Medical Certificate for Service at Sea

As per medical standards of ILO-MLC 2006, as amended STCW 2010

Issue Date: 15th July 2013 Rev. Date: 01st November 2018 Revision No.: 01 Form #: C-43

No. de C. de					
Name: (last, first, middle NIROB	=) A1		RI	FAT	
Date of birth; (day/month/year)	10 11	1997	Gender: (male/female)	MALE	MR MO RU
Passport / Discharge book No:	A009353	41	Nationality:	BANGLADESHI	RADIO * HOSPI
Rank:	DECK HAND)	Place of Examination:	DHAKA	We Aminee

I have evaluated the above-named seafarer/ new entrant after establishing his identity as per the documents mentioned above. On the basis of the seafarer's/ new entrant personal declaration, my clinical examination, the diagnostic test results obtained, and in consideration of the essential requirements of the position applied for, my opinion is -

	15.4 ST00007 A10019		Yes	No
a. '	Hearing meets the standards in STCW Code, see	tion A-I/9:	1	
b. >	Unaided hearing is satisfactory;	/		
c,	Color Vision meets the required STCW Code sta (testing only required every six years)	/		
d.	Date of last color vision test:		0	
c	Fit for lookout duty	/	le	
f	Is the seafarer free from any medical condition or to render the seafarer unfit for such service o on board:		/	
	This scafarer is UNFIT FOR DUTY ** / below. *This Medical Certificate is issued with following.	FIT FOR DUTY ON BOARD		as ment
	** Reasons for being unfit			
			2	1.4
	4.		2	1 1
	e of examination: (Day/Month/Year)	0 6 OCT 2023	2	
Exp	eiry date of certificate: (Day/Month/Year)	0 5 OCT 2025	a	
Exp	oiry date of certificate: (Day/Month/Year) me of Medical Examiner	0 5 OCT 2025	AIHAN	
Exp Nai Sig	oiry date of certificate: (Day/Month/Year) me of Medical Examiner nature of Medical Examiner	DR. MR. MD. R		
Exp Nai Sig	oiry date of certificate: (Day/Month/Year) me of Medical Examiner	0 5 OCT 2025	Approved	



04.2023.4907

File No.: L #3 (2nd/O)

Retention: 3 Years / Frequency: As Required

Page 1 of 1

Radical Hospitals Limited

Medical Declaration

As per medical standards of ILO- MLC 2006, as amended STCW 2010

Medical Examination of Seafarers Examinee's Declaration

Name (last, first, middle):	NIROB AL RIFAT	
Date of birth (day/month/year):	10.11.1997	
Sex: Male / Female	MALE	2915 c
	KHARKHARIA NANDINA - 2001, JAMALPUR	1 4 5 61 16
Home address:	SADAR, JAMALPUR	
Passport No./Discharge book No.:	A00935341	7.4
Department (Deck/Engine/Radio/Food handling/other):	DECK HAND	
Rank:	DECK HAND	
Routine and emergency duties (if known):		
Type of ship (Cargo, Tanker, Passenger):		
Trade area (coastal, tropical, worldwide):		Sality

Seafarer's Personal Declaration

(Assistance should be offered by medical staff)

Have you ever had any of the following conditions?

531	Condition	Yes	No /		Condition	Yes	No
1	Eye/vision problem		1	18	Sleep problem		1
2	High blood pressure		1	19	Do you smoke, use alcohol or drugs?		-
3 .	Heart/vascular disease		10	20	Operation/surgery		1
4	Heart surgery		1/0	21	Epilepsy/seizures		1
5	Varicose veins/piles		1/	22	Dizziness/fainting		1
6	Asthma/bronchitis		1/1	23	Loss of consciousness		
7	Blood disorder		1/0	24	Psychiatric problems		
8	Diabetes		1/1	25	Depression/Hepatitis		1
9	Thyroid problem		10	26	Attempted suicide		1
10	Digestive disorder		1/	27	Loss of memory		
11	Kidney problem		10	28	Balance problem		1
12	Skin problem		/	29	Severe headaches		1
13	Allergies		1	30	Ear (hearing, tinnitus)/nose/throat problem		
14	Infectious/contagious diseases		1	31	Restricted mobility		1
15	Hernia		1/	32	Back or joint problem		7
16	Genital disorder		/	33	Amputation	1	1
17.	Pregnancy	N	M	34	Fractures/dislocations		1

File No. : L #4 (2nd/O)

Retention: 3 Years / Frequency: As Required

Issue Date: 15th July 2013 Rev. Date: 01th November 2018 Revision No. : 01

Form #: C-44

Medical Declaration
As per medical standards of ILO- MLC 2006, as amended STCW 2010

				U. Alife	
=76					
Ė	Additional questions				
				Yes	No
	Have you ever been signed off as si	ck or repatriated from a ship?			/
_	Have you ever been hospitalized?				/
-	Have you ever been declared unfit f				/
	Has your medical certificate even be				/
	Are you aware that you have any m Do you feel healthy and fit to perform		sses?		/
	position/occupation?	in the duties of your designated		/	
	Are you allergic to any medication?				1
	Are you taking any non-prescription If yes, please list the medications taken,				
	Are you taking any non-prescription If yes, please list the medications taken, hereby certify that the personal declara	and the purpose(s) and dosage(s)		edge	
I	If yes, please list the medications taken,	and the purpose(s) and dosage(s)		edge	
I	hereby certify that the personal declara	and the purpose(s) and dosage(s) tion above is a true statement to the day	DR. MIR. M MBSS (DU), DFM. CCD. BMDC A-55144. DG Shiop.ng Bang	D. RA (Birdem), PC MMC-BC	3T (Ophth 3D-016
I mat ami tne: gna erel	hereby certify that the personal declara ure of nee:	and the purpose(s) and dosage(s) tion above is a true statement to the st	DR. MIR. MI MBBS (DU), DFM. CCD BMDC A-55144. DG Shipp.ng Bang General P Radical Hosp ssionals, health institu	D. RA (Birdem), Pl MMC-BC (ladesh A Physician itals Limitions an	3T (Ophth 3D-016 pproved

Medical Declaration
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Issue Date: 15th July 2013 Rev. Date: 01st November 2018 Revision No. : 01

Form #: C-44

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istance	6/6	6/0	5	Lyc	Lyc		Left Eye		/	
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olor vis	ion:		Not tested	Æ	Normal		Doubtful		☐ De	fective
Hear							Speec	h and	whisper	test (met
	500 Hz	1000 Hz	2000 Hz	3000 Hz	4000 Hz	6000 Hz		No	rmal	Whisper
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Left Ear	20	20	20	20			Left Ear	-		
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			Normal	Abno	rmal		-54%-Y/200		Normat	
lead	1		1/			Skin			//	,
inuses, r	nose, thro	at	1/			Varicose vei	ns		//	,
fouth/tee	eth		1/			Vascular (in	c. pedal pulses)	//	7
ars (gen	eral)		1/			Abdomen ar	d viscera	25.477	1/	
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yes			1//		100 1100 = 5113	Anus (not re	ctal exam)		1/	2
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Medical Declaration
As per medical standards of ILO- MLC 2006, as amended STCW 2010

Issue Date: 15th July 2013 Rev. Date: 01th November 2018 Revision No. : 01

Form #: C-44

	Test		Results	
Z.	3/00d JAV	V	North	al .
0.	nine Ja	m	NON	nal
Medical pr	actitioner's comments a	nd assessment of fitness	, with reasons for any lim	itations:
		No Restric	tions	
accination sta	tus recorded:	Yes	□ No	
Acceceman	nt of fitness for service			
On the bas	is of the examinee's pers	onal declaration, my cli	nical examination and the	diagnostic test result
recorded a	bove, I declare the exam	inee medically:		
Fit for look	k out duty		Not fit for look out du	ty
	Deck service	Engine service	Catering service	Other services
		8	- Carrier and the carrier	Other Services
ofit				
Without R	ctions (e.g., specific posit	ion, type of ship, trade	With Restrictions	
Action take	en by Medical Evaminer	(a o referral):		
Action take	en by Medical Examiner	(e.g. referral):		
Action take	en by Medical Examiner	(e.g. referral):		
	en by Medical Examiner	(e.g. referral):		
1. 2. 1.				
1 2 2 2 1	en by Medical Examiner		O 6 OCT	2023
ate of examin		r)	0 6 OCT 0 5 OCT 2	
ate of examin	ation: (Day/Month/Yea certificate: (Day/Month/	r)		
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Date of examin Expiry date of clame of Medic	ation: (Day/Month/Yea certificate: (Day/Month/ cal Examiner	r)	DR. MIR.	





: 23100170 Id No

Patient's Name: AL RIFAT NIROB

Specimen

: Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:T/35062

Age: 25Y 0M 0D

Date: 05-Oct-2023

D.Date: 05-Oct-2023

Gender: Male

Haematology Report

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

	Results	Reference Range	
temoglobin (Hb)	15.6 gm/dl 05 mm/1st hr	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) Fotal WBC Count(TC)	5,600 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm	
Differential WBC Count (DC)		CLUL DE CC 0/ Adults 40 75 9/	
Neutrophils	64 %	Child: 25-66 %, Adult: 40-75 %	
Lymphocytes	30 %	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	112 /cumm	50-450/cumm	
Total RBC Count	5.31 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul	
HCT/PCV	42.1 %	M: 40-54%, F:37-47%	
MCV	79.3 fL	76 - 94 fL	
MCH	29.4 pg	27 - 32 pg	
MCHC	37.1 g/dL	29 - 34 g/dL	
RDW	12.9 %	11 - 16 %	
PDW	13.6 fL	35 - 56 fl	
Total Platelete Count (PC)	1,68,000 /cumm	150,000-450,000/cumm	
MPV	8.5 fL	7,0 - 11.0 fL	
PCT	0.143 %	0.1 - 0.%	

Checked By Medical Technologist Dr. Sumaiya Khatun

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



Bill No	DIA23100170	Received Date	05/10/2023
Patient's Name	AL RIFAT NIROB		
Patient's Age	25Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CC	D(BIRDEM),PGT(Eye),DFM	CDC NO:T/35062
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.5 mmol/l	4.2 - 6.4 mmol/l
Serum ALT (SGPT)	27.U/L	Up to 40 U/L

REMARKS (IF ANY)

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

Checked By

Medical Technologis Radical Hospitals Ltd. Dr. Sumaiya Rhatun M BBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital



		Received Date	05/10/2023
Bill No	DIA23100170	Neceived Bate	
Patient's Name	AL RIFAT NIROB		
Patient's Age	25Y 0M 0D	Patient's Sex	Male
ratient s Ago		CD/BIBDEM) PCT/Eve) DEM	CDC NO:T/35062
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),0	CD(BIRDEW),FGT(Lye),DTW	0001.0.10.
Sample	BLOOD		

SEROLOGYCAL REPORT

Test Name

Result

HBsAg (Method : (ICT)	Negative
HIV 1 & 2 (Method : (ICT)	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





Dill No.	DIA23100170	Received Date	05/10/2023
Bill No Patient's Name	AL RIFAT NIROB		
Patient's Age	25Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO:T/35062
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance		Pus Cells	0-1/HPF
Sediment	Nil	Epithelial	0-1/HPF

CHEMICAL EXAMINATIONCASTS / LPF

Reaction	Acidic	RBC	Nil
Albumin	NIL	WBC	Nil
Sugar	NIL	Epithelial	Nil
Ex.Phosphate		Granular	Nil
13.C.1 Hotelphine	MAL	Hyaline	Nil

ON REQUESTCRYSTALS & OTHERS

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

Checked By

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



	Beesiged Date	05/10/2023
DIA23100170	Received Date	00/10/2020
AL RIFAT NIROB		decen in the
OSY OM OD	Patient's Sex	Male
		CDC NO:T/35062
Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO. 1733002
URINE		
	AL RIFAT NIROB 25Y 0M 0D Dr. Mir Md. Raihan MBBS,(DU	AL RIFAT NIROB 25Y 0M 0D Patient's Sex Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

Test Name	Result
Drug Level of Urine	
'ocaine	Negative
Morphine	Negative
Marijuana	Negative
Barbiturates	Negative
Amphetamines	Negative
Phencyclidine	Negative
Mechol	Negative
Benzodiazepines .	Negative
Methadone	Negative
Propoxyphene	Negative

Checked By

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





DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23100170 Receive:06/10/2023 Print: 06/10/2023

Patient's Name : AL RIFAT NIROB

Age : 25 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

Hospital	Glasgow V28.6.0 Radical Hospital	gow V28.0	21	ess V	SE-1200Express V2		8	7 2*5.0	0mm/m ¹	5mm/s	AC50 2	0.67-100Hz AC50 25mm/s 10mm/mV 2*5.0s \$\varphi 86
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	<u>}</u>	by:	agnosis Information: Sinus rhythm Rightward axis Borderline ECG port Confirmed by:	Diagnosis Inf Sinus rhytl Rightward Borderline Report Conf V1		6 6 mm ms s s s s s s s s s s s s s s s	11:57:06 86 bpm 96 ms 132 ms 88 ms 350/419 75/95/55 1.284/0.734		PR P/QRS/T : P/QRS/T : P/QRS/T : RV5/SV1 :	}		Male Years



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.

23100170

Receive: Print: 06/10/2023

Patient's Name

AL RIFAT NIROB

Age

25 YRS

Sex

M

Refd. by

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

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate

: 86 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



Bill No	DIA23100170 R	eceived	Date	05/10/2023
Patient's Name	AL RIFAT NIROB			00/10/2020
Patient's Age	25Y 0M 0D P	atient's	Sex:	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(E)	ye),DFM	CDC NO:	T/35062
Sample	Blood		353.115.	1700002

SEROLOGYCAL REPORT

Test Name	Result
<u> </u>	result

ICT for Syphilis	Negative
ICT for Tuberculosis(TB)	Negative

Checked B

Medical Technologist,

Radical Hospitals Ltd. Uttara, Dhaka. Dr. Sumaiya Khatun MBBS, MD (Microbiology) Assistant Professor Dept. of Microbiology East West Medical College and Hospital