



HAQUE & SONS LTD.



Rummana Haque Tower, 1267/A, Goshaildanga, Agrabad C/A, Chattogram, Bangladesh.
Tel : +880-2-333316214-6, Fax : +880-2-333310530

Accredited By : BMDC
Accreditation No. A55144

PATIENT CONTROL NUMBER
HSL-003470

MEDICAL EXAMINATION CERTIFICATE

SURNAME AHMAD	FIRST NAME AND IMTIAZ	MIDDLE NAME
PLACE AND DATE OF BIRTH NOAKHALI 2-Mar-1996	PASSPORT NUMBER A02520726	SEAMAN'S BOOK NUMBER CO11259
NATIONALITY : BANGLADESHI	SEX : ☒ Male ☐ Female	VESSEL TYPE : BULK CARRIER TRADING AREA : WORLD WIDE
PERMANENT HOME ADDRESS : CHARHAZARI, WARD-02, COMPANIGANJ, CHARHAZARI-3851, NOAKHALI, BANGLADESH		CONTACT NUMBER : +8801830275110 (SELF)
		RANK : 3RD ASST ENGINEER

Have you ever had any of the following conditions?

Condition	YES	NO	Condition	YES	NO
1 Eye/vision problem	☐	☒	18 Sleep problems	☐	☒
2 High blood pressure	☐	☒	19 Do you smoke?	☐	☒
3 Heart/vascular disease	☐	☒	20 Operation/surgery	☐	☒
4 Heart surgery	☐	☒	21 Epilepsy/seizures	☐	☒
5 Varicose veins	☐	☒	22 Dizziness/fainting	☐	☒
6 Asthma/bronchitis	☐	☒	23 Loss of consciousness	☐	☒
7 Blood disorder	☐	☒	24 Psychiatric problems	☐	☒
8 Diabetes	☐	☒	25 Depression	☐	☒
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/nose/throat problems	☐	☒
14 Infectious/contagious diseases	☐	☒	31 Restricted mobility	☐	☒
15 Hernia	☐	☒	32 Back problems	☐	☒
16 Genital disorders	☐	☒	33 Amputation	☐	☒
17 Pregnancy	☐	☒	34 Fractures/dislocations	☐	☒

If any of the above questions were answered "yes", please give details.

Additional questions

Question	YES	NO
35 Have you ever been signed off as sick or repatriated from a ship?	☐	☒
36 Have you ever been hospitalised?	☐	☒
37 Have you ever been declared unfit for sea duty?	☐	☒
38 Has your medical certificate ever 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 medications?	☐	☒

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 authorize the release of all my previous medical records from any health professionals, health institutions and public authorities to Dr. Mir Md. Raihan (approved medical practitioner) I also certify that my history contained above is true and any false statement will disqualify me from my employment, benefits and claims.

Signature of Seafarer

MEDICAL EXAMINATION

Weight 70 kg	Height (cm) 170	BMI 25.7	Blood Pressure: Systolic 110 mmHg Diastolic 70 mmHg	PULSE: 78 bpm
Ear	Hearing by Audiometry	Audiometry		
Right	☐ Adequate ☐ Inadequate	500	1000	2000
Left	☐ Adequate ☐ Inadequate	3000		
		Hearing by Whisper Test		
		☐ Adequate ☐ Inadequate		
		☒ Adequate ☐ Inadequate		
Hearing meets the standards as laid down in STCW Code Section A-1/9? YES ☐ NO ☐				

Visual acuity				Visual fields	
Unaided		Aided		Normal	Defective
Right eye	Left eye	Right eye	Left eye		
Distant	6/6	6/6			
Near					

Visual acuity meets the standard laid down in STCW Code Section A-1/9
 Colour vision as per STCW CODE Section A-1/9: ☒ Normal ☐ Doubtful ☐ Defective

Date of last colour vision test: Date (day/month/year) 13 SEP 2023

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

RESULTS OF ANCILLARY EXAMINATIONS

Chest X-Ray	NAD	BIO CHEMICAL (LIVER FUNCTION TEST)	Marijuana	☐ Positive ☒ Negative
ECG	NAD	BILIRUBIN	Alcohol Test	☐ Positive ☒ Negative
BLOOD R/E		SGPT	URINE R/E	NAD
DC (differential count)	NAD	SGOT	OTHERS	
HAEMOGLOBIN (HGB)	14.5	DRUG AND ALCOHOL TEST		
ESR (WESTERGREN)	06	Morphine	☐ Positive ☒ Negative	HBsAg
WBC	9700	Amphetamine	☐ Positive ☒ Negative	HIV / AIDS Test
BLOOD GLUCOSE LEVEL		Phencyclidine	☐ Positive ☒ Negative	VDRL
RANDOM	4.4	Barbiturates	☐ Positive ☒ Negative	Blood Type
HBA1C	5.67	Cocaine	☐ Positive ☒ Negative	Psychological Exam
				Others (KUB Ultrasound)

Hereby I declare that I am in knowledge of the contents of the Physical examinations:

 Signature of Seafarer	IMTIAZ AHMAD Name of Seafarer	13 SEP 2023 Date
---------------------------	---	----------------------------

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 lookout duties		☐ Not fit for lookout duties	
Fit	Deck service	Engine service	Catering service
Unfit	Other services		
☒ Without restrictions		☐ With restrictions	

Is the Seafarer free from any medical conditions 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?

Yes	No
☒	☐

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

Action taken by medical examiner (e.g., referral):

Fitness Date: 13 SEP 2023	Valid Until: 12 SEP 2025
----------------------------------	---------------------------------

Name and Signature of Authorized Physician

DR. MIR. MD. RAIHAN

In Accordance with Medical Examination (Seafarers) Code of Practice, Part (C) and STCW 1978/1996 as Amended, MLC 2006

**PHYSICAL EXAMINATION REPORT/CERTIFICATE
DEPUTY COMMISSIONER OF MARITIME AFFAIRS**

ANNEX 2

THE REPUBLIC OF LIBERIA

LAST NAME OF APPLICANT AHMAD			FIRST NAME IMTIAZ			MIDDLE INITIAL		
DATE OF BIRTH 3 2 1996 MONTH DAY YEAR			PLACE OF BIRTH NOAKHALI BANGLADESH CITY COUNTRY			SEX MALE ☒ FEMALE ☐		
EXAMINATION FOR DUTY AS:						MAILING ADDRESS OF APPLICANT:		
MASTER ☐ RATING ☐ MATE ☐ MOU DECK ☐ ENGINEER ☒ MOU ENGINE ☐ RADIO OFF ☐ SUPERNUMERARY ☐						CHARIHAZARI, WARD-02, COMPANIGANJ, CHARIHAZARI-3851, NOAKHALI, BANGLADESH		
MEDICAL EXAMINATION (SEE PAGE 2) STATE DETAILS ON PAGE 2								
HEIGHT	WEIGHT	BLOOD PRESSURE	PULSE	RESPIRATION	GENERAL APPEARANCE			
175cm	70kg	120/70mm	78/min	12/min	Good			
VISION:		RIGHT EYE		LEFT EYE				
WITHOUT GLASSES		6/6		6/6				
WITH GLASSES								
DATE OF LAST COLOR VISION TEST (Month/Day/Year)				Testing Required every 6 years				
13 SEP 2023				YES ☐ NO ☐				
COLOR VISION MEETS STANDARDS IN STCW CODE, TABLE A-I/9?								
COLOR TEST TYPE: BOOK ☐ LANTERN ☐ CHECK IF COLOR TEST IS NORMAL								
YELLOW ☐ RED ☐ GREEN ☐ BLUE ☐								
HEARING		RT. EAR		LEFT EAR				
		Normal		Normal				
HEAD AND NECK		Normal		HEART (CARDIOVASCULAR)		Normal		
LUNGS		Normal		SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER)		IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION?		
EXTREMITIES:		UPPER		LOWER				
		Normal		Normal				
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY, OR TO RENDER HIM UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? IF YES, EXPLAIN IN DETAILS OF MEDICAL EXAMINATION ON PAGE 2.								
No.								
SIGNATURE OF APPLICANT			DATE OF EXAM			EXPIRY DATE		
[Signature]			13 SEP 2023			12 SEP 2025		
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN.								
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO: IMTIAZ AHMAD								
FIT FOR DUTY ON BOARD SHIP (NAME OF APPLICANT)								
(HE) (SHE) IS FOUND TO BE (FIT) (NOT FIT) FOR DUTY AS A: (MASTER, MATE, ENGINEER, RADIO OFFICER, RATING, MOU DECK, MOU ENGINE or SUPERNUMERARY).								
NAME AND DEGREE OF PHYSICIAN DR. MIR MD, RAIHAN ; M.B.B.S (D.U), REG.NO.A-55144								
ADDRESS REDICAL HOSPITALS LIMITED, 35, SHAH MAKHDUM AVENUE, SECTOR-12, UTTARA, DHAKA-1230, B								
NAME OF PHYSICIAN'S CERTIFYING AUTHORITY DG SHIPPING, BANGLADESH								
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE 6-May-14								
SIGNATURE OF PHYSICIAN [Signature]						DATE OF EXAMINATION: 13 SEP 2023		

This certificate is issued by authority of the Deputy Commissioner of Maritime Affairs, R.L. and in compliance with the requirements of the Maritime Labour Convention, 2006 for the Medical Examination of Seafarers.

The Medical Certificate shall be valid for no more than two (2) years from the date of the Examination for those over 18 years of age and for no more than one (1) year for those under 18 years of age.

RLM-105M (REV. 12/17) **DR. MIR. MD. RAIHAN**
 MBBS (DU), DFM, CCD (Birdem), PGT (Ophth)
 BMDC A-55144, MMC-BGD-010
 DG Shipping Bangladesh Approved
 General Physician
 Radical Hospitals Limited.



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 seaman, 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, 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)

1. COMPLETE PHYSICAL EXAMINATION INCLUDING HEARING TEST.

2. PATHOLOGICAL EXAMINATION : A) Complete Blood Count., B) Blood Sugar Estimation,

C) Serological Test(VDR) D) Hepatitis B Surface Antigen Test (HbsAg),

E) Urinysis F) Drug Test G) Alcohol Test.

3. X - RAY EXR PA VIEW

4. E.C.G. TEST

5. EYE EXAMINATION FOR V/A & C/V

13 SEP 2023

RLM-I05M (REV. 12/17)




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

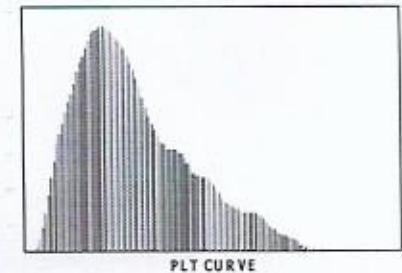
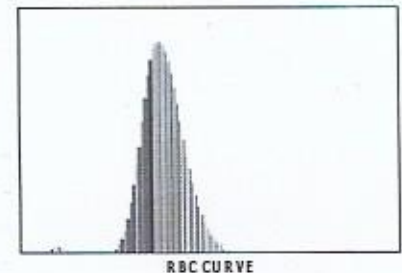
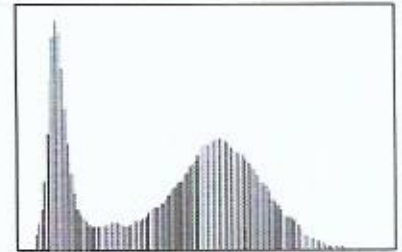


Id No : 0573 Patient's Name : IMTIAZ AHAMAD Specimen : Blood Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC C/O/11259	Date : 13-Sep-2023 Age : 27Y 6M 9D	D.Date : 13-Sep-2023 Gender : Male
---	---	---

Haematology Report

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

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	14.5 gm/dl	M:13-18 gm/dl. F:11.5-16.5 gm/dl. Child:10-13 gm/dl.
ESR(Westergreen)	06 mm/1st hr	Infant: (One year):8-10 gm/dl. Male:0-10, F:0-20 mm/1st hr.
Total WBC Count(TC)	9,700 /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	65 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	31 %	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	194 /cumm	50-450/cumm
Total RBC Count	4.56 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	40.2 %	M: 40-54%, F:37-47%
MCV	88.2 fL	76 - 94 fL
MCH	31.8 pg	27 - 32 pg
MCHC	36.1 g/dL	29 - 34 g/dL
RDW	12.7 %	11 - 16 %
PDW	16.6 fL	35 - 56 fL
Total Platelete Count (PC)	1,77,000 /cumm	150,000-450,000/cumm
MPV	10.2 fL	7.0 - 11.0 fL
PCT	0.181 %	0.1 - 0.5 %
Bleeding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %



Checked By
Medical Technologist

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

Bill No	DIA23090573	Received Date	13/09/2023
Patient's Name	IMTIAZ AHAMAD		
Patient's Age	27Y 6M 9D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/11259
Sample	BLOOD		

BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	4.4 mmol/l	4.2 – 6.4 mmol/l
Serum Bilirubin (Total)	0.50 mg/dl	0.2 - 1.1 mg/dl
Serum AST (SGOT)	25.0 U/L	Up to 37 U/L
Serum ALT (SGPT)	28.0 U/L	Up to 40 U/L
HbA1C	5.0 %	4.2 - 6.7 %

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

Bill No	DIA23090573	Received Date	13/09/2023
Patient's Name	IMTIAZ AHAMAD		
Patient's Age	27Y 6M 9D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/11259
Sample	BLOOD		

SEROLOGICAL REPORT

Test Name

Result

HIV 1 & 2 (Method : (ICT)	Negative
HBsAg (Method : (ICT)	Negative
VDRL	Non-reactive

BLOOD GROUPING Result

ABO Blood Group	"O" (+ve)
Rh(D)Factor	Positive

Checked By

Medical Technologists
Radical Hospitals Ltd.



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

Bill No	DIA23090573	Received Date	13/09/2023
Patient's Name	IMTIAZ AHAMAD		
Patient's Age	27Y 6M 9D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/11259
Sample	URINE		

DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

Test Name	Result
-----------	--------

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.
Dr. Sumaiya Khatun
MBBS, MD (Microbiology)
Associate ProfessorDept. of Microbiology
East West Medical College and Hospital



Bill No	DIA23090573	Received Date	13/09/2023
Patient's Name	IMTIAZ AHAMAD		
Patient's Age	27Y 6M 9D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/11259
Sample	URINE		

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

MICROSCOPIC EXAMINATION

Quantity	Sufficient	CELLS / HPF	
Color	Straw	R B C	NIL
Appearance	Clear	Pus Cells	1-3/HPF
Sediment	Nil	Epithelial	1-2/HPF

CHEMICAL EXAMINATION

CASTS / 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 REQUEST

CRYSTALS & OTHERS

Bile Salt	Not Done	Urates	Nil
Bile Pigment	Not Done	Uric Acid	Nil
Ketones	Not Done	Cal. Oxalate	Nil
Urobilinogen	Not Done	Amor. Phos	Nil
B.J. Protein	Not Done	Tripple Phos	Nil

Checked By

Medical Technologist

Dr. Sumaiya Khatun

MBBS, MD (Microbiology)

Assistant Professor

Dept. of Microbiology

East West Medical College and Hospital

DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23090573 Receive: 13/09/2023 Print: 13/09/2023
Patient's Name : **IMTIAZ AHMAD**
Age : 27 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: 213

Mr. J. J. J. J. J.
Male 29 years

13-09-2023 16:27:04

HR : 70 bpm

P : 102 ms

PR : 140 ms

QRS : 86 ms

QT/QTc : 336/363 ms

P/QRS/T : 15/75/17 °

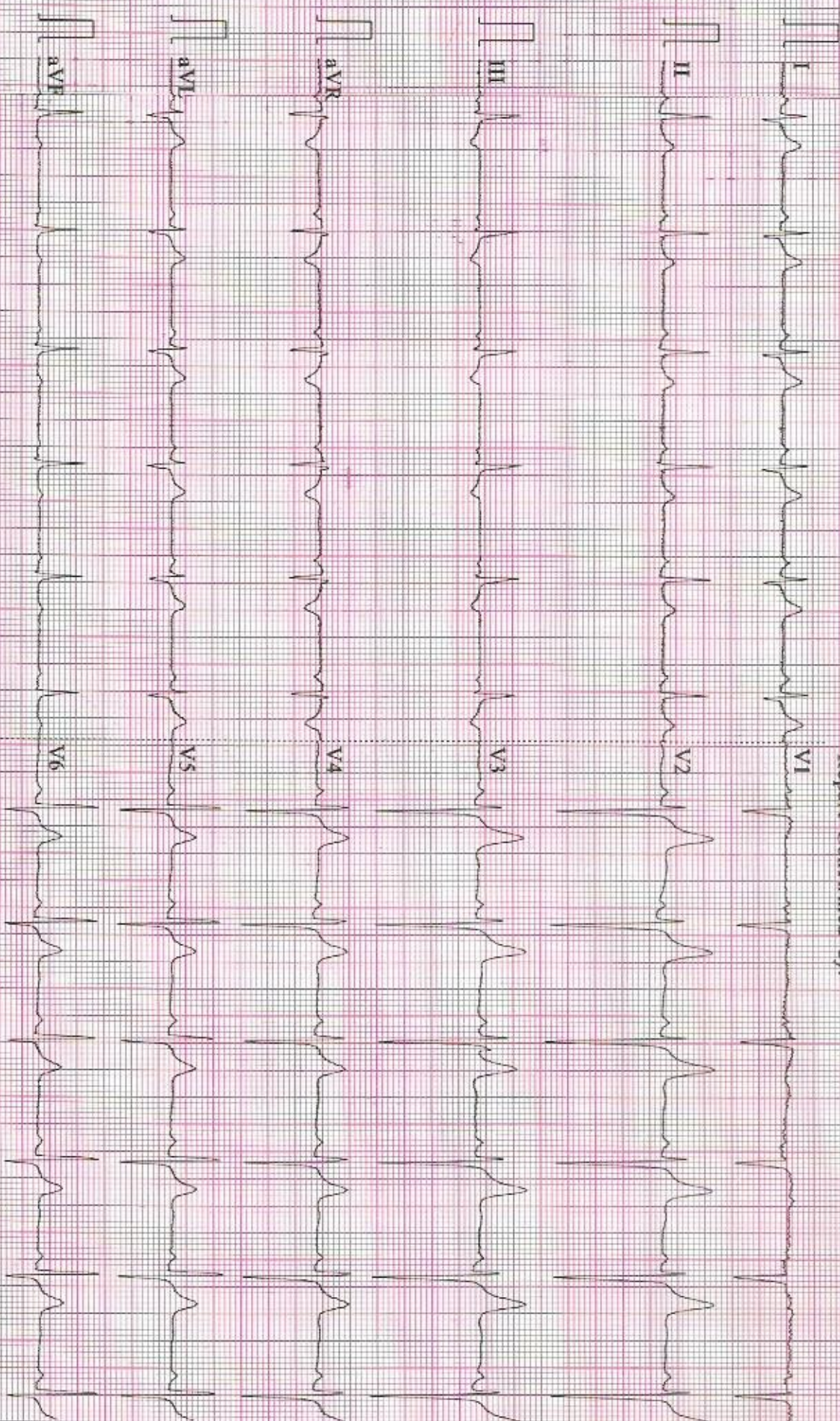
RV5/SV1 : 0.885/0.893 mV

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



REF: MV. OSAKA STAR

DATE: 13/09/2023

M/S. HAQUE & SONS LTD.
 RUMMANA HAQUE TOWER
 1267/A, GOSHAIL DANGA
 AGRABAD C/A, CHITTAGONG.

EYE EXAMINATION REPORT

NAME: IMTIAZ AHMAD

RANK: 3A/ENG

CDC NO: C/O/11259

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

6/6

6/6

AIDED

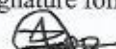
COLOUR VISION: NORMAL / ~~BLIND~~OPINION : ~~UNFIT~~ / FIT FOR EMPLOYMENT ON BOARD


Dr. Mir Md. Raihan
 MBBS, PGT (Ophthalmology)
 Assistant Registrar (EX)
 East west Medical College & Hospital

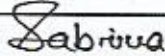
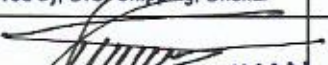
INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

This is to certify that
whose signature follows

Date of birth 02.03.1996 Sex MALE



has on the date indicated been vaccinated or revaccinated against Cholera

Date	Signature and Professional status of vaccinator	Approved Stamp	
1	 DR. SABRINA MOSTAFA MBBS (D.U) Reg. No. BMDC, Dhaka A-68208 Seafarer's Medical Practitioner Approved by, D.G. Shipping, Dhaka		
2	 DR. M.R. MD. RAIHAN MBBS (DU), DFM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician Radical Hospitals Limited.		
3		3	4
4			
5		5	6
6			
7		7	8
8			

Continued overleaf Suite our erso