒ Nonreactive
		HIV / AIDS Test	☐ Reactive ☒ Nonreactive
		VDRL	☐ Reactive ☒ Nonreactive
		Blood Type	☒
		Psychological Exam	☒
		Others(KUB Ultraso	☒

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

	TANVIR AHMED SIDDIQUI	06 OCT 2023
Signature of Seafarer	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
☐	Unfit	☐	Catering service
☐	Without restrictions	☐	Other services
☐	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):

Fitness Date: 06 OCT 2023	Valid Until: 05 OCT 2025
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DR. MRS. MD. RAIHAN
 Name and Signature of Authorized Physician

In Accordance with Medical Examination (Seafarers) Convention 1960 (No. 78) and STCW 1978/1996 as Amended, MLC 2006

MEDICAL CERTIFICATE FOR PERSONNEL SERVICE ON BOARD

SURNAME: SIDDIQUI		GIVEN NAME (S): TANVIR AHMED	
DATE OF BIRTH:		PLACE OF BIRTH	SEX
DAY 29	MONTH 12	CITY BAGERHAT COUNTRY BANGLADES	MALE ☒ FEMALE ☐
POSITION ON BOARD: MASTER DECK OFFICER ENGINEERING OFFICER RADIO OPERATOR RATING		MAILING ADDRESS OF APPLICANT: FLAT-A/3, HOUSE NO: 03, ROAD NO: 14/C, SECTOR-4, UTTARA. DIST. DHAKA. BANGLADESH.	

DECLARATION OF THE AUTHORIZED PHYSICIAN

VISION		COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSES	
RIGHT EYE	6/6	—	RIGHT EAR MB
LEFT EYE	6/6	—	LEFT EAR MB

Confirmation that identification documents were checked at the point of examination: YES ☒ NO ☐

Hearing meets the standards in STCW Code, Section A-1/9? YES ☒ NO ☐ NOT APPLICABLE ☐

Unaided hearing satisfactory? YES ☒ NO ☐

Visual acuity meets standards in STCW Code, Section A-1/9? YES ☒ NO ☐

Colour vision meets standards in STCW Code, Section A-1/9? YES ☒ NO ☐

(the visual test it is required every six years)

Date of the last colour vision test: (Day/Month/Year)

06 OCT 2023

Are glasses or contact lenses necessary to meet the required vision standards? YES ☐ NO ☒

Able for watchkeeping? YES ☒ NO ☐

Is applicant taking any non-prescription or prescription medications? YES ☐ NO ☒

Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarers unfit for such service or to endanger the health of other persons on board? YES ☐ NO ☒

Hereby I declare that I am in knowledge of the contents of the Physical Examination.

TANVIR AHMED SIDDIQUI

6-Oct-2023

Tanvir Ahmed
Signature of Applicant

Name of Applicant

Date

CIRCLE APPROPRIATE CHOICE: (HE / SHE) IS FOUND TO BE (FIT / NOT FIT) FOR DUTY AS A (MASTER / DECK OFFICER / ENGINEERING OFFICER / RADIO OPERATOR / RATING) (WITHOUT ANY / WITH THE FOLLOWING) RESTRICTIONS:

FIT FOR DUTY ON BOARD SHIP

NAME AND DEGREE OF PHYSICIAN: DR. MIR MD. RAIHAN; M.B.B.S.(D.U.), REG. NO. A-55144

ADDRESS: RADICAL HOSPITALS LIMITED, 35, SHAH MAKHDOM AVENUE, SECTOR-12, UTTARA, DHAKA-1230, BANGLADESH.

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY: DG SHIPPING BANGLADESH

DATE OF ISSUE PHYSICIAN'S CERTIFICATE: 06-05-2014

SIGNATURE OF PHYSICIAN:

STAMP OF PHYSICIAN:



DATE:

06 OCT 2023

EXPIRY DATE OF CERTIFICATE:

05 OCT 2025

This certificate is issued in compliance with the requirements

of the STCW Convention, 1978, as amended and the Maritime Labour Convention, 2006.

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 Hospitals Limited



HAQUE & SONS LTD.



Rummana Haque Tower, 1267/A, Goshaidanga,
Agrabad C/A, Chattogram, Bangladesh.
Tel: +88 02333316214-6

Name	TANVIR AHMED SIDDIQUI	Date	6-Oct-2023
Age	40	Sex	MALE
Passport No	A02188579	CDC No	CO4546
Sample	BLOOD	Rank	CHIEF ENGINEER

BIOCHEMISTRY REPORT COMPARE

Vessel Name:			
	After Sign-Off	Before Sign-On	Reference Range
Date of Report	MT.GINGA PANTHER	M.T.GINGA CHEETAH	-
Serum Bilirubin	0.8	06-10-2023 0.65	0.2 - 1.1 mg/dl
Serum S.G.O.T/A.S.T	32	24	Up to 37 U/L
Serum S.G.P.T.	29	27	Up to 42 U/L

DOCTOR'S REMARKS:

No Restrictions



Doctor Seal & Signature

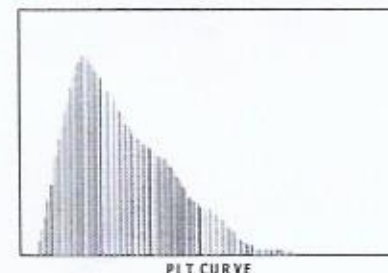
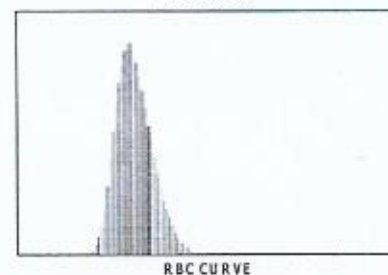
DR. MIR. MD. RAIHAN
MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipping Bangladesh Approved
General Physician
Radical Hospital Limited

Id No : 0236 **Date** : 06-Oct-2023 **D.Date** : 06-Oct-2023
Patient's Name : TANVIR AHMED SIDDIQUI **Age** : 40Y 9M 7D **Gender**: Female
Specimen : Blood
Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO : C/O/4546

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	14.7 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl. Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
ESR(Westergreen)	08 mm/1st hr	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Total WBC Count(TC)	5,900 /cumm	
Differential WBC Count (DC)		
Neutrophils	49 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	45 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	04 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	118 /cumm	50-450/cumm
Total RBC Count	5.32 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	38.2 %	M: 40-54%, F:37-47%
MCV	71.8 fL	76 - 94 fL
MCH	25.8 pg	27 - 32 pg
MCHC	35.9 g/dL	29 - 34 g/dL
RDW	13.8 %	11 - 16 %
PDW	14.1 fL	35 - 56 fL
Total Platelete Count (PC)	2,00,000 /cumm	150,000-450,000/cumm
MPV	9.5 fL	7.0 - 11.0 fL
PCT	0.166 %	0.1 - 0.5 %
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	DIA23100236	Received Date	06/10/2023
Patient's Name	TANVIR AHMED SIDDIQUI		
Patient's Age	40Y 9M 7D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/4546
Sample	BLOOD		

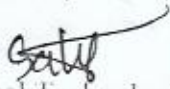
BIOCHEMISTRY REPORT

<u>Test Name</u>	<u>Result</u>	<u>Reference Range</u>
Random Blood Sugar (RBS)	5.5 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.63 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	24.0 U/L	Up to 37 U/L
Serum ALT (SGPT)	27.U/L	Up to 40 U/L
HbA1C	5.2 %	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
 M BBS, MD (Microbiology)
 Associate Professor
 Dept. of Microbiology
 East West Medical College and Hospital



Bill No	DIA23100236	Received Date	06/10/2023
Patient's Name	TANVIR AHMED SIDDIQUI		
Patient's Age	40Y 9M 7D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/4546
Sample	BLOOD		

SEROLOGICAL REPORT

Test Name

Result

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

BLOOD GROUPING

ABO Blood Group	"AB" (+ve)
Rh(D)Factor	Positive

Checked By

Dr. Sumaiya Khatun
MBBS, MD (Microbiology)

Bill No	DIA23100236	Received Date	06/10/2023
Patient's Name	TANVIR AHMED SIDDIQUI		
Patient's Age	40Y 9M 7D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/4546
Sample	BLOOD		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	Straw	R B C	Nil
Appearance	Clear	Pus Cells	2-3/HPF
Sediment	Nil	Epithelial	1-2/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

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	DIA23100236	Received Date	06/10/2023
Patient's Name	TANVIR AHMED SIDDIQUI		
Patient's Age	40Y 9M 7D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/4546
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

Checked By

Medical Technologist
Radical Hospitals Ltd.


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

Date: 06/10/2023

EYE EXAMINATION REPORT

NAME:	TANVIR AHMED SIDDIQUI		
AGE:	40 YRS	RANK: CH.ENG	CDC NO:C/O/4546

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

ID: 23091419

06-10-2023 16:29:12

Amr Ahmed Sedki
Male 40 Years

P : 71 bpm

PR : 112 ms

QRS : 166 ms

QT/QTc : 94 ms

P/QRS/T : 368/400

RV5/SV1 : 51/53/25

RV5/SV1 : 1.67/1.050

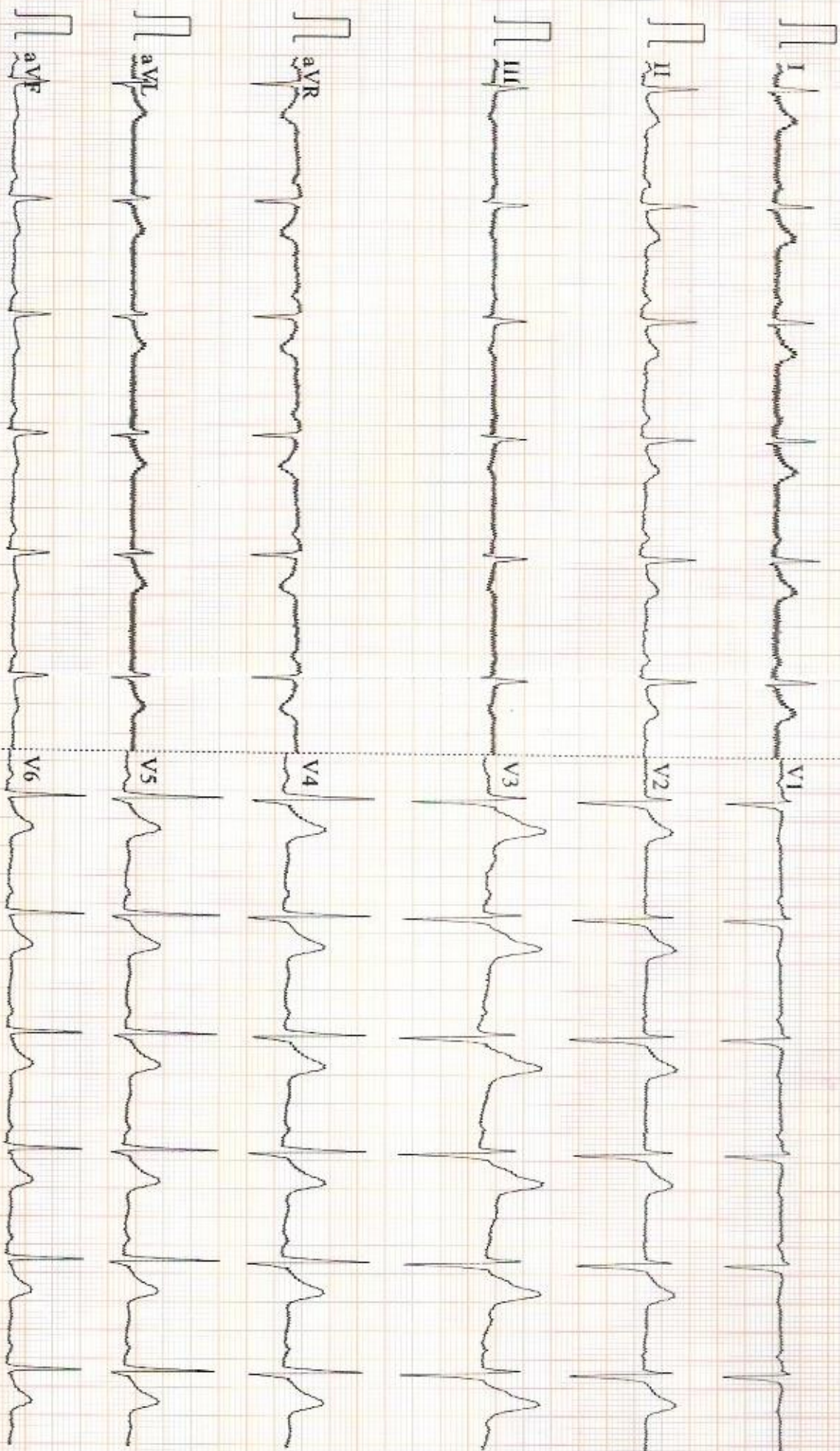
ms
°
mV

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23100236 Receive: 06/10/2023 Print: 06/10/2023
 Patient's Name : **TANVIR AHMED SIDDIQUI**
 Age : 40 Yrs Sex : M
 Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

X-RAY OF CHEST (DIGITAL)

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

Heart : Normal in T.D.

Lung : Lung fields are clear.

Bony thorax : Reveals no abnormality.

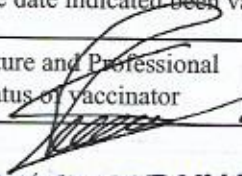
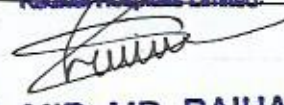
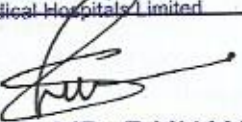
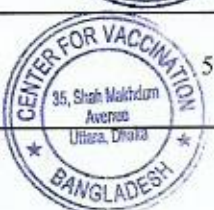
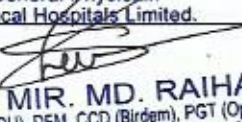
Comments : Normal chest skiagram.


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

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that } Date of birth 29-DEC-1982 Sex MALE
whose signature follows }

has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp
1 10 AUG 2020	 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.	
2 24 JAN 2021	 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.	
3 24 NOV 2021	 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.	
4		4
5 10 OCT 2022	 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.	
6		5
7 18 JUL 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.	
8		6
		7
		8

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