

INTERNATIONAL LABOUR ORGANIZATION

Sectoral Activities Programme

See text links below.

ILO/WHO/D.2/1997

Guidelines for Conducting Pre-sea and Periodic Medical Fitness Examinations for Seafarers

Part 6

Annex D

Minimum requirements for the medical examination of seafarers

Name (last, first, middle): AKBAR ALI	
Date of birth (day/month/year): 01 01/1981 Sex: male . Uf	emale
Home address: KUZUMPUR, 203HOMPUR-2542	
SIRATDIKHAN, MUNSHIGANY	
SIRADIKHAN, MUNSHIGANY Passport No./Discharge Book No.: A 02561789 / T/3461	59
Type of ship (container, tanker, passenger, fishing):	
Trade area (e.g., coastal, tropical, 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.	Sleep problems	□•	
2	2.	High blood pressure	[]•	d.	19.	Do you smoke?	□•	16
3	3.	Heart/vascular disease	□•	₫•	20.	Operation/surgery	□•	Y.
4	1.	Heart surgery	П•		21.	Epilepsy/seizures	. 0.	Ĭ.
5	5.	Varicose veins	∐•	d.	22.	Dizziness/fainting	D•	□ .
6	ò.	Asthma/bronchitis	·	Ca Hose	23.	Loss of consciousness	□•	í.

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7.	Blood disorder		4	24.	Psychiatric probl	ems		
8.	Diabetes	П	1	25.	Depression		П.	d
9.	Thyroid problem	П	V		Attempted suicio	le	D	
	Digestive disorder		9/		Loss of memory			
	Kidney problem	D	5	28.	Balance problem	1		Y
	Skin problem	П			Severe headache			~
	Allergies	IJ	U.	30.	Ear/nose/throat p	oroblems		4
	Infectious/contagious diseases	П			Restricted mobil			
	Hernia		4		Back problems			4 1
	Genital disorders		R		Amputation		П	1/
	Pregnancy		AM		Fractures/disloc	ations	, EI	
If a	ny of the above questions were ans	swered	"yes", p	lease	give details.			
					-			
		70						
			1.0		2.45			
Ad	ditional questions			. N			No	
	25. Have you over been signed o	eff ac ci	ick or rer	atriat	ed from a shin?	Yes	10	
	35. Have you ever been signed of	111 45 51	ick of fe	aura	ed from a smp.			
	36. Have you ever been hospital							
	37. Have you ever been declared						8	
	38. Has your medical certificate							
	39. Are you aware that you have illnesses?	**************************************					مل	
	 Do you feel healthy and fit t designated position/occupation 		orm the d	uties	of your	7		
	41. Are you allergic to any med	ication	s?				J	
C	Comments:							
	Veren	TOIND P	NITY ON	ROA	RD SHIP			
	jui	I FUR L	JUTTON	DUM	ND GIAI			
	42. Are you taking any non-pres medications?	scriptio	on or pre	script	ion 🗆		4	
	montantions.	11.02	(0)					

	icase iis	st the	medication	s taken	and ti	ne purpo	se(s) and do	sage(s).		
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hereby c	ertify t	hat th	e personal	leclarat	tion al	bove is a	true	e statem	ent to the	best of my k	nowledge.
ignature	of exa	minee	: bu	104	5_	Date	(day	month/	year):	2 1 OCT 202	3
Vitnesseo	d by: <i>(S</i>	ignati	ure) <u> </u>	- TO		-	Nan	ne: <i>(Ту</i> ן	ped or pri	DR, MIR. M MBBS (DU), DFM, CCD BMDC A-55144 DG Shipp.ng Ban General Radical Hos	ID. RAIHA (Birdem). PGT (Oph , MMC-BGD-01 gladesh Approve Physician pitals Limited
	titution									nealth profess the approved	
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ignature	of exa	minee	: Ale	BK	13	Date (d					
Vitnesse	d by: (S	ignat	ure)	A	4		_Na	me: (Ty	ped or pr	Int DR. MIR	. MD. RAII
				The	<u>U</u>					DG Shinn.ng	144, MMC-BGI Bangladesh Api eral Physician
										Radical	Hospitals Limite
Aedical	examir	ation	ĺ								
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			e and audio	metry	(thres	hold val	ues i	n dB)	Speech	and whisper	test (metres
Hearing			e and audio	metry 3,00 Hz	**********	hold val 4,000 Hz		000	Speech	and whisper	test (metres Whisper
Hearing	Pur 500	e tone	e and audio 2,000 Hz	3,00 Hz	**********	4,000	6,0	000	Speech	Normal	

Height: 167	(cm)	V	Veight:	68	(kg)	
Pulse rate: 78	(/(minute)	I	Rhythm:	Degr	Mr.	
Blood pressure:	Systolic: _	120	(mm Hg)	Diastolie: _	80	(mm Hg)
Urinalysis:	Glucose:	NI	1	Protein:	NI	
	Normal	Abnormal			Normal	Abnormal
Head			Varicose veins	S	4	
Sinuses, nose, throat	1		Vascular (inc.	pedal pulses)	4	
Mouth/teeth	J.		Abdomen and	viscera	ń	П
Ears (general)	Y LY COC	П	Hernia		L	
Tympanic membrane	Ō.		Anus (not rect	al exam.)		U
Eyes			G-U system		1	
Opthalmoscopy	Ú,		Upper and lov	ver extremities	ď	. LI
Pupils	ملاا	L	Spine (C/S, T/		1	U
Eye movement	N.	П	Neurologic (fu		74574	
Lungs and chest	Ú	L	Psychiatric		<i>-</i>	E
Breast examination	Nta		General appea	rance		
Heart	. 6	П	11			1.77
Skin	4	LI				
Chest X-ray:	□ Not perf	ormed	Performed	on (day/month/	year):	OCT 2023
Results:	Nunn	u c	ehen-	xy		
Other diagnostic test(s) and result	(s):		/	*	
Test B	7/00F	tur,	ne Result	Noma	ul.	
Medical examiner's	comments:				(in ?	M
		FIT FO	OR DUTY ON BO	ARD SHIP		
Vaccinatio	on status rec	orded:	· 🗆 Yes		• 🗆 No	
	Ass	essment of	fitness for serv	ice 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:



Place of examination:
Without restrictions With restrictions Describe restrictions (e.g., specific position, type of ship, trade area) Action taken by medical examiner (e.g., referral): RADICAL HOSPITAL LIMITED Place of examination: Utara, Dhaka, Bangiadesh Date of examination (day/month/year): DR. MIR. MD. RAIHAN Official stamp (also print name of medical examiner if not legib MBS (DU) DFM. CCO (Birdom), PGT (Ophth) Signature of medical examiner: General Physician Radical Hospitals Limited.
Describe restrictions (e.g., specific position, type of ship, trade area) Action taken by medical examiner (e.g., referral): RADICAL HOSPITAL LIMITED Place of examination: Ustara, Dhaka, Bangladesh Date of examination (day/month/year): Medical certificate's date of expiration (day/month/year): DR. MIR. MD. RAIHAN Deficial stamp (also print name of medical examiner if not legithess (DU), DFM. CCD (Birdem), PGT (Ophth) BMDC A-551424, MMC-BGD-016 DG Shipp.ng Bangladesh Approved General Physician Redical Hospitals Limited.
Action taken by medical examiner (e.g., referral): Place of examination: RADICAL HOSPITAL LIMITED 21 OCT Usara, Dhaka, Bangladesh Date of examination (day/month/year): Medical certificate's date of expiration (day/month/year): 20 OCT 2025 DR. MIR. MD. RAIHAN DRICE (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Redical Hospitals Limited.
Place of examination: Ustara, Dhaka, Bangladesh Date of examination (day/month/year): Medical certificate's date of expiration (day/month/year): DR. MIR. MD. RAIHAN Official stamp (also print name of medical examiner if not legibles (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 OG Shipping Bangladesh Approved General Physician Redical Hospitals Limited.
Place of examination:
Place of examination: Uttara, Dhaka, Bangladesh Date of examination (day/month/year): / Medical certificate's date of expiration (day/month/year): 2 0 0CT 2025 / DR, MIR. MD. RAIHAN Official stamp (also print name of medical examiner if not legibles (DU) DPM. CCD (Birdem). PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician
Place of examination:
Place of examination: Ustara, Dhaka, Bangladesh Date of examination (day/month/year): Medical certificate's date of expiration (day/month/year): DR. MIR. MD. RAIHAN Official stamp (also print name of medical examiner if not legibles (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 OG Shipping Bangladesh Approved General Physician Redical Hospitals Limited.
lace of examination:
Official stamp (also print name of medical examiner if not legit MBRS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.
Official stamp (also print name of medical examiner if not legit MRS (DU), DFM. CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 OG Shipp.ng Bangladesh Approved General Physician Redical Hospitals Limited.
Signature of medical examiner: DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.
Signature of medical examiner: General Physician Redical Hospitals Limited.
(competent authority)
ABOUT SECTOR SECTORS MEETINGS PUBLICATIONS WHATS NEW
AL TON
For further information, please contact the Sectoral Activities Department (SECTOR)
t Tel: Fax: or email: sector@ilo.org

• ☐ Fit for look-out duty



MEDICAL EXAMINATION REPORT/CERTIFICATE

	TIAL DOCUMENT
REPUBLIC OF THE	MARSHALL ISLANDS
	GIVEN NAME(S) ALI
DATE OF BIRTH	PLACE OF BIRTH SEX
Q1 MONTH Q1 DAY 1009 EAR	CITY MANS MARK COUNTRY MALE FEMALE
1481	MAILING ADDRESS OF APPLICANT:
MASTER DECK OFFICER ENGINEERING OFFICER RADIO OFFICER RATING	FUSUMPAR—, SUS HAMPARIS AZ SIRPIDIK FADIV, MUNSMUMINJ
MEDICAL EXAMINATION (SEE REVERSE SIDE FOR MEDICAL EXAMINATION (SEE SIDE SIDE SIDE SIDE SIDE SIDE SIDE S	DICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE
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ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED V.	ISION STANDARD? YES NO NO
HEAD AND NECK	HEART (CARDIOVASCULAR)
LUNGS	Nonm 1
LUNGS	SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION?
EXTREMITIES:	
UPPER	LOWERNonm
IS APPLICANT VACCINATED IN ACCORDANCE WITH WHO RECOMMENDATE	IONS? YES NO
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD' IF YES, PLEASE ENTER EXPLANATION IN THE SECTION AT THE BOTTOM OF C	
IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICAL	TIONS? YES . NO .
ALCONGRA	2 1 OCT 2023 2 0 OCT 2025
SIGNATURE OF APPLICANT	DATE OF EXAMINATION EXPIRY DATE
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMIN	
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION W. FIT FOR DUTY ON	
THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE DISEAS	
SEAFARER IS FOUND TO BE FIT / NOT FIT FOR DUTY AS A	MASTER / DECK OFFICER / ENGINEERING OFFICER / WITHOUT ANY RESTRICTIONS / WITH THE FOLLOWING
NAME AND DEGREE OF PHYSICIAN DR. MIR MD RAIHAN	MBBS, DFM
1000-1000-2000	HDUM AVENUE SECTOR-12, UTTARA, DHAKA-1230
	SHIPPING BANGLADESH
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE 06 MAY 20	014

DATE This certificate is issued by authority of the Maritime Administrator and in compliance with the requirements of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers 1978, as amended, and the Maritime Labour 2006, as amended.

Rev. Mar/2022

SIGNATURE 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

MI-105M

2 1 OCT 2023

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Scafarer's Identification and Record Book or certification of special qualifications shall be required to have a medical examination reported on this Medical Form completed by a certificated physician. The completed medical form must accompany the application for officer's certificate, application for Seafarer's Identification and Record Book, or application for certification of special qualifications. This medical examination must be carried out within the 24 months immediately preceding application for an officer certificate, certification of special qualifications or a Seafarer's Identification and Record Book. The examination shall be conducted in accordance with RMI MG-7-47-1. 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 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 (4.57 m) and in poorer ear at 5 feet (1.52 m).
- (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. Applicants for deck officer and deck ratings who will serve on vessels of 500 gross tons or more must have
 normal color perception that complies with C.I.E. Standard 1; those serving on vessels less than 500 gross tons must comply
 with C.I.E. Standards 1 or 2.
 - 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. Applicants for engineering officer or rating and for radio operator must comply with C.I.E. Standards 1, 2, or 3. 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 should be vaccinated according to the recommendations provided in the WHO publication, International Travel
 and Health, Vaccination Requirements and Health Advice, and should be given advice by the certified physician on
 immunizations. If new vaccinations are given, these should 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 use of narcotics.
- (h) Physical Requirements
 - Applicants for able seafarer, bosun, GP-1, ordinary seafarer and junior ordinary seafarer must meet the physical requirements for a deck/navigational officer's certificate.
 - Applicants for fire/watertender, oiler/motor, pump technician, electrician, wiper, tanker rating and survival craft/rescue boat crewmember must meet the physical requirements for an engineer officer's certificate.

IMPORTANT NOTE:

A copy of the MI-105M must accompany the application. The applicant must retain the original of the MI-105M 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/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 an equivalent form (See RMI MG 7-17-1, §3.3).

DR, MIR. MD. RAIHAN
MB86 (DU). DFM. CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipp.ng Bangladesh Approved
General Physician
Radical Hospitals Limited.

2 1 OCT 2023



PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

	THE RE	PUBLIC OF LIBERIA	ANNEX 2
LAST NAME OF APPLICANT	AKBAR	FIRST NAME ALI	MIDDLE INITIAL
DATE OF BIRTH		PLACE OF BIRTH	SEX
MONTH 02 DAY 02	YEAR 2921	CITY MUTSPHANT COUNTRY BANGLA	MALE! FEMALE
EXAMINATION FOR DUTY AS:	7/07	MAILING ADDRESS OF APPLICANT:	
MASTER	RATING	KUSUMPUR, SUST	nomfor-154
MATE ENGINEER	MOU DECK	D CONTRACTION OF	nomenaco
RADIO OFF	MOU ENGINE SUPERNUMERARY	SIROJUIEMIN, JYU	NS MIGHTY
MEDICAL EXAMINATIO	N (SEE PAGE 2) STATE D	DETAILS ON PAGE 2	
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WITH GLASSES	21 00	2023	
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TO ENDANGER THE HEALTH O	FOTHER PERSONS ON BOARD	? IF YES, EXPLAIN IN DETAILS OF MEDICAL EXAMINA	TION ON PAGE 2.
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SIGNATURE OF APPLI	CANT	D. Carrier and Control of Control	PIRY DATE
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THIS IS TO CERTIFY THAT A PH	AND THE RESERVE OF THE PARTY OF	215 212000	
	The state of the s	ON BOARD SHIP (NAME OF APPLICANT)	
(HE) (SHE) IS FOUND TO BE (FT)	ONOT FITS FOR DUTY AS A: 0	MASTER MATE, ENGINEER, RADIO OFFICER, RATING, I	(OLI BEAV A POLITICALIS
GOLGIOVOMERARI). IF EX	APLOYED AS A WATCHSTAND	ER (DE) (SHE) IS FOUND TO BE (DI) (NOT FIT) FOR LOC	MOU DECK, MOU ENGINE or OKOUT DUTIES?
		. RAIHAN MBBS,(DU), DFM	
ADDRESS RADICAL HO	SPITALS LIMITED. 35,	SHAH MAKHDUM AVENUE, SECTOR-12,	UTTARA, DHAKA-1230
		TTY DG SHIPPING BANGLADESH	
DATE OF ISSUE OF PHYS	ICIAN'S CERTIFICATE 06	MAY 2014	21 007 0000
SIGNATURE OF PHYSICIA		DATE OF EXAMIN	Z 1 OCT 2023
This certificate is issued by requirements of	authority of the Deputy Co the Maritime Labour Conve	ommissioner of Maritime Affairs, R.L. and in conntion, 2006 for the Medical Examination of Seafare	opliance with the
The Medical Certificate sl	hall be valid for no more tha	in two (2) years from the date of the Examination	
years of age and	nor no more than one (1) ye	ear for those under 18 years of age.	
RLM-I05M (REV. 12/17) MBB:	R. MIR. MD. RAIHA	N A HOSOIG	
BM	DC A-55144, MMC BGD 014		
06	Shipping Bangladesh Approve General Physician	d (S (As Po-MLC-2008))	9 to 2011
	Radical Hospitals Limited.	18	

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.
- (b) 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.
- (c) 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.
- (d) An applicant's blood pressure must fall within an average range, taking age into consideration.
- (e) 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.
- (f) Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (g) Applicants for able seafarer deck, bosun, GP-1, ordinary seaman and junior ordinary seaman must meet the physical requirements for a deck/navigational officer's certificate.
- (h) Applicants for fireman/watertender, oiler/motorman, able seafarer engine pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an engineer officer's certificate.

DETAILS OF MEDICAL EXAMINATION

(To be completed by examining physician)

01. Completed Physical Examination

02. Pathological Test

03. Radiological Test

04. Ophthalmology Examination For VA & CV

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 1 OCT 2023





Bill No	DIA23100791	Received Date	21/10/2023
Patient's Name	ALI AKBAR		
Patient's Age	42Y 9M 20D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDE	M),PGT(Eye),DFM	CDC NO: T/34559
Sample	BLOOD		

SEROLOGYCAL REPORT

Test Name

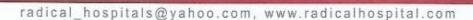
Result

HIV 1 & 2 (Method ; (ICT)	Negative	

RADICAL HOSPITAL

Checkod By

Medical Technologist. Radical Hospitals Ltd. Dr. Sunsaiya Khatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital



Test Name



Bill No	DIA23100791	Received Date	21/10/2023
Patient's Name	ALI AKBAR		
Patient's Age	42Y 9M 20D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),(CCD(BIRDEM),PGT(Eye),DFM	CDC NO: T/34559
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 Technologist. Radical Hospitals Ltd. Dr. Sumaiya Khatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital.



TREADMILLSTRESS TEST

Patient ID	23100791	Test Date	21-10-202	23	
Patient Name	ALI AKBAR	Age	42 Yrs	Sex	Male
Attending Dr.	Dr. ROSEYAT PERVEEN			1000	

Total Exercise Time

: 09:0 Min

Max.HR attained

: 166 bpm.

% of max.pred. hR

: 98 %

Max. Pred HR

: 166 bpm.

Maximum BP

: 160/90 mmHg.

Max. work load attained

:13.10METS.

Indication

: Screening for IHD.

Risk Factors

.

Reason for Termina

: Attainment of THR.

Test Profile

: BRUCE

Symptoms

1

Summary Result ⇒

NEGATIVE

Comments

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

Conclusion

; Stress test is NEGATIVE for ECG evidence of promotable myocardial ischemia.

MBBS, MD (Cardiology), NICVD, Dhaka Consultant, IBN SINA D-Lab, Uttara, Dhaka

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.

23100791

Receive: Print: 21/10/2023

Patient's Name

ALI AKBAR

Age

42 YRS

Sex

Refd. by

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

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate

87 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

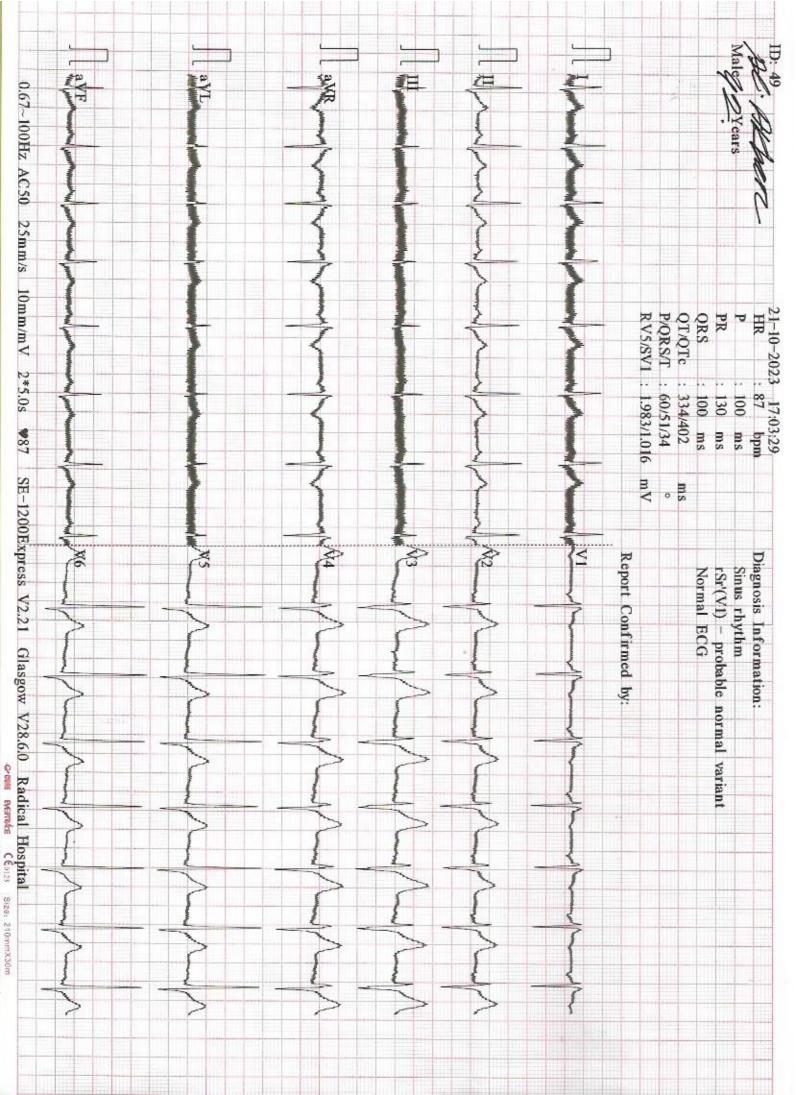
MBBS, MD (Cardiology) Associate Professor

Department of Cardiology

Sylhet Women's Medical College Hospital

This report has been electronically signed

Page 1 of 1





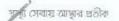
Date: 21/10/2023

EYE EXAMINATION REPORT

NAME:	ALI AKBAR			
AGE:	42 YRS		RANK: FITTER	CDC NO:T/34559
VISUAL	ACUITY:	RIGHT	LEFT	
UNAIDE	ED	6/6	616	
AIDED				
COLOU	R VISION:	NORMAL/BLIND		
ODDING	NT 29			
OPINIO	Ν :	UNFIT / FIT FOR EMPLO	YMENT ON BOARD	

Dr. Mir Md. Raihan MBBS, PGT (Ophthalmology) Assistant Registrar (EX)

East west Medical College & Hospital







Patient ID	23100791	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	21/10/2023
Patient Name	ALI AKBAR		
Age	42 YRS	Sex	Male
Refd. By	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		

THANK YOU FOR THE COURTESY OF THIS REFERRAL

LIVER :-Is normal in size 13.5 cm, regular in shape and normal position. The echogenicity of the parenchyma is normal. Intrahepatic biliary channel are not dilated. No focal lesion is seen.

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

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

SPLEEN: - Is normal in size (8.3 x3.0)cm and uniform in echo-texture.

BOTH KIDNEYS:-Are normal in size RK-10.7 cm, LK-11.1 cm regular in shape. The cortical chogenicity are normal with clear cortico-medullar differentiation. The cortical thicknesses are normal. The renal sinus shows normal echogenicity and thickness.

P-C systems are not dilated.

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

PROSTATE: Is normal in size and volume is 17.1cc, regular in shape.

Echogenicity is homogenous. No area of calcification is seen.

IMPRESSION: Suggestive of Normal study.

Dr. Asma Ahmed
MBBS,CMU,DMU
PGT(Gynae & obs)

Advanced Training on TVS Consultant Sonologist

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

CERTIFICATE INTERNATIONAL DE VACCINATION OU DE REVACCINATION CONTRE LA CHOLERA

	This is to Cer		ALL AK	BAR			41.1	0
		(e) certifie que /	D	ate of Birth	01/01/19		Mal	0
	whose signate dont la signat		ne	e (e) le		S	Sexe	T
	done la signat		he date indicate	ed been vacci	nated or rev	accinated	d against Cho	olera
	The state of		vaccination (e)					
	- Date	Signature and F Status of vac Signature et qu essioundle du y	cinator alite Prof.		Appr Cachet d	oved Sta authent		
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	Dr. Mc	phammad Saifud	din (Sabuj)	ORAL C	CHOLE	A	ON THE PERSON NAMED IN	200
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	5	Revaccination					e les integrals	(Tyrica)

The Validity of this certificate shall extend for a period of three years, beginning eight days after the date of a successful primary vaccination or, in the event of re vaccination on the date of that re vaccination.

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

Any amendent of this certificate or erasure or failure to complete any part of it, may render it invalid. Le validity dee cc cc certificate couvre une period dn. Tories ans co. mendicant huit joure aprela date de la prime vaccination offecture avec success (price) ou. le cas d uae-re vaccination le jour de cette re vaccination.

Le cachet 'd' authantification doit etre conforme su module precript par 1 administration anitare da teritore ou in, vaccination. Toute correction ou rature sur le certificate au l' omission d'unc quelonque desmentions au il comport poul affector as validile.

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

CERTIFICATE INTERNATIONAL DE VACCINATION OU DE REVACCINATION
CONTRE LA FIEVER JANUE

	je soussig	me (e) certifie que J	OAK BAR WOY!	981 Male.
	whose sig dont la sig	gnature follows ne	e (e) le	Sexe
		has on the date indica a etc. vaccination (e)	ited been vaccinated or rev on contre la fiever jaune la	vaccinated against Yellow-Fever a date indique.
	Date	Signature and Professional Status of vaccinator Signature el qualite Prof. essioundlle du vaccinateur	Origin and batch no, of vaccine origine du vaccin Employe et u merco du lot	Official stamp of vaccination centre. cachet Official du Center de vaccination
	2022	Mahammad Saiduddin (Sabarit	WER AND	1 2
10	MBE	Mohammad Saifuddin (Sabul) S (CU), PGT (Medicine), CCD (BBDE)() BMDC, Reg. No. A 44434 Approved Medical Physician DG Shipping Bangladesh Popular Medical Set vices, Dhaka	On the second	The state of the s
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