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

Name: (last, first, middle	e)				
RABBI	M	URP	D	HOS	EN
Date of birth: (day/month/year)	31	10	1997	Gender: (male/female)	MALE
Passport / Discharge book No:	A00058185			BANGLADESAI	
Rank:	DECKHAND		Place of Examination:	DHAKA	



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

		Yes	No
a.	Hearing meets the standards in STCW Code, section A-I/9:		
b	Unaided hearing is satisfactory;	/	
c.	Color Vision meets the required STCW Code standards section A-I/9 (testing only required every six years)	/	
d.	Date of last color vision test:		1
e	Fit for lookout duty	/	
f	Is the scafarer free from any medical condition likely to be aggravated by Service at sea or to render the scafarer unfit for such service or to endanger the health of other persons on board:		
	This seafarer is UNFIT FOR DUTY ** / FIT FOR DUTY with / without respectively.	0.00000	*as n
		0.00000	*as n
	below. FIT FOR DUTY ON BOARD SH	0.00000	*as n
	*This Medical Certificate is issued with following restriction	0.00000	ı *as n
Dat	*This Medical Certificate is issued with following restriction ** Reasons for being unfit	P	a*as n
	*This Medical Certificate is issued with following restriction ** Reasons for being unfit e of examination: (Day/Month/Year) Description	P	*as n
Exp	*This Medical Certificate is issued with following restriction ** Reasons for being unfit e of examination: (Day/Month/Year) FIT FOR DUTY ON BOARD SHIP FIT FOR DUTY ON BOARD SHIP FIT FOR DUTY ON BOARD SHIP OF OUT 2023	P	a*as n
Exp Nai Sig	** Reasons for being unfit ** Reasons for being unfit ** of examination: (Day/Month/Year) ** of examination: (Day/Month/Year) ** of Medical Examiner ** nature of Medical Examiner	P	*as n
Exp Nai Sig	** Reasons for being unfit ** Reasons for being unfit ** Reasons for being unfit ** Of OCT 202 ** Of examination: (Day/Month/Year) ** Of OCT 202 ** Of Medical Examiner ** Instance of Medical Examiner	P S S S S S S S S S S S S S S S S S S S	

General Physician Radical Hospitals Limited

04.2023.4906

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

Retention: 3 Years / Frequency: As Required

Page 1 of 1

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):	RABBI MURAD HOSEN
Date of birth (day/month/year):	31-10-1997
Sex: Male / Female	Male
W	MOGPUKUR PAR, BANDAR MAIN. POST OFFICE
Home address:	DOUBLE MOORING, CHATTOGRAM
Passport No./Discharge book No.:	A000 58185
Department (Deck/Engine/Radio/Food handling/other):	DECK
Rank:	DECK HAND
Routine and emergency duties (if known):	
Type of ship (Cargo, Tanker, Passenger):	
Trade area (coastal, tropical, worldwide):	3.999

Seafarer's Personal Declaration

(Assistance should be offered by medical staff)

Have you ever had any of the following conditions?

130	Condition	Yes	No		Condition	Yes	No
1 . 11	Eye/vision problem		1	18	Sleep problem		
2.57	High blood pressure			19	Do you smoke, use alcohol or drugs?		
3	Heart/vascular disease		1	20	Operation/surgery		
4	Heart surgery		//	21	Epilepsy/seizures		
5	Varicose veins/piles		//	22	Dizziness/fainting		1
6	Asthma/bronchitis		1/1	23	Loss of consciousness		
7	Blood disorder		1/	7 24	Psychiatric problems		1
8	Diabetes		1	25	Depression/Hepatitis		/
9	Thyroid problem		//	26	Attempted suicide		
10	Digestive disorder		1/	27	Loss of memory		1
11	Kidney problem		1/	7 28	Balance problem		
12	Skin problem		1	29	Severe headaches		/
13	Allergies			30	Ear (hearing, tinnitus)/nose/throat problem		/
14	Infectious/contagious diseases		//	31	Restricted mobility		
1.5	Hernia		1/	32	Back or joint problem		
16	Genital disorder		/	33	Amputation	1.000	
17	Pregnancy	NI	79	34	Fractures/dislocations		/

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

Retention: 3 Years remency: As Required

Medical Declaration

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

					100
					-,100
Δ	Additional questions				4.594
	Have you ever been sie	ned off as sick or repatriated from a ship?		Yes	No
	Have you ever been hos			-	-
	15,110	lared unfit for sea duty?			1
		icate even been restricted or revoked?			1
		have any medical problems, diseases or illne	sses?	-	
	Do you feel healthy and	fit to perform the duties of your designated			
	position/occupation?				
	Are you allergic to any	medication?			
		-prescription or prescription medications?			-
		tions taken, and the purpose(s) and dosage(s			
1	hereby certify that the person	onal declaration above is a true statement to t	he best of my know	rledge	
1	hereby certify that the person	tions taken, and the purpose(s) and dosage(s		rledge	
I gnat ami itnes gnat	hereby certify that the personal content of the person	Day (day/month/year) Name (Typed or Printed)	DR. MIR. M MBBS (DU), DFM, CCD BMDC A 55144, DG Shipp.ng Bang	D. RAI (Birdem), PG MMC-BGI	T (Ophth) D-016 proved
I gnat ami itnes gnat ereb blic eretit	hereby certify that the personare of nee: seed by: ure by authorize the release of all nauthorities to Dr	Day (day/month/year) Name (Typed or Printed) Namy previous medical records from any health prof	DR. MIR. M MBBS (DU), DFM, CCD BMDC A 55144, DG Shipp.ng Bang	D. RAI (Birdem), PG1 MMC-BGI ladesh Apr hysician italş Limite tutions an nedical	T (Ophth) D-016 proved
I gnat ami itnes gnat ereb blic actit	hereby certify that the personare of nee: seed by: ure y authorize the release of all ne authorities to Dr	Day (day/month/year) Name (Typed or Printed)	DR. MIR. M MBS (DU), DFM, CCD BMDC A-55144, DG Shipping Bang General P Radical Hosp essionals, health insti	D. RAI (Birdem), PG1 MMC-BGI ladesh Apr hysician italş Limite tutions an nedical	T (Ophth) D-016 proved
I gnati ami itnes gnat sereb blic actit	hereby certify that the personare of nee: seed by: ure by authorize the release of all nauthorities to Dr	Day (day/month/year) Name (Typed or Printed) Namy previous medical records from any health prof	DR. MIR. M MBS (DU), DFM, CCD BMDC A-55144, DG Shipping Bang General P Radical Hosp essionals, health insti	D. RAI (Birdem), PGI (Birdem), PGI (Birdem), PGI (Birdem), PGI (Birdem), PGI MMC-BGI (Bi	HAN T (Ophth) D-016 proved d d T (Ophth) D-016 proved

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

Issue Date: 15th July 2013 Rev. Date: 01sth November 2018 Revision No. : 01 Form #: C-44

-	Pre -s	sea			Periodic				ther			
Sight								_				
				Acuity					Visual	Field	S	
	Di Li	Unaide	d		Aided			No	rmal	Def	ective	
	Right Eye.	Left Eye,	Binocular	Right Eye	Left Eye	Binocular	Right Eye	-				
Distance	600	6/6	-	Lyc	Lyc		Left Eye	-	//	_		7.0
Near	NS	N5										
Color vis			Not tested	=	Normal		Doubtful		. West	efecti		
Hea	ring	1000	7,000	2000	1 4000	5000	Speecl		whisper			res
	500 Hz	1000 Hz	2000 Hz	3000 Hz	4000 Hz	6000 Hz		No	rmal	Whi	sper	100
Right - Ear	20	20	20	110	112	112	Right Ear	~			-	1
Left Ear	20	20	20				Left Ear	-				1
				31.72	·							7
Height (cm)		. ,	120		Weight: (I	(a)		6	0	- 72	
Pulse rate	e: (/minut	te)		00	Rhythm:		(6)		2	2	200	20
Blood pro			Systolic:(mr	n/Hg)	100		Diastolie: (mm/Hg)			5		
Urinalysi	and the second development of the last of the second of th	ncose:	NA	-	Protein:	2	/	P	lood:	1,	2-2	,
12								1			//	
			Normal	Abnor	rmal			_	Normal		Abnor	1 25
Head			0	7101101	TIKLI	Skin		-	Norman	2	AOHOI	1116
Sinuses,	nose, thro	at	1/1	-		Varicose vei	ns		-/-	-	-	
Mouth/te	Contract of the Contract of th		1/			-	c. pedal pulses)		-/	2		+
Ears (gen	ieral)		1/1			Abdomen ar			-//	2	-	-
Tympani	e membra	ine	1/			Hernia			1/			
Eyes			1/1			Anus (not re	ctal exam)		1/	2		-
Ophthaln	noscopy		1/			G-U system			1/	-		
Pupils			1				wer extremitie	S	//	1		
Eye mov	ement		1				T/S and L/S)		//	7		
Lungs an			/			Neurologic (full/brief)		//	,	as agains		
Breast examination MA				Psychiatric			//	1		100		
Heart			/			General app	earance		/			177
1									1/2 :-			1
**************************************	ray	Not perfo		1		Performe	f on (day/mont)	n/ven	-1-		110	1



100

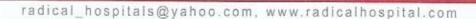
Medical Declaration

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-44

	Test		Results	
	BloodTe	w	Nonn	we
	Unine!	m	NOTE	med
Medical p	practitioner's comments as	nd assessment of fitne	ess, with reasons for any lin	nitations:
		No Restr	ictions	
Vaccination st	atus recorded:	Yes at sea	□ No	
recorded:	asis of the examinee's pers above, I declare the exam ok out duty	onal declaration, my ince medically:	clinical examination and th	
	Deck service	Engine service	Catering service	Other services
Fit Unfit				
	ictions (e.g., specific posit		e area)	
1.1				
Date of exami	nation: (Day/Month/Year	r)	0 6 OCT 2023	
Expiry date of	certificate: (Day/Month/	Year)	0 5 OCT 2025	
Name of Medi	ical Examiner			
Signature of M	Medical Examiner		(4	-
Official Stamp)		Thus	MD RAIHAN
Official Statiq			1.000	CCD (Birdem), PGT (Ophth) 144, MMC-BGD-016





Id No

: 23100173

Patient's Name: MURAD HOSEN RABBI

Date: 05-Oct-2023 Age: 25Y 0M 0D

D.Date: 05-Oct-2023

Gender: Male

: Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:T/35027

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	11.9 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)	4,300 /cumm	Adult: 4000 - 11000/cumm.
Total WBC Count(TC)	4,300 /cumin	Children: 5,000-15,000/cumm
		Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		5111 25 55 07 Adult. 40 75 97
Neutrophils	57 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	38 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	03 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	86 /cumm	50-450/cumm
Total RBC Count	5.64 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	34.7 %	M: 40-54%, F:37-47%
MCV	61.5 fL	76 - 94 fL
MCH	21.1 pg	27 - 32 pg
MCHC	34.3 g/dL	29 - 34 g/dL
RDW	15.9 %	11 - 16 %
PDW	16.5 fL	35 - 56 fl
Total Platelete Count (PC)	2,52,000 /cumm	150,000-450,000/cumm
MPV	8.1 fL	7.0 - 11.0 fL
PCT	0.204 %	0.1 - 0.%

Checked By

Dr. Sumaiya Khatun

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

East West Medical College & Hospital.





Bill No	DIA23100173	Received Date	05/10/2023
Patient's Name	MURAD HOSEN RABBI		
Patient's Age	25Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),C	CCD(BIRDEM),PGT(Eye),DFM	CDC NO:T/35027
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.3 mmol/l	4.2 - 6.4 mmol/l
Serum ALT (SGPT)	24.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 Terminogis Radical Hospitals Ltd. Dr. Sunfavya Khatun M BBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital



Bill No	DIA23100173	Received Date	05/10/2023
Patient's Name	MURAD HOSEN RABBI		
Patient's Age	25Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),C	CD(BIRDEM),PGT(Eye),DFM	CDC NO:T/35027
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. Sumeiya Rhatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital



Bill No	DIA23100173	Received Date	05/10/2023
Patient's Name	MURAD HOSEN RABBI		
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/35027
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Colo	Straw	RBC	Nil
Appearance	Clear	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
Lixii nonjame	TK ZAT	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 Technologis Radical Hospitals Ltd. Dr. Sumaiya Khatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital



Test Name

Bill No	DIA23100173	Received Date	05/10/2023
Patient's Name	MURAD HOSEN RABBI		
Patient's Age	25Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(B	IRDEM),PGT(Eye),DFM	CDC NO:T/35027
Sample	URINE		

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

Result

Checked By

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



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.

23100173

Receive:06/10/2023

Print: 06/10/2023

Patient's Name

MURAD HOSEN RABBI

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

: Lung fields are clear.

Bony thorax

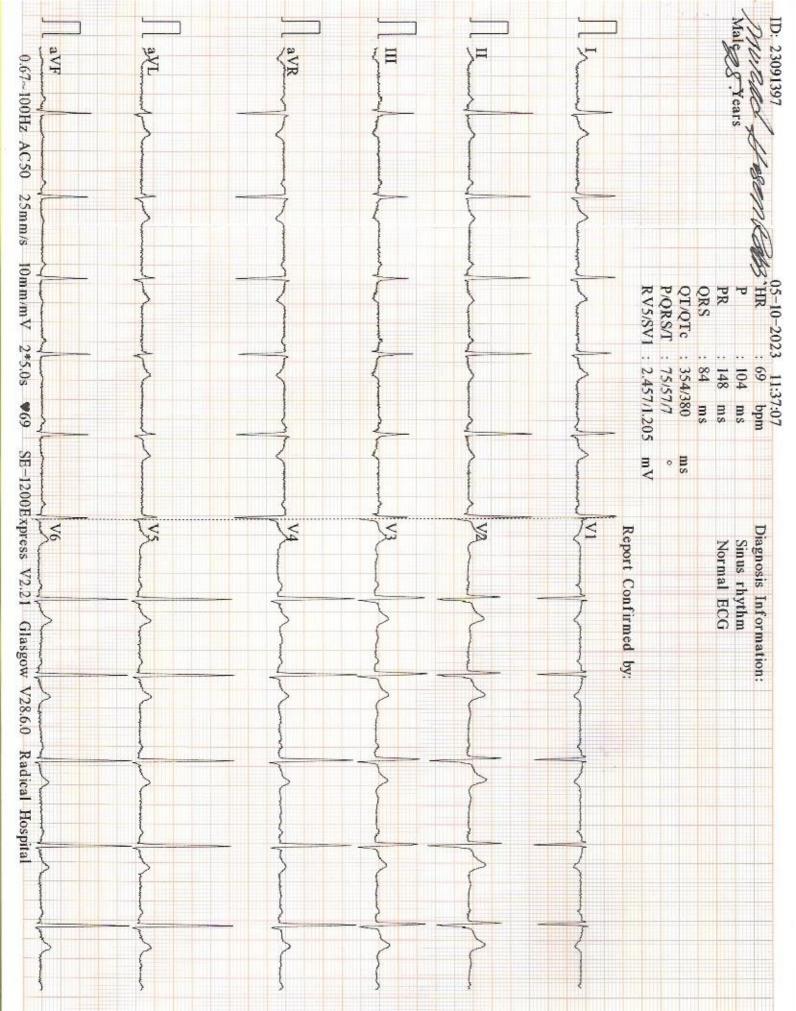
: Reveals no abnormality.

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





DEPARTMENT OF RADIOLOGY & IMAGING

ID. No.

23100173

Receive: Print: 06/10/2023

Patient's Name

MURAD HOSEN RABBI

Age

25 YRS

Sex

: M

Refd. by

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

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate

69 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

RADICAL HOSPITAL

radical_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA23100173 F	Received Date		05/10/2023
Patient's Name	MURAD HOSEN RABBI			
Patient's Age	25Y 0M 0D F	Patient's Sex: M		Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:		T/35027	
Sample	Blood			

SEROLOGYCAL REPORT

Test Name	Result

ICT for Syphilis	Negative
ICT for Tuberculosis(TB)	Negative

Medical Technologist, Radical Hospitals Ltd.

Uttara, Dhaka.

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