



Accredited By : BMUC
Accreditation No. A-5514

PATIENT CONTROL NUMBER: HSL-003112

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

MEDICAL EXAMINATION CERTIFICATE

RNAME	FIRST NAME AND	30203	MIDDLE NAME	II th
CE AND DATE OF BIRTH	PASSPORT NUMBER	SHIDUL.	SEAMANIS DE	NOW AN IMPER
PABNA 1-Jan-1996		726425	SEAMAN'S BO	CO9644
IONALITY: BANGLADESHI SEX:		The state of the s	PF : CONTAINER SHIP TR	ADING AREA: WORLD WID
MANENT HOME ADDRESS :	A Total Million	12.000	CONTACT NUMBER :	1723524826
ARIFPUR WEST, 375/02, DIST+POS	T+PS- PARNA BANGLAD	)FSH	RANK :	3RD ENGINEER
7		TO II	IVIIII .	SIND ENGINEER
ave you ever had any of the following of	conditions?	-		The second secon
				44400
Condition  1 Eve/vision problem	YES NO	Condition		YES NO
and a resolution bronzerin		18 Sleep pr		
g. olooo piccoca		19 Do you s		- ZX
			n/surgery	2 2
, 30. )	/ .		/seizures	
5 Varicose veins 6 Asthma/bronchitis		100 miles	s/fainting	- Z/
7 Blood disorder	i i/.		consciousness	
8 Diabetes		, 0,0,0,0	ric problems	
9 Thyroid problem	ii 6,	25 Depress 26 Attempte	\$300 Hz	
10 Digestive disorder		************************************	ed suicide	
11 Kidney problem		27 Loss of r		- 2x
12 Skin problem		28 Balance 29 Severe t		
13 Allergies		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	neadaches	
14 Infectious/contagious diseases	//	\$4700 Andrew Control Co.	/throat problems	
15 Hemia			ed mobility	
16 Genital disorders				
	I NAD	THE SHARE SHOWING		2 8/
17 Pregnancy any of the above questions were answ	1///	× 17.00tore	s/dislocations	
ne u				YES NO
35 Have you ever been signed off 36 Have you ever been hospitalise		a ship?		
The second secon				
		40		
MM Library and appropriate to the contract of				0 8
38 Has your medical certificate ev		ses or illnesses?	2	0. 8
39 Are you aware that you have a				of m
39 Are you aware that you have at 40 Do you feel healthy and fit to	o perform the duties of you		sition roccupation :	20
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat	o perform the duties of you tions?	ur designated pos	silionroccupation?	
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat	o perform the duties of you tions?	ur designated pos	Milotroccupation?	/ Y
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:	o perform the duties of you tions?	ar designated pos	MIOTROCCUPATION?	
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescri	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica	ARD SHIP	MIOTROCCUPATION?	/ Y
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescri	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica	ARD SHIP	Microccupations	
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescri	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica	ARD SHIP	Microccupation?	
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescri	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica	ARD SHIP	MIOTROCCUPATION?	
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescri fyes, please list the medications taken	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica and the purpose(s) and dos	ARD SHIP ations?		
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescri yes, please list the medications taken hereby authorize the release of all my	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica and the purpose(s) and dose	ARD SHIP ations? sage(s)	ofessionals, health institut	ions and public authorities
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescri fyes, please list the medications taken thereby authorize the release of all my to 50 Dr. Mir Md. Raihan (approved medical)	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica and the purpose(s) and dose previous medical records from the previous medical records from the precious medical records from the previous medical records from	ARD SHIP ations? sage(s)	ofessionals, health institut	ions and public authorities
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescriptives, please list the medications taken thereby authorize the release of all my to 50 Dr. Mir Md. Raihan (approved medications)	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica and the purpose(s) and dose previous medical records from the previous medical records from the precious medical records from the previous medical records from	ARD SHIP ations? sage(s)	ofessionals, health institut	ions and public authorities
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescri figes, please list the medications taken thereby authorize the release of all my to 50 Dr. Mir Md. Raihan (approved medications)	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica and the purpose(s) and dose previous medical records from the previous medical records from the precious medical records from the previous medical records from	ARD SHIP ations? sage(s)	ofessionals, health institut	ions and public authorities
Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  Fit  42 Are you taking any non-prescripty yes, please list the medications taken thereby authorize the release of all my to Dr. Mir Md. Raihan (approved medicalisqualify me from my imployment, ben	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica and the purpose(s) and dose previous medical records from the previous medical records from the precious medical records from the previous medical records from	ARD SHIP ations? sage(s)	ofessionals, health institut	ions and public authorities
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  42 Are you taking any non-prescriptives, please list the medications taken thereby authorize the release of all my to Dr. Mir Md. Raihan (approved medicalisqualify me from my employment, ben signature of Seafarer	o perform the duties of you tions?  IT FOR DUTY ON BO.  ption or prescription medica and the purpose(s) and dose previous medical records from the previous medical records from the precious medical records from the previous medical records from	ARD SHIP ations? sage(s)	ofessionals, health institut	ions and public authorities
Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescriptives, please list the medications taken thereby authorize the release of all my to Dr. Mir Md. Raihan (approved medical disqualify me from my employment, ben Signature of Seafarer DICAL EXAMINATION	o perform the duties of your tions?  IT FOR DUTY ON BO.  ption or prescription medical and the purpose(s) and dose previous medical records from the previous medical records from the precion of the previous medical records from the precion of the precion of the previous medical records from the precion of	ARD SHIP ations? sage(s) om any health prothat my history co	ofessionals, health institut ntained above is true and	ions and public authorities any false statement will
39 Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat Comments:  42 Are you taking any non-prescrif yes, please list the medications taken hereby authorize the release of all my to Dr. Mir Md. Raihan (approved medical disqualify me from my employment, ben Signature of Seafarer	o perform the duties of your tions?  IT FOR DUTY ON BO.  ption or prescription medical and the purpose(s) and dose previous medical records from the previous medical records from the precion of the previous medical records from the precion of the precion of the previous medical records from the precion of	ARD SHIP ations? sage(s) om any health prothat my history co	ofessionals, health institut	ions and public authorities
Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  FI  42 Are you taking any non-prescriptives, please list the medications taken thereby authorize the release of all my to Dr. Mir Md. Raihan (approved medical disqualify me from my employment, ben Signature of Seafarer DICAL EXAMINATION	o perform the duties of your tions?  IT FOR DUTY ON BO.  ption or prescription medical and the purpose(s) and dose previous medical records from the previous medical records from the precion of the previous medical records from the precion of the precion of the previous medical records from the precion of	ARD SHIP ations? sage(s) om any health prothat my history co	ofessionals, health institut ntained above is true and	ions and public authorities any false statement will
Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat Comments:  FI  42 Are you taking any non-prescriptives, please list the medications taken thereby authorize the release of all my to Dr. Mir Md. Raihan (approved medical disqualify me from my imployment, ben Signature of Seafarer DICAL EXAMINATION  Weight Height (cm)	TFOR DUTY ON BO  ption or prescription medica and the purpose(s) and dos  previous medical records fro all practioner) I also certify the fits and claims.  Audiome	ARD SHIP ations? sage(s) om any health prothat my history co	ofessionals, health institut ntained above is true and Diastolic	ions and public authorities any false statement will
Are you aware that you have at 40 Do you feel healthy and fit to 41 Are you allergic to any medicat comments:  Fit  42 Are you taking any non-prescriptives, please list the medications taken thereby authorize the release of all my poor. Mir Md. Raihan (approved medicalisqualify me from my imployment, ben Signature of Seafarer DICAL EXAMINATION  Weight Hearing by Audiometry	ption or prescription medical and the purpose(s) and dos previous medical records from the previous medical practioner) I also certify the fits and claims.    Audiometric   Audiometric	ARD SHIP ations? sage(s) om any health prothat my history co	ofessionals, health institutintained above is true and Diastolic Hearing by Whisper	ions and public authorities any false statement will

	1114	The second secon	al acuity	idad			Visual f	ields
	Right eye	aided Left eye /	Right eye	Left eye		Norn	nal	Defective
Distant	6/6	6/6	raight cyc	Len eye	Right ey	ve.	1	3111
Near		1000			Left-eye			
Visual acuit	ty meets the star	ndard laid down	in STCW Code	Section A-1/				
Colour visio	on as per STCW	CODE Section	A-1/9:	Normal	[] Doubtfu	ıl 🗆 🗆 De	efective	
Data of last		at Data (day)	13	SEP 202	3			
Date of last	t colour vision tes	st: Date (day/m	onth/year)	<i>J J</i>	Lu ————————————————————————————————————			
			Normat? Abnor	rmal			No	rmal Abnorma
Head			N/ D	Var	ricose veins			1 0
Sinuses, no	ose, throat		X/ 0	Vas	scular (inc. pedal p	oulses)	1	8/10
Mouth/teeth	n		No o	0.000	domen and viscera	3		9/0
Ears (gener	00.50		7/10		mia		,	9 0
Tympanic n	nembrane	3	121 0	7.7	us (not rectal exam	1)	,	
Eyes			1/2		J system		(	
Opthalmoso	copy		1/2 - 11		per and lower extre		,	
Pupils Euo mouse	2001		7/ 0		ne (C/S, T/S and I	./S)		71
Eye movem Lungs and			2 0	10000	urologic (full brief)		8	2/ 1
Breast exar		6	WA I	, ,,,,	chiatric			
Heart	I I I I I I I I I I I I I I I I I I I	/		-	neral appearance			2 2
122.4		-	F 5	SKI	355			- 4
ESULTS OF	ANCILLARY EX	KAMINATIONS						
Chest X-Ra			BIO CHEMICAL	(LIVER FUI	NCTION (EST)	Marijuana	Posit	tive It Negative
ECG	1		LIRUBIN			Alcohol Test	□ Posi	tive Negative
	BLOOD R/E		3PT	1 3	25	URINE R/E	1	2771
DC(differen	tial count)	S	GOT	9	5	VEX.LOSS CONTRACTOR	OTHERS	-
Personal Control of the Control of t	OBIN (HGB)	030)	DRUG A	ND ALCOHO	DL TEST	HBsAg		ctiv Nonfeacti
	TERGREN)	26 M	orphine	□ Positive	-	HIV / AIDS Test	-	ctiv 12 Namreacti
WBC	2	/ -	mphetamine			VDRL	□ Read	Nonreact
	OD GLUCOSE L		nencyclidine		The state of the s	Blood Type	1	(HIE)
RANDOM			arbiturates			Psychological Exam		m
HBA1C		5-07.0	ocaine	☐ Positive	Megative	Others(KUB Ultrase		NE
		owledge of the	contents of the I	Physical exar	minations:			
reby I declar	e mat i am in kn							
200	(/				111 101 111			13-Sep-2023
Jushila	el.				UL ISLAM		_	Date
200	el.	6:			UL ISLAM f Seafarer			Date
pushil unature of Se	eafarer  of fitness for ser			Name o	f Seafarer			
nature of Se sessment of the basis of	eafarer  If fitness for ser		ration, my clinica	Name o	f Seafarer	tic test results recor		
pushil unature of Se	eafarer  If fitness for ser	personal declar		Name o	f Seafarer n and the diagnos		ded above	
nature of Se sessment of the basis of	eafarer  If fitness for ser	personal declar	ration, my clinica	Name o	f Seafarer	tic test results recor	ded above	
nature of Se sessment of the basis of	eafarer  If fitness for ser	personal/declar	lookout duties	Name o	n and the diagnosi	Not fit for looke	ded above	, I declare the
nature of Se sessment of the basis of	eafarer  If fitness for ser	personal declar	lookout duties	Name o	n and the diagnosi	Not fit for looke Catering service	ded above	Other services
nature of Se sessment of the basis of	eafarer  If fitness for ser	personal/declar	lookout duties	Name o	n and the diagnosi	Not fit for looke	ded above	, I declare the
inature of Se sessment of the basis of aminee medi	eafarer  If fitness for ser	personal declar	lookout duties	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
inature of Se sessment of the basis of aminee medi	eafarer  If fitness for ser	Personal declar	lookout duties	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
sessment of the basis of aminee medi	afarer  If fitness for ser  Ithe examinee's cally:	Personal declar	lookout duties	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
sessment of the basis of arminee media	afarer  If fitness for ser It the examinee's cally:  Without reserve free from any me	Personal declar	ervice s likely to be ago	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
sessment of the basis of arminee media	afarer  If fitness for ser  Ithe examinee's cally:	Personal declar	ervice	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
sessment of the basis of arminee media	afarer  If fitness for ser It the examinee's cally:  Without reserve free from any me	Personal declar	ervice s likely to be ago	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
sessment of the basis of arminee media	afarer  If fitness for ser It the examinee's cally:  Without reserve free from any me	Personal declar	ervice	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
inature of Se sessment of the basis of aminee medi- fit the Seafarer danger the hi	afarer  If fitness for ser It the examinee's cally:  Without reserve free from any me	Personal declar	s likely to be ago	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
inature of Se sessment of the basis of aminee mediaminee mediaminee mediaminee mediaminee the his scribe restricts	Without restricted from any mealth of other pe	Personal declar  Fit for  Deck s  strictions  edical condition roons on board  cific position, type	s likely to be ago	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
inature of Se sessment of the basis of aminee mediaminee mediaminee mediaminee mediaminee the his scribe restricts	without refree from any mealth of other pe	Personal declar  Fit for  Deck s  strictions  edical condition roons on board  cific position, type	s likely to be ago	Name of the Name o	n and the diagnosi	Not fit for looke	ded above	Other services
inature of Se sessment of the basis of aminee medi fit the Seafarer danger the hi	Without restricted from any mealth of other permitted from the examine of the exa	Personal declar  Fit for  Deck s  strictions  edical condition resons on board  cific position, typ  mer (e.g., referra	s likely to be ago	Name of all examination with the second seco	n and the diagnost	Not fit for looks  Catering service	ded above out duties	Other services
inature of Se sessment of the basis of aminee mediaminee mediaminee mediaminee mediaminee the his scribe restricts	Without restricted from any mealth of other permitted from the examine of the exa	Personal declar  Fit for  Deck s  strictions  edical condition roons on board  cific position, type	s likely to be ago	Name of all examination with the second seco	n and the diagnosi	Not fit for looks  Catering service	ded above	Other services

# PHYSICAL EXAMINATION REPORT/CERTIFICATE DEPUTY COMMISSIONER OF MARITIME AFFAIRS

ANNEX 2

#### THE REPUBLIC OF LIBERTA

LATER WANTE OF A	APPLICANT		FIRST NAME			MIDDLE INITIAL	
ISLAM			RASHIDUL			CONTRACTOR CONTRACTOR	
DATE OF BIRTH			PLACE OF BIE	RTH		SEX	
1	1	1996	PABNA	BAN	GLADESH		
MONTH	DAY	YEAR	CITY	COU	INTRY	MALE FEMAL	E []
EXAMINATION F	OR DUTY AS	S:		MAILING	ADDRESS OF APPLIC	ANT:	
MASTER		RATING		VILL: AI	RIFPUR WEST, 375/02,	, DIST+POST+PS; PABN	A
MATE		MOU DECK					
ENGINEER	1	MOU ENGIN	E [				
RADIO OFF		SUPERNUM	ERARY	BANGLA	ADESH.		
MEDICAL EXA	MINATION	(SEE PAGE	2) STATE DETA	AILS ON PAGE	2		
неібіт 167т	WEIGHT	BLOOD P	RESSURE	PULSE Phimit	RESPIRATION Alphan	GENERAL APPEA	RANCE
VISION:	RIC	GHT EYE	LIFE	EYE	201111	Cloud	
WITHOUT GLASS	SES 6	16	161	6			
WITH GLASSES			1	3 SEP 2023	88		
DATE OF LAST C	OLOR VISIO	N TEST (Mont	h/Day/Year)	1 9 9EL TOT3	Testing Required	d every 6 years	
COLOR VISION N	MEETS STAN	DARDS IN ST	CW CODE, TABI	E A-1/9?	YES []	NO ON	
COLOR TEST TYPE	BOOK LAN	TERN CHECK	CIF COLOR TEST I	IS NORMAL	YELLOW F	RED GREEN	BLUE
HEARING	RT, EAR	1%	77	LEF	TYEAR	MO	
HEAD AND NEC	× 1	âteri	m	HEART (CARI	DIOVASCULAR)	VOTAJA	ac
LUNGS	10	100	lec			FICER AND RADIO OFFI MAL VOICE COMMUNIC	
EXTREMITIES:		200	mm			0	211
UPPER	_/	VOR	ma		LOWER	VO/1111	uc
	NDANGER T					DER HIM UNFIT FOR SEF DETAILS OF MEDICAL	EVICE AT SEA
<u></u>	200	2.		13-Sep-	30-SEP 2023	12 SEI	2025
SIGN/	ATURE OF AL	PLICANT	-	DATE OF	EXAM	EXPIRY DA	TE
7	THIS SIGNAT	URE SHOULI	BE AFFIXED IN	THE PRESENC	E OF THE EXAMINING	PHYSICIAN.	
THIS IS TO CERT	TEY THAT A	PHYSICAL E	XAMINATION W	AS GIVEN TO	RA	SHIDUL ISLAM	
		FI	T FOR DUTY	ON BOAR	SHIP (NAME OF AP	PLICANT)	
(FIE) (SHE) IS FO MOU ENGINE or		FIT) (NOT FII				IO OFFICER, RATING, M	OU DECK,
NAME AND DE	EGREE OF P	HYSICIAN	DR. MD. AY	UBUR RAHM	IAN M,B,B,S; P,G,T	. (MEDICINE)	
ADDRESS 8	ABA DIAGN	OSTIC CENT	ER, TAHER CH	AMBER(G/F), 1	0- AGRABAD C/A, CH	ITTAGONG, BANGLAD	ESH.
NAME OF PHY	SICIAN'S CI	ERTIFICATI	VG ALTTHORIT	Y BANGLADE	SH MEDICAL AND	DENTAL COUNCIL	(B.M.D.C.)
DATE OF Jeen	E OF PHYSI	CIANYCHR	TIFICATE	23-Feb-84			
DATE OF 1880		Kum			DATE OF EXAMIN	IATION: 1	2 050 000
SIGNATURE O	F PHYSICIA	/11111			-	1	3 SEP 202
SIGNATURE O	is issued by a	uthority of th			=	in compliance with the re	

for no more than one (1) year for those under 18 years of

CAS Per-MLC-2006

RLM-I05M (REV. 12/17)
DR. MIR. MD. RAIHAN
MB85 (DU) DFM CCD (Birdom) PGT (CpMh)
BMDC A-55144, MMC-BGD-016 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 car at 15 feet and in the poorer car at 5 feet.
- 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.
- Engineer and radio officer applicants must have (either with or without glasses) at least 20/30 vision in one eye and (c) 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 PHYSICA	LEXAMINATION	INCLUDING HEARING TEST

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

C) Serological Test(VDR) D) Hepatitis B Sarface Antegen Test (HbsAg),

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

3. X - RAY EXR PA VIEW

4. E.C.G. TEST

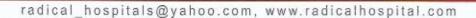
5. EYE EXAMINATION FOR V/A & C/V

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 Shipp.ng Bangladesh Approved
General Physician
Radical Hospitals Limited





Id No : 0578

Date: 13-Sep-2023

D.Date: 13-Sep-2023

Patient's Name: RASHIDUL ISLAM

Age: 27Y 8M 12D

Gender: Male

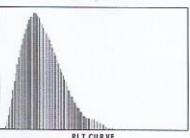
: Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM CDC NO:C/O/9644

# Haematology Report

(Relevant estimations were carried out by Mythic-O

Parameter Name	Results	Reference Range	
Hemoglobin (Hb) ESR(Westergreen)	13.9 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.	
2   C   C   C   C   C   C   C   C   C	06 mm/1st hr	Male:0-10, F:0-20 mm/1st hr.	
Total WBC Count(TC)	<b>8,900</b> /cumm	Adult: 4000 - 11000/cumm. Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm	
Differential WBC Count (DC)			
Veutrophils	65 %	Child: 25-66 %, Adult: 40-75 %	
ymphocytes Appartes	31 %	Child: 52-62 %, Adult: 20-50 %	lin
Monocytes	02 %	Child: 03-07 %, Adult: 02-10 % WBC CURVE	
Posinophils Passophile	02 %	Child: 01-03 %, Adult: 01-06 %	
Basophils	00 %	Adult: 00-01 %	
otal Cir. Eosinophils	178 /cumm	50-450/cumm	
otal RBC Count	4.53 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul	
ICT/PCV	38.4 %	M: 40-54%, F:37-47%	
1CV	84.8 fL	76 - 94 fL	
1CH	<b>30.7</b> pg	27 - 32 pg	
4CHC	<b>36.2</b> g/dL	29 - 34 g/dL RECCURVE	
RDW	13.3 %	11 - 16 %	
PDW	<b>16.6</b> fL	35 - 56 fl	
Total Platelete Count (PC)	2,30,000 /cumm	150,000-450,000/cumm	
4PV	8.3 fL	7.0 - 11.0 ftg (2.7)	
PCT	0.191 %	0.1 = 0.%	
Bledding Time(BT)	%	10 - 18 %	
Cloting Time(CT)	%	0.1- 0.2 %	



Checked By Medical Techn

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

Francis Alternation

RADICAL HOSPITAL

radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA23090578	Received Date	13/09/2023
Patient's Name	RASHIDUL ISLAM	110001VCG Date	13/09/2023
Patient's Age	27Y 8M 12D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),C	Control Contro	CDC NO:C/O/9644
Sample	BLOOD	, ,, (-, -),	000110.0/0/9044

# BIOCHEMISTRY REPORT

Test Name	Result	Reference Range
Random Blood Sugar (RBS)	5.0 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 Technologis Radical Hospitals Ltd. Dr. Sumaiya Khatun M BBS, MD (Microbiology) Associate Professor Dept. of Microbiology East West Medical College and Hospital



radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA23090578	Received Date	13/09/2023
Patient's Name	RASHIDUL ISLAM		
Patient's Age	27Y 8M 12D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),	CCD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/9644
Sample	BLOOD	28.01 25.07 800	

# SEROLOGYCAL REPORT

Test Name

Result

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

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

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	DIA23090578	Received Date	13/09/2023
Patient's Name	RASHIDUL ISLAM	50 MONTH 10 TO 10	
Patient's Age	27Y 8M 12D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),C	CD(BIRDEM),PGT(Eye),DFM	CDC NO:C/O/9644
Sample	URINE	a consequence and explain response response and a second of the consequence of the conseq	

Result

## DRUG ABUSE TEST

METHOD: Immunochromatographic Assay (Rapid one Step Test)

2 20 2 1 111110	resurt
Drug Level of Urine	
Cocaine	Negative
Morphine	Negative
Marijuana	Negative
Barbiturates	Negative
Amphetamines	Negative
Phencyclidine	Negative
Alcohol	Negative
Benzodiazepines	Negative
Methadone	Negative
Propoxyphene	Negative
	Cocaine  Morphine  Marijuana  Barbiturates  Amphetamines  Phencyclidine  Alcohol  Benzodiazepines  Methadone

Checked By

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



radical\_hospitals@yahoo.com, www.radicalhospital.com

Bill No	DIA23090578	Received Date	13/09/2023
Patient's Name	RASHIDUL ISLAM		
Patient's Age	27Y 8M 12D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM		CDC NO:C/O/9644
Sample	URINE		Depote Green afficient exceptive values access being

#### URINE ROUTINE EXAMINATION

## PHYSICAL EXAMINATION

### MICROSCOPIC EXAMINATION

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

## CHEMICAL EXAMINATION

#### CASTS / LPF

Reaction	Acidic	RBC	Nil	
Albumin	Nil	WBC	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 B

Medical Technologist,

Dr. Sumaiya Khatun MBBS, MD (Microbiology) Assistant Professor

Dept. of Microbiology

East West Medical College and Hospital



radical\_hospitals@yahoo.com, www.radicalhospital.com

REF: MV. MSC ELSA-3

DATE: 13/09/2023

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

# EYE EXAMINATION REPORT

NAME: RASHIDUL ISLAM RANK: 3<sup>RD</sup> ENG CDC NO: C/O/9644

VISUAL ACUITY:

RIGHT

LEFT

UNAIDED

666

616

AIDED

COLOUR VISION:

NORMAL / BLIND

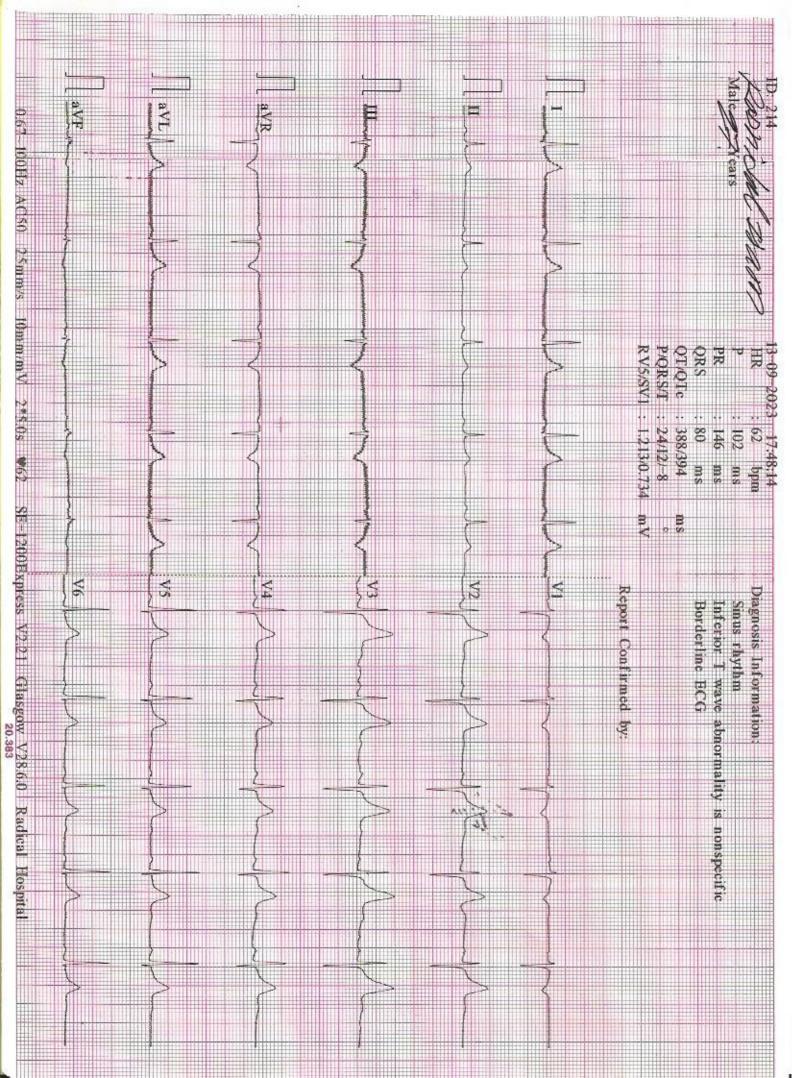
OPINION

UNFIT / FIT FOR EMPLOYMENT ON BOARD

Dr. Mir Md. Raihan MBBS, PGT (Ophthalmology)

Assistant Registrar (EX)

East west Medical College & Hospital





radical hospitals@yahoo.com, www.radicalhospital.com

# DEPARTMENT OF RADIOLOGY & IMAGING

ID. No. : 23090578 Receive:13/09/2023 Print: 13/09/2023

Patient's Name : RASHIDUL ISLAM

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 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

his is to	0314	ST CHOLERA 01/01/1994 Sex.	male.
tashi	has on the date indicated been va	accinated or revaccinated ag	gainst Cholera
Date	Signature and Professional status of vaccinator	Approved Stamp	
1888	BMDC A-55144, Millio BAPProve	Avenue Utara, Dhaka	
2 038	DRAHR, MD. RAIHA MBBS (DU), DFM, CCD (Birdem), PGT (Op BMDC A-55144, MMC-BGD-0 DG Shipping Bangladesh Approv General Physician Radical Hospitals Limited.	httl) (5 (35, Shah Makhdum ) 2	
3		3	4
4	mentaley ( = mod library and or		realth administration
5		5	6
6			
7		7	8
8			10