

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

Name: (last, first, middle)		ASAD R I	
Date of birth: (day/month/year)	01 02 1999	Gender: (male/female)	MALE
Passport / Discharge book No:	A11893726	Nationality:	BANGLADESH
Rank:	DECK HAND	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 opinion is –

	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:		
e. Fit for lookout duty	☒	☐
f. Is the seafarer free from any medical condition 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 :	☒	☐

This seafarer is ☐ UNFIT FOR DUTY ** / ☒ FIT FOR DUTY with / without restriction *as mentioned below.

FIT FOR DUTY ON BOARD SHIP

*This Medical Certificate is issued with following restriction

** Reasons for being unfit

Date of examination: (Day/Month/Year)	06 OCT 2023
Expiry date of certificate: (Day/Month/Year)	05 OCT 2025
Name of Medical Examiner	
Signature of Medical Examiner	
Official Stamp	



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

04.2023.4910

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):	ASAD R I
Date of birth (day/month/year):	01/02/1999
Sex: Male / Female	MALE
Home address:	CHOWRAPARA, ROSULPUR-6520, NIAMATPUR, NAOGAON.
Passport No./Discharge book No.:	A11893726
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):	

Seafarer'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 problem		/
2. High blood pressure		/	19. Do you smoke, use alcohol or drugs?		/
3. Heart/vascular disease		/	20. Operation/surgery		/
4. Heart surgery		/	21. Epilepsy/seizures		/
5. Varicose veins/piles		/	22. Dizziness/fainting		/
6. Asthma/bronchitis		/	23. Loss of consciousness		/
7. Blood disorder		/	24. Psychiatric problems		/
8. Diabetes		/	25. Depression/Hepatitis		/
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 (hearing, tinnitus)/nose/throat problem		/
14. Infectious/contagious diseases		/	31. Restricted mobility		/
15. Hernia		/	32. Back or joint problem		/
16. Genital disorder		/	33. Amputation		/
17. Pregnancy		N/A	34. Fractures/dislocations		/



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If you answered "yes" to any of the above questions, 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 hospitalized?		☒
37	Have you ever been declared unfit for sea duty?		☒
38	Has your medical certificate even 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 medication?		☒

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:

R.I. Asad

Day
(day/month/year)

06 OCT 2023

Witnessed by:
(signature)

[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. DR. MIR. MD. RAIHAN (the approved medical practitioner)

Signature of Examinee

R.I. Asad

Day (day/month/year)

06 OCT 2023

Witnessed by: (signature)

[Signature]

Name (Typed or Printed)

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Medical Examination by Doctor

☒ Pre-sea

☐ Periodic

☐ Other

Sight

Visual Acuity					
Unaided			Aided		
Right Eye	Left Eye	Binocular	Right Eye	Left Eye	Binocular
6/6	6/6	/			
NS	NS	/			

Visual Fields	
Normal	Defective
Right Eye	/
Left Eye	/

Color vision:

☐ Not tested

☒ Normal

☐ Doubtful

☐ Defective

Hearing

	500 Hz	1000 Hz	2000 Hz	3000 Hz	4000 Hz	6000 Hz
Right Ear	20	20	20	20		
Left Ear	20	20	20	20		

Speech and whisper test (metres)

	Normal	Whisper
Right Ear	/	
Left Ear	/	

Height (cm)		172		Weight: (kg)		60			
Pulse rate: (/minute)		77		Rhythm:		Regular			
Blood pressure:		Systolic: (mm/Hg)		110		Diastolic: (mm/Hg)		70	
Urinalysis:	Glucose:	Nil		Protein:	Nil		Blood:	Nil	

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

Chest X-ray	Not performed	Performed on (day/month/year):	06 OCT 2023
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Medical Declaration

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

Test	Results
Blood Test	Normal
Urine Test	Normal

Medical practitioner's comments and assessment of fitness, with reasons for any limitations:

No Restrictions

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 look out duty

☐ Not fit for look out duty

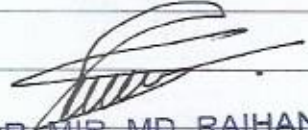
	Deck service	Engine service	Catering service	Other services
Fit	☒	☒	☒	☒
Unfit	☐	☐	☐	☐

☒ Without Restriction

☐ With Restrictions

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

Action taken by Medical Examiner (e.g. referral):

Date of examination: (Day/Month/Year)	06 OCT 2023
Expiry date of certificate: (Day/Month/Year)	05 OCT 2025
Name of Medical Examiner	
Signature of Medical Examiner	
Official Stamp	



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 General Physician
 Radical Hospitals Limited.

Id No : 23100178

Date : 05-Oct-2023

D.Date : 05-Oct-2023

Patient's Name : RI ASAD

Age : 24Y 0M 0D

Gender : Male

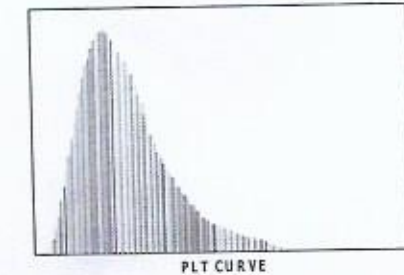
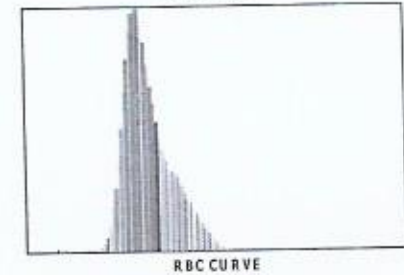
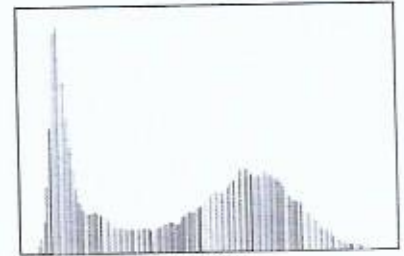
Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:T/35071

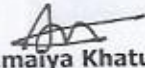
Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	13.4 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)	05 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)	8,400 /cumm	
Differential WBC Count (DC)		
Neutrophils	65 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	30 %	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	168 /cumm	50-450/cumm
Total RBC Count	4.58 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	35.4 %	M: 40-54%, F:37-47%
MCV	77.3 fL	76 - 94 fL
MCH	29.3 pg	27 - 32 pg
MCHC	37.9 g/dL	29 - 34 g/dL
RDW	12.8 %	11 - 16 %
PDW	15.1 fL	35 - 56 fL
Total Platelete Count (PC)	3,01,000 /cumm	150,000-450,000/cumm
MPV	8.7 fL	7.0 - 11.0 fL
PCT	0.262 %	0.1 - 0.0 %



Checked By 
Medical Technologist


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

Bill No	DIA23100178	Received Date	05/10/2023
Patient's Name	RI ASAD		
Patient's Age	24Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO:	T/35071
Sample	BLOOD		

BIOCHEMISTRY REPORT

<u>Test Name</u>	<u>Result</u>	<u>Reference Range</u>
Random Blood Sugar (RBS)	5.2 mmol/l	4.2 – 6.4 mmol/l
Serum ALT (SGPT)	23.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 Technologist
Radical Hospitals Ltd.

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

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Sample	BLOOD		

SEROLOGICAL REPORT

Test Name

Result

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

RADICAL
HOSPITAL
LIMITED

Checked By

hah
Medical Technologist
Radical Hospitals Ltd.

Ar
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Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO:	T/35071
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	Straw	R B C	Nil
Appearance	Clear	Pus Cells	0-1/HPF
Sediment	Nil	Epithelial	1-2/HPF

CHEMICAL EXAMINATIONCASTS / LPF

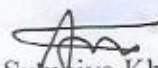
Reaction	Acidic	R B C	Nil
Albumin	NIL	W B C	Nil
Sugar	NIL	Epithelial	Nil
Ex.Phosphate	Nil	Granular	Nil
		Hyaline	Nil

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

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Patient's Name	RI ASAD		
Patient's Age	24Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO:T/35071	
Sample	URINE		

DRUG ABUSE TEST

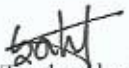
METHOD: Immunochromatographic Assay (Rapid one Step Test)

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.


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Dept. of Microbiology
East West Medical College and Hospital

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23100178 Receive: 06/10/2023 Print: 06/10/2023
Patient's Name : RI ASAD
Age : 24 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.

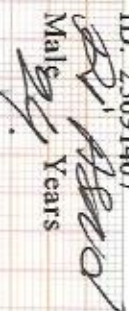


Prof. Dr. Md. Mojibor Rahman
MBBS. DMRD (Radiology & Imaging)
Head of the Department (Radiology & Imaging)
Sylhet Women's Medical College Hospital

ID: 23091407

05-10-2023 13:53:12

Male 54 Years

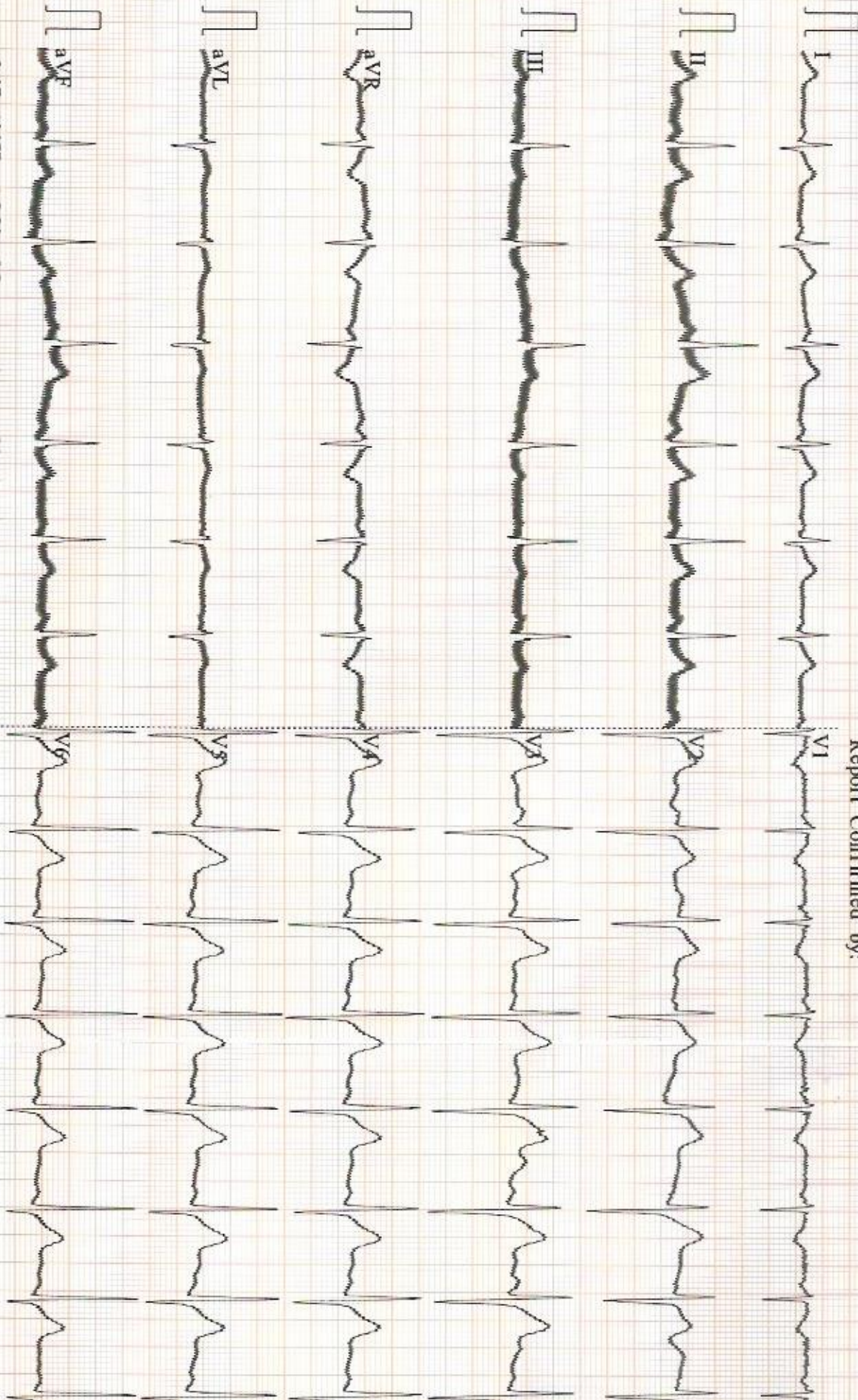


Diagnosis Information:

Sinus rhythm
Normal ECG

HR	: 84	bpm
P	: 118	ms
PR	: 132	ms
QRS	: 92	ms
QT/QTc	: 354/419	ms
P/QRS/T	: 59/78/49	°
RV5/SV1	: 1.62/2.0.784	mV

Report Confirmed by:



DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23100178 Receive: Print: 06/10/2023
Patient's Name : RI ASAD
Age : 24 YRS Sex : M
Refd. by : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 84 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	DIA23100178	Received Date	05/10/2023
Patient's Name	RI ASAD		
Patient's Age	24Y 0M 0D	Patient's Sex:	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM	CDC NO:	T/35071
Sample	Blood		

SEROLOGICAL REPORT

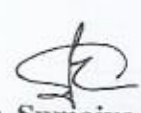
Test Name

Result

ICT for Syphilis	Negative
ICT for Tuberculosis(TB)	Negative

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 Radical Hospitals Ltd.
 Uttara, Dhaka.


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