REPORT OF MEDICAL EXAMINATION OF SEAFARER BY AN APPROVED MEDICAL EXAMINER. As per Merchant Shipping (Medical Examination) Rules 2000 and ISM / STCW code 1/9 and ILO convention 147 (MLC 200 DR. MIR MD. RAIHAN MBBS, (DU), DFM RADICAL HOSPITAL LIMITED 35 SHAH MAKDUM AVENUE, UTTARA, DHAKA-1230. TEL: +88027920116, +88 01955567000. EMAIL: radical_hospitals@yahoo.com HASAN MD SHAH AL MAHADE Sex: M 29, 12, C/016296 PP/CDC: Rank: CHIEF OFFICER Date of Birth: LAUSU Vessel: Type: Route: WW OIL/CHEMICAL Home Address: SILD, WEST VASHANTER, KAFRUL, MIRPUR-14, DHAKA, AD Company Name ATLANTIC SITIP MANAGEMENT Medical History Please answer the following to the best of your knowledge. Examiner Is there any past / present history of any of Declaration Record Declaration Record the following Yes No Yes No Yes No Yes No Severe one sided headaches (Migraine) Hernia / Hydrocoele / Appendicitis Head Injury / Concussion / Loss of Memmory V High / Low blood pressure / Heart disease Asthama / Bronchitis / Tuberculosis Fits / Epilepsy / Dizziness / Fainting Eye / Vision Problems (Glasses, etc. Allergy / Skin disease Hearing Impairment Infection / Contagious Disease Ear / Nose / Throat problems Addication to alcohol / drugs / tobacco Stomach / Bowel disorders Fracture / Dislocation / Injury / Amputation Gall stones / Kidney disorders Major / Minor Operation Jaundice / Liver Disease Diabetes Nervous / Mental disease / Sleep disorder Piles / Varicose veins Blood Disorder Mallignant disease (Cancer) Female Disorde Signed off on medical grounds / Declared Unfit Medical Examination A3-41 cm (2V/N/m). al Conditio 6/~ Gun 1-16m Distant Vision Corrected Field of Vision Audiometry Hz 5000 | 6000 | 8000 dB W Right Eye Right Ear Left Eye Abnormal 20 Right Ear Nonnal Colour Vision Other Abnormal Hearing Normal Abnormal Systemic Examination Normal Notes Abnormal Normal Abnormal Head & Neck Respiratory system FIT FOR SEA SERVICE Cardiovascular system Ears / Nose / Throat Per Abdomen Teeth / Oral Cavity Genito-urinary system Musculo-Skeletal system AS PER MLC 2006 Nervous system Hernia / Hydrocoele Enhanced GARD Medicals done Fissure/Fistula/Pil Investigations Blood Result Normal Urine *O* gm% *OO* cu₊mm Colour Total WBC count 4000-11000 / cu.mm Specific Gravity Neu 69 Malanal parasite Eos 02 BO 6 0 % MO 02 Albumin ESR Sugar 9--43 U / L SGP 1171 Bile pigment S.Cholesterol IE mg/dl 145-260 mg / di Bile salts E mg/dl upto 200 mg/dl S. Triglycerides Occult blood Blood Sugari upto 125 mg % RBC cells HbsAg Leucocytes HIV I & II Others Spirometry: Others GGTP U/L Blood Group Drugs of ECG: TMT: Abuse: Nunm X-Ray USG: LTD Result of Medical Examination On the basis of the examinee's history, clinical examination and diagnostic tests, I,Dr. MIR MD Raihan , hereby declar Temporarily unfit Permanently unfit Should be re-examined in days / weeks / months, Remarks Recommendations certify that all information required under Annexure E & F of M.S. (Medical Examination) Rules 2000 is incorporated in this Certificate. 1 0 SFP 2025 This certificate is valid till: Official for Spirits Candidate's algnature Radios Doctor's signature: DR. MIR. MD. RAIHAN MBBS (DU), DFM. CCD (Birdem), PGT (Ophth) Date: 10-09-2023 BMDC A-55144, MMC-BGD-016 11 SEP 2023 DG Shipping Bangladesh Approved. General Physician Radical Hospitals Limited. 04.2023.4741

MEDICAL EXAMINATION REPORT/CERTIFICATE MARITIME ADMINISTRATOR

CONFIDENTIAL DOCUMENT

REPUBLIC OF T	THE MA	RSHALL IS	LANDS		- 1
SURNAME HOSON	GIVEN	NAME(S) MD	511214	AL N	MAHAM
DATE OF BIRTH	PLACE	OF BIRTH		SEX	
MONTH DAY YEAR		-	BANGLADESH COUNTRY	₽ MALE	FEMALE
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MEDICAL EXAMINATION (SEE REVERSE SIDE FO	R MEDICAL I	REQUIREMENTS) ST	ATE DETAILS	ON REVERS	E SIDE
HEIGHT WEIGHT BLOOD PRESSURE PULSE,	83/mi	RESPIRATION 19 5/~	GENERAL APPE	ARANCE	~ · :====
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ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQU	JIRED VISION S	TANDARD? YE	s No 🖸	/	1
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Is APPLICANT TAKING ANY NON-PRESCRIPTION OF PRESCRIPTION N	VIEDICATIONS?		1	10 SEP	2025
SIGNATURE OF APPLICANT 10 - 09 - THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE	23 EXAMINING PE	11 SEP 202 DATE OF EXAMINAT TYSICIAN.		EXPIRY DA	
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION FIT FOR DUTY OF THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE SEAFARER IS FOUND TO BE FIT / NOT FIT FOR DUTY RADIO OFFICER / RATING / CHIEF COOK / RESTRICTIONS:	ON BOARD DISTASE (OR TY AS A D	SHIP NA WIRLES S FOR COOK MASTER / DECK	OFFICER / EN	SURNAME, GIVEN O GINEERING OF	NAME(S))
NAME AND DEGREE OF PHYSICIAN DR. MIR MD R	AIHAN MBI	BS, DFM			111111111111111111111111111111111111111
ADDRESS RADICAL HOSPITALS LIMITED 35, SHAI			R-12, UTTARA. I	DHAKA-1230	
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY		ING BANGLADESI			-
	MAY 2014		Title 1		
SIGNATURE OF PHYSICIAN	,			11 SI	EP 2023
This certificate is issued by authority of the Maritine Reministrator an Certification and Watchkeeping for Scafarers 19	nd in compliance 778, as amended	e with the requirements.	of the International C	onvention on Star	

Rev. Mar/2022

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

MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer'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

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:

- 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). Eyesight
- (b)
 - 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
 - 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)
 - Seafarcrs 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, Voice
- (c)
 - Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice
- (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 physicians do immunizations. If new vaccinations are given, these should be recorded, Diseases or Conditions
- (2)
 - 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. Physical Requirements
- (h)
 - Applicants for able scafarer, bosun, GP-L ordinary scafarer and junior ordinary scafarer 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 scafarers.

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 scafarer 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).

11 SEP 2023

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

Radical Hospitals Limited.



ATLANTAS CREW MANAGEMENT

Form No - FP 02D

Revision - 1

Seafarer's declaration of medicines being carried on board

Date - 01 Jul 21

Date:

To,

The Company appointed Doctor, XXXX (Management Company)

Dear Sir,

I hereby declare that I will be carrying the following medicines for usage onboard. These have been prescribed by my family doctor and/or by company appointed doctor.

List/qty. of prescribed medicines, which will be carried by me on board. The period of medicine course is prescribed for out weeks/months

Sr. No	Name of Medicine(S) Onboard (Allopathic medicines to be mentioned here)	Quantity	Dosages	Ailment
1	2FOC	Spes/P.D	5pcs/P.D	
2			1	
3				*************
4				

Note: As a rule, not more than 4 medicines or combinations as allowed,

- 1. I agree to carry the original prescription on board for the above-mentioned medication.
- 2. Lagree to inform the Master, all details of my medication immediately upon joining the vessel.
- 3. I also confirm that at no time any other drugs/medicines shall be found with me or in my cabin.
- 4. I am also aware of my responsibility for self-medication.
- Subject to obtaining approval from Company and Company appointed Doctor for the above mentioned medicines, I will ensure to carry sufficient medication with me to cover the period of my onboard tenure and extra supply for an additional month. The Company will not be responsible to arrange for replenishment.
- 6. I hereby consent that the above medical information may be shared as necessary.

I have read and understood the above terms. Should I fail to follow the above terms, I agree that I will not be eligible for the sick, injury, and death pay/compensation as per the company's standard terms and condition and/or the respective collective bargaining agreement of the applicable vessel.

11 SEP 2023

Name & Rank of the seafarer:

89-2023

ture: MAHA

Vessel Name:

Confirmed by a company appointed doctor (signature & date):

4,

The company appointed doctor's name & city:

The company appointed doctor's remarks, if any:

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

General Physician Radical Hospitals Limited.

Note: Doctors are requested to send the original form a with the medical report to the company.



Id No : 0430

Patient's Name: MD SHAH AL MAHADE HASAN

Specimen : Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/O/6296

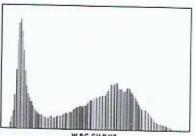
Haematology Report

ked manually)

Date: 11-Sep-2023

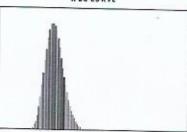
Age: 33Y 0M 0D

Parameter Name	Results	rthic-One Auto Haematology Analyzer & check Reference Range
Hemoglobin (Hb)	13.0 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl.
ESR(Westergreen)	10 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	8,700 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year):
Differential WBC Count (DC)		6,000-18,000/cumm
Neutrophils	69 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	27 %	Child: 52-62 %, Adult: 20-50 %
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 %
Eosinophils	02 %	Child: 01-03 %, Adult: 01-06 %
Basophils	00 %	Adult: 00-01 %
Total Cir. Eosinophils	174 /cumm	50-450/cumm
Total RBC Count	5.35 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	36.6 %	M: 40-54%, F:37-47%
MCV	68.4 fL	76 - 94 fL
MCH	24.3 pg	27 - 32 pg
MCHC	35.5 g/dL	29 - 34 g/dL
RDW	15.0 %	11 - 16 %
PDW	15.0 fL	35 - 56 fl
Total Platelete Count (PC)	2,93,000 /cumm	150,000-450,000/cumm
MPV	8.4 fL	7.0 - 11.0 fL
PCT	0.246 %	0.1 - 0.%
Bledding Time(BT)	%	
Cloting Time (CT)	,0	10 - 18 %

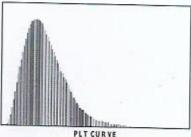


D.Date: 11-Sep-2023

Gender: Male



RBC CURVE



Checked By Medical Technologist

Cloting Time(CT)

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

0.1-0.2 %



Bill No	DIA23090430	Received Date	11/09/2023
Patient's Name	MD SHAH AL MAHADE HASAN	and the control of th	
Patient's Age	33Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),(CCD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/6296
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)	29.0 U/L	Up to 40 U/L
Serum AST (SGOT)	22.0 U/L	Up to 37 U/L
Serum Creatinine	0.9 mg/dl	0.3 - 1.3 mg/dl
Urice Acid	4.1 mg/dl	3.8 - 8.0 mg/dl
GGT	38 U/L	Adult Males : <55

REMARKS (IF ANY)

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

Checked By

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



Bill No	DIA23090430	Received Date	11/09/202	3
Patient's Name	MD SHAH AL MAHADE HASAN	, , , , , , , , , , , , , , , , , , ,		7/
Patient's Age	33Y 0M 0D	Patier	nt's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),Co	CD(BIRDEM),PGT(Eye),DFM CDC N	O:C/O/6296	
Sample	Blood			

SEROLOGYCAL REPORT

Test Name	Result
HIV 1 & 2 (Method : (ICT)	Negative
HBsAg (Method: (ICT)	Negative
HCV (Method : (ICT)	Negative
HAV (Method : (ICT)	Negative
VDRL	Non-reactive
Malaria Parasute	Not Found

RADICA

OD GROUPINGResult	
ABO Blood Group	"B" (+ve)
Rh(D)Factor	Positive

Checked By

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



Bill No	DIA23090430	Received Date	11/09/2023
Patient's Name	MD SHAH AL MAHADE HASAN		
Patient's Age	33Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),C	CD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/6296
Sample	Urine		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATIONMICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF		
Colo	Straw	RBC	Nil	
Appearance	Clear	Pus Cells	1-2/HPF	
Sediment	Nil	Epithelial	1-2/HPF	

CHEMICAL EXAMINATIONCASTS / LPF

Reaction	Acidic	RBC	Nil	
Albumin	NIL	WBC	Nil	
Sugar	NIL	Epithelial	Nil	
Ex.Phosphate	Nil	Granular	Nil	
	KAI	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 Pechnologis Radical Hospitals Ltd. Dr. Sumaiya Khatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital



Test Name



Bill No	DIA23090430	Received Date	11/09/2023
Patient's Name	MD SHAH AL MAHADE HASAN		
Patient's Age	33Y 0M 0D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/6296
Sample		7	

Result

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

Cocaine	Negative
Morphine	Negative
Marijuana	Negative
Barbiturates	Negative
Amphetamines	Negative
Phencyclidine	Negative
Alcohol	Megative Negative
Benzodiazepines	Negative
Methadone	Negative
Propoxyphene	Negative

Checked By

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



Patient's Name	1	MD SHAH AL MAHADE HASAN	ID NO	:	23090430
Age	:	33 Yrs	Date	:	10/09/2023
Sex	:	Male			
Referred by	:	Dr. Mir Md. Raihan MBBS,(DU), DFM			
Nature of Specimen	:				

PULMONARY FUNCTION TEST (SPIROMETRY)

FVC = 6 FEV = 5 FEV/FVC = 80%

Comments: Normal Lung Function

Checked By

Dr. Mir Md. Raihan

MBBS (DU) CCD(Birdem),PGT (opth) Reg- A55144 BGD-016(MMC) DG Shipping Bangladesh Approved Malaysian Medical Council Approved General Physician Radical Hospitals Limited



34

E.J

Patient's Name	:	MD SHAH AL MAHADE HASAN	ID NO	1	23090430
Age	:	33 Yrs	Date	:	10/09/2023
Sex	:	Male			
Referred by	:	Dr. Mir Md. Raihan - MBBS (DU), DFM			
Nature of Specimen	:				

Dental Examination Reports

On Examination

I. Dental Caries : Absent

2. Calculus : Absent

3. Missing : Absent

4. Gum Condition : Normal

5. Filling : No

6. Root Canal Treatment : No

7. Any Bridge/Denture/Crown : No

8. Oral Hygine : Normal

Comments: Normal

Dr. Mir Md. Raihan

MBBS (DU,) CCD (Birdem), PGT (opth)

Reg- A55144 BGD-016(MMC)

DG Shipping Bangladesh Approved Malaysian Medical Council Approved

General Physician

Radical Hospitals Limited



AUDIOLOGICAL REPORT

Patient Name : MD SHAH AL MAHADE HASAN

10/09/2023

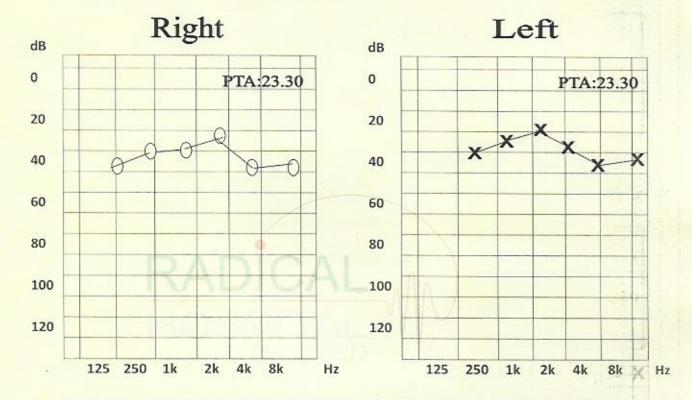
Age

: 33 Yrs

Address

: RHL, UTTARA

Referred By : Dr. Mir Md. Raihan , MBBS,(DU), DFM



0-25= Normal Hearing.

26-40= Mild Hearing Loss.

41-55= Moderate Hearing Loss.

56-70= Moderately Severe Hearing Loss.

71-90= Severe Hearing Loss.

91-120= Profound Hearing Loss.

Right Ear Left Ear

Air Unmasking OX

Bone Unmasking

Right Ear Left Ear

Air MaskingOX

Bone Masking $\Delta\Delta$

Remark's:-

Right Ear: Normal Hearing.

Left Ear: Normal Hearing.



Patient ID	23090430	Voucher No	
Test Name	USG OF WHOLE ABDOMEN	Delivery Date	10/09/2023
Patient Name	MD SHAH AL MAHADE HASAN		
Age	33 YRS	Sex	Male
Refd. By	DR. MIR MD. RAIHAN MBBS,(DU),DF	M	

THANK YOU FOR THE COURTESY OF THIS REFERRAL

LIVER :- Is normal in size 13.5cm shape and 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.

CBD & Intrahepatic biliary trees are not dilated. Diameter of CBD is normal.

PANCREASE: Is normal in size margin are regular parenchyma show normal echo-texture pancreatic duct is not dilated. No focal area of altered echogenicity or calcification is seen.

SPLEEN: - Is normal in size and shape uniform in echo-texture.

BOTH KIDNEYS: - Are normal in size. RK-8.9cm, LK-10.2cm The cortical echogenicity 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 within normal limit. No intravesicle lesion is seen Prostate: Normal size regular in shape. Echogenicity is homogenous.

COMMENT: Normal Study.

Sonologist

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

Advanced Training in TVS

RADICAL HOSPITAL

radical_hospitals@yahoo.com, www.radicalhospital.com

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23090430 Receive:10/09/2023 Print: 10/09/2023

Patient's Name : MD SHAH AL MAHADE HASAN

Age : 33 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.

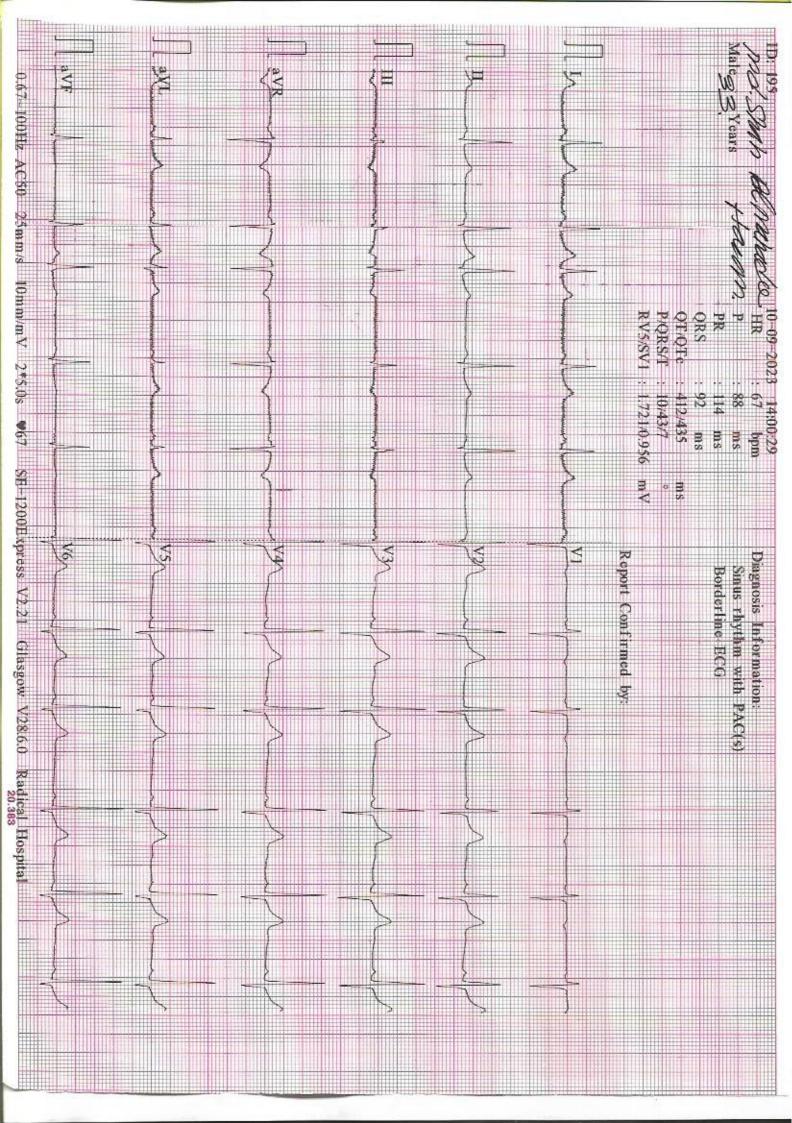
Comments : Normal chest skiagram.

Prof. Dr. Md. Mojibor Rahman

MBBS. DMRD (Radiology & Imaging)
Head of the Department (Radiology & Imaging)
Sylhet Women's Medical College Hospital

This report has been electronically signed.

Page of 1





DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23090430 Receive: Print: 10/09/2023

Patient's Name : MD SHAH AL MAHADE HASAN

Age : 33 YRS Sex : M

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

ELECTROCARDIOGRAM (E.C.G) REPORT

Rate : 67 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

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA Date of birth 29-DEC-1990 Sex MALE. This is to certify that whose signature follows MD SHAH AL MAHADE HASAN. has on the date indicated been vaccinated or revaccinated against Cholera Date Signature and Professional Approved Stamp status of vaccinator 25 MAR 2027 DR. MIR. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 35, Shah Makhdur Avenue Littera, Dhaka DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited. ANGLADE FOR VACCO DR. MIR. MD. RAIHAN 35, Shah Makhdum MBB3 (DU), DFM, CCD (Bidgen), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Амелив Ultara, Dhaka ANGLADES Radisal Hospitals Limited. ORAL CHOLERA 3 "DUKORAL" 35. Shah Walthourn DR. MIR. MD. RAIHAN Valid Upto 2 yrs Avenus BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited. 5 5 6 6 7 8 Continued overleaf Suite our erso

INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

This is to certify that whose signature follows

Date of birth 29-DEC-1990 Sex MALE.

MD SHAH AL MAHABE HASAN.

has on the date indicated been vaccinated or revaccinated against yellow-fever

Date	Signature and Professional status of vaccinator	Origin and batch no, of vaccine	Official stamp of vaccination centre
SHARE	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.	THE VERY AND THE PROPERTY OF T	S, Sheh Merhidum Avenue Utlass, Dhaba
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This certificate is valid on only if the vaccine used has been approved by the World Health Organization and if the vaccinating centre has been designated by the health administration for the territory in which that centre is situated.

The validity of this certificate shall extend for a period of ten years, beginning ten days after date vaccination or in the extent of a revaccination within such period of ten years, from the date of that revaccination.

Any amendment of this certificate, or erasure, of failure to complete any part of it may render it invalid.