

# INTERNATIONAL LABOUR ORGANIZATION

Sectoral Activities Programme

See text links below.

ILO/WHO/D.2/1997

# Guidelines for Conducting Pre-sea and Periodic Medical Fitness Examinations for Seafarers

Part 6

Annex D

ARNIU

Minimum requirements for the medical examination of seafarers

Name (last, first, middle): LAKIM

Have you ever had any of the following conditions.

11111	11000		
Date of birth (day/month/year): 02	101/1995 Sex:	male	•    female
Home address: VILL+POS: DIGHALIA	P.S: SATURIA	DIST:	MANIKAANJ
Passport No./Discharge Book No.:	7731290		
Type of ship (container, tanker, passe	enger, fishing):		
Trade area (e.g., coastal, tropical, wo	orldwide):		
Examinee's personal declaration (Assistance should be offered by mea	lical staff)		

	Condition	Yes	No		Condition	Yes	No
1.	Eye/vision problem	□•	J/	18.	Sleep problems	□•	3
2.	High blood pressure			19.	Do you smoke?	E.	-
3.	Heart/vascular disease	□•	مع	20.	Operation/surgery	□•	1
4.	Heart surgery		1	21.	Epilepsy/seizures		<b>-</b>
5.	Varicose veins	Ξ•	J.	22.	Dizziness/fainting	□•	1
6.	Asthma/bronchitis	Seal	Losos	23.	Loss of consciousness	<b>-</b>	سعت
· (C	14.2023.4810	AS PAS PAS PAS PAS PAS PAS PAS PAS PAS P	#-MIC-2008				

7.	Blood disorder		X	24.	Psychiatric problems		X
8.	Diabetes			25.	Depression		4
9.	Thyroid problem		11	26.	Attempted suicide	П	. 1 1
10.	Digestive disorder		4	27.	Loss of memory		1
11.	Kidney problem		/	28.	Balance problem		
12.	Skin problem		~	29.	Severe headaches		1
13.	Allergies		4	30.	Ear/nose/throat problems		1
14.	Infectious/contagious diseases		-	31.	Restricted mobility	1.1	4
15.	Hernia		$\checkmark$	32.	Back problems		Μ,
16.	Genital disorders		<b>1</b>	33.	Amputation	П	M
17.	Pregnancy		MA	34.	Fractures/dislocations	11	<b>!</b>
If a	ny of the above questions were ansv	vered	l "ves", ple	ease	give details.		
7.55			J 1 F				
					F" .		

## Additional questions

4		Yes	No
35.	Have you ever been signed off as sick or repatriated from a ship?		1
36.	Have you ever been hospitalized?		3
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?		<u></u>
40.	Do you feel healthy and fit to perform the duties of your designated position/occupation?	7	T.
41.	Are you allergic to any medications?		

Comments:

## FRE FOR DUTY ON BOARD SHIP

42. Are you taking any non-prescription or prescription medications?

	, preuse			iis taken an			(s) and	dosage(s)	,	
I here	by certif	y that the	personal	declaratio	n above	is a tr	ue state	ement to the	ne best of my	knowledge.
		xaminee:		<b>1</b>				h/year):	2 2 SEP 2	
Witne	essed by:	(Signatu	re)	Jair		N	ame: (7	lyped or p	DR. MIR. MBBS (DU), DFM, CI BMDC A-5514	MD. RAIHA CD (Birdem), PGT (Ophil 4. MMC-BGD-01 angladesh Approve
I herel health exami	by author institutioner).	rize the re	elease of oublic aut	all my prev horities to	ious me Dr. <i>sm</i>	dical	records	from any	General Hotel Hote	al Physician ospitals Limited.
Signat	ure of ex	aminee:	<del>d</del>	<del>2</del>	Date	(day/	month/	year);	2 SEP 2023	4.54
		(Signatur	·e)	La	/	N	ame: <i>(T</i>		IBBS (DU), DFM, CCD BMDC A-55144. DG Shipp.ng Bang General P	ladesh Approved Physician
Medic	al exam	ination							Radical Hosp	itals Limited.
· P Sight	re-sea			Periodic			· 0	ther		9
			Visual	acuity						
	Unaid	led		Aided				Visua	al fields	
									ii ficids	
	Right eve	Left B	inocular	Right Let		ular	Right	Normal	Defective	
Distan	eye	Left B	inocular			ular	Right eye	Normal		
	eye	Left B	inocular	Right Let		ular		Normal		
Near	NS	Left Bi		Right Let			eye Left eye	_		
	vision:	Left Bi		Right Let			eye Left eye	_		
Near Colour	vision:	Left Bi		Right Let			eye Left eye	_		
Near Colour	eye  NS  vision:	Left Bieye	ested 🗆	Right Let	Doub	otful	eye Left eye Defe	ective	Defective	test (metres)
Near Colour Iearin	eye  NS  vision:	Left Bieye	ested 🗆	Right Lef cye eye	Doub	otful	eye Left eye Defe	ective	Defective	test (metres) Whisper
Near	eye  NS  vision:  g  Pur  500	Not te	ested $\Box$	Right Left cye eye  Normal metry (thres 3,000	Doub shold val	otful lues in 6,0	eye Left eye Defe	ective	Defective  and whisper  Normal	0.000000

Height: <u>162</u>	(cm)	V	Veight:	56	(kg)	
Pulse rate: 78	(/(minute)	1	Rhythm:	Legun		
Blood pressure:	Systolic:	120	(mm Hg)	Diastolie:	80	(mm Hg)
Urinalysis:	Glucose:	Nil		Protein:	281	
	Normal Ab	normal			Normal	Abnormal
Head	1		Varicose veins			
Sinuses, nose, throat	سلاا		Vascular (inc. p	pedal pulses)	+	13
Mouth/teeth	سل		Abdomen and		4	
Ears (general)	14		Hernia		4	1
Tympanic membrane	· H	7.85-	Anus (not recta	l exam.)	4	
Eyes			G-U system		سلا	1
Opthalmoscopy			Upper and lowe	er extremities	111	13
Pupils	14		Spine (C/S, T/S		-	1
Eye movement	/		Neurologic (ful		1	,
Lungs and chest	1		Psychiatric	. 011017	~	
Breast examination	NMA		General appear	ance	<u>_</u>	11
Heart			оснега арреаг	ance	- 7	1.7
Skin						
Chest X-ray;	☐ Not perform	ned	☐ Performed or	ı (day/month/y	ear): 22	SEP 2023
Results:	Monne	2	chest		1	
Other diagnostic test(	s) and result(s):				1	
Test <b>L</b>	Voal 4	rin	e Result	Norms	el.	
Medical examiner's	comments:				70. 2	
		EM FOR	DUTY ON BOARD	SHIP	18.10	*
Vaccinatio	on status record	ed:	Yes		□ No	
	Assess	ment of f	itness for servic	ce 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	
	room our mary	

 $\bullet \ \square$  Not fit for look-out duty

	Deck service	Engine service	Catering service	Other service	S
Fit	1	L)	LI	11	
Unfit	11		1.	D	
With	hout restrictions	With restrictions			
Describe res	strictions (e.g., specifi	c position, type of	ship, trade area)		
		-			
Action takes	n by medical examine				
Place of exa	mination: <u>Uttara, Dhala</u>	PITAL LIMITED  a. Bangladesh Date of	examination (day/i	nonth/year):	2 2 SEP 202
	tificate's date of expir		2	1 SEP 2025	
	np (also print name of medical examiner:	medical examiner	DG Shipp.n	R. MD. RAIH/ FM. CCD (Birdem), PGT (O 55144. MMC-BGD-0 g Bangladesh Appro neral Physician	116
Authorized	by: Da SULPP	ING BAN	Radica	al Hospitals Limited etent authority)	
		<b>4</b>			
	ABOUT SECTOR   SE	CTORS   MEETIN	GS   PUBLICATION	S   WHATS NE	<u>w</u>
分金					
				1 2	· · · · · ·
For further infat Tel: Fax: or	formation, please contact the email: sector(a)ilo.org	ne Sectoral Activities I	Department (SECTOR)		

This page was created by BR/PL. It was approved by BW/BKN. It was last updated Tues, 17 Jun 1999.

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### ISSUED ON BEHALF OF THE DEPARTMENT OF SHIPPING GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

Form No: SMC

I have read the contents of the certificate

and have been informed of the right to

review.

Seafarer's Signature



04.2023.4810

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

Name & Signature of the practitioner:

### SEAFARER MEDICAL CERTIFICATE

This certificate is issued in accordance with Bangladesh Merchant Shipping Ordinance, 1983 and Bangladesh Merchant Shipping Officers and Ratings Training, Certification, Recruitment, Work Hours and Watch keeping Rules, 2011 in compliance with the International Convention on Standards of Training Certificate and Watch keeping for Seafarers, 1978 as amended (STCW'78) and Regulation 1.2 of the Maritime Labour Convention, 2006

SEAFARER INFORMATION:	
Name: Last HBKIM First HBDUL Middle Middle	TO BE S. ASAS
Gender: (Male/Female). 1791ENationality BHNB1 (ADBM) Date:	2 2 SEP <b>2023</b>
Occupation: Deck/Engine/Catering/Other (specify) DESK Rank: OS	
Father's/ Husbad'sname: MUBHRAK HOSSEN C.D.C No. T/	31290
Mother's Name: PSUFFI BEGUIII Seaman ID No	60010436
Address: House No: Street/ Road No: Passport No.	00258809
Locality/Village: DIBHAMA NID No. 466	6148.2208
216 1321 -2	0 01 1005
0001101	-01-17/
many + a post	MM/YYYY)
District: / //////////////////////////////////	
DECLARATION OF THE RECOGNIZED MEDICAL PRACTITIONER:	
I am duly authorized by the Department of Shipping, Government of the People's Republic	of Bangladesh and confirm
the followings:	
<ol> <li>Confirmation that identification documents were checked at the point of examination</li> </ol>	:XES/NO
Hearing meets the standards in section A-I/9	:YES/NO
Unaided hearing satisfactory?	:VES/NO
4. Visual acuity meets standards in section A-I/9?	:YES/NO
<ol><li>Colour vision meets standards in section A-I/9?</li></ol>	:VES/NO
Date of last colour vision test	2.2 SEP 2023
6. Fit for lookout duties?	:YES/NO
7. Is the seafarer free from any medical condition likely to be aggravated by service at sea or	to
render the seafarer unfit for service or to render the health of any other persons on board?	:VES/NO
8. Any limitations or restrictions on fitness?	:YES/NO
If YES, specify limitations or restrictions:	16.7 14
Duties:	
Location/Vessel: RADICAL HOSPITAL LIMITED	
Medical/Other:	
Medical fitness category :	Unfit
10. Date of examination/leave (DD/MM/XXXX) 2.2 SEP 2023	(F) (10 (10 (10 (10 (10 (10 (10 (10 (10 (10
10. Date of examination/issue (DD/iviivi/1111)	
11. Date of expiry (DD/MM/YYYY). 21 SEP 2025 "No more than 2 years from the date	e of examination".
1	

### MEDICAL REQUIREMENTS

All applicants for an officer certificate, Seafarer's Identification and Record Book or certification of special qualifig:itions 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 24 months prior to the date of making application for an officer certificate, certification of special qualifications or a seafarer's book. The examination shall be conducted in accordance with the International Labor Organization World Health Organization, Guidelines for Conducting Pre-sea and Periodic Medical Fitness Examinations for Seafarers (ILO/WHO/D.211997). 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 requirements of the seafaring profession.

In conducting the examination, the certified physician should, where appropriate, examine the seafarers 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:

(a) Hearing:

 All applicants must have hearing unimpaired for normal sounds and be capable of hearing a whis pered voice in better ear at 15 feet (4.57m) and in poorer ear at 5 feet (1.52m).

(b) Eyesight:

- Deck officer applicants must have (either with or without glasses) at least 6/6 [20/20] (1.00) vision in one eye and at least 6/12 [20/40] (0.50) in the other. If the applicant wears glasses, he must have vision without glasses of at least 6/45 [20/150] (0.13) 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 6/9 [20/30] (0.67) vision in
  one eye and at least 6/15 [20/50] (0.40) in the other. If the applicant wears glasses, he must have vision without
  glasses of at least 6/60 [20/200] (0.10) in both eyes. Engineer and radio officer applicants must also be able to
  perceive the colors red, yellow and green.

(c) Dental:

• Seafarers 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.

(e) Voice:

 Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.

(f) Vaccinations:

 All applicants shall be vaccinated according to the requirements indicated in the WHO publication, Interna-tional Travel and Health, Vaccination Requirements. and Health Advice, and shall be given advice by the certified physician on immunizations. If new vaccinations are given, these shall be recorded.

(g) Diseases or Conditions:

 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 useofnarcotics.
 Applicants diagnosed with, suspected of, orexposed to any communicable disease transmit table by food shall be restricted from working with food or in food - related areas until symptom-free for at least 48 hours.

(h) Physical Requirements:

- 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.
- Applicants for fireman/watertender, oiler/motorman, pumpman, electrician, wiper, tankerman and survival craft/rescue boat crewman must meet the physical requirements for an enineer officer's certificate.

### IMPORTANT NOTE:

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 seafarers.

Medical examination reports shall be marked as and remain confidential with the applicant having the fight of a copy to his/her report. The medical examination report shall be used only for determining the fitness of the seafarer for work and enhancing health care.

#### DETAILS OF MEDICAL EXAMINATION:

(To be completed by examining physician; alternatively, the examining physician may attach a form similar or identical to the model provided in Appendix1):

1. Complete physical Examination.

2. Pathological Examination:

a.CBC b.ESR c.HBSAG d.LFT e.ECG f.RBS g.URINER/M/E 22 SFP 2023 DR. MIR. MD. RAIHAN
MB8S (DU), DFM, CCD (Birdem), PGT (Ophth)
BMDC A-55144, MMC-BGD-016
DG Shipp.ng Bangladesh Approved
General Physician
Radical Hospitals Limited





D.Date: 22-Sep-2023

Gender: Male

Id No : 0936

Patient's Name: ABDUL HAKIM

: Blood

Doctor Name : Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM),PGT(Eye),DFM-C/T/31290

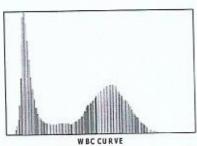
### Haematology Report

Date: 22-Sep-2023

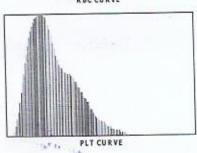
Age: 28Y 8M 20D

v Mythic-One Auto Haematology Analyzer & checked manually)

Parameter Name	Results	Reference Range
Hemoglobin (Hb)	14.6 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)	<b>05</b> mm/1st hr	Adult: 4000 - 11000/cumm.
Total WBC Count(TC)	6,800 /cumm	Children: 5,000-15,000/cumm Infant(One Year): 6,000-18,000/cumm
Differential WBC Count (DC)		
Neutrophils	63 %	Child: 25-66 %, Adult: 40-75 %
Lymphocytes	33 %	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	136 /cumm	50-450/cumm
Total RBC Count	5.01 m/ul	M: 4.5-6.5, F:3.8-5.8 m/ul
HCT/PCV	39.3 %	M: 40-54%, F:37-47%
MCV	78.4 fL	76 - 94 fL
MCH	<b>29.1</b> pg	27 - 32 pg
MCHC	37.2 g/dL	29 - 34 g/dL
RDW	12.4 %	11 - 16 %
PDW	13.9 fL	35 - 56 fl
Total Platelete Count (PC)	2,10,000 /cumm	150,000-450,000/cumm
MPV	8.7 fL	7.0 - 11.0 fL
PCT	0.183 %	0.1 - 0.%
Bledding Time(BT)	%	10 - 18 %
Cloting Time(CT)	%	0.1- 0.2 %



RBC CURVE



Medical Technologist

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



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

Bill No	DIA23090936	Received Date	22/09/2023
Patient's Name	ABDUL HAKIM		
Patient's Age	28Y 8M 20D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),C	CD(BIRDEM),PGT(Eye),DFM	CDC NO:T/31290
Sample	BLOOD		

### SEROLOGYCAL REPORT

Test Name

Result

HIV 1 & 2 (Method : (ICT) Negative

RADICAL

Checked By

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





Bill No	DIA23090936	Received Date	22/09/2023
Patient's Name	ABDUL HAKIM		
Patient's Age	28Y 8M 20D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRD	EM),PGT(Eye),DFM	CDC NO:T/31290
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	

Marijuana	Negative
Barbiturates	Negative
Amphetamines	Negative
Phencyclidine	Negative
Alcohol	Negative
Benzodiazepines	Negative
Methadone	Negative
Propoxyphene	Negative

Checked By

Medical Technologis

Dr. Sumalya Khatun MBBS, MD (Microbiology) Associate Professor Dept. of Microbiology



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

Patient's Name	1:	ABDUL HAKIM		
Age	:	28 Yrs	Date	: 22/09/2023
Sex	:	: Male : 22 : Dr. Mir Md. Raihan - MBBS, (DU), DFM		
Referred by	:			NO:1/31290

# Psychometric Test

Test Name	Remarks
1.APTITUDE TEST	
Numerical Reasoning test	Poor /Good /very good /excellent
Verbal Reasoning test	Poor /Goed /very good /excellent
Inductive reasoning test	Poor /Good /very good /excellent
Diagrammatic Reasoning test	Poor /Good /very good /excellent
Logical Reasoning test.	Poor /Good /very good /excellent
Error checking test	Poor /Good /yery good /excellent
2.Skill Test	Poor /Good /very good /excellent
3.Personality Test	INFJ / ENFJ / ISFJ / ENTP/ ESFJ /ESFF
4. Watson Glaser test(Critical Thinking Test)	
Arguments	Poor /Good /very good /excellent
Assumptions	Poor /Good /very good /excellent
Deductions	Poor /Good /very good /excellent
Interpreting Information's	Poor /Good /very good /excellent
Inferences	Poor /Good /very good /excellent
	1
5.Situational Judgment Test.	Poor /Good /very good /excellent

Poor: <6

600d: 6-7

very good: 7-8

excellent: 8-10

COMMENTS: HE IS MENTALLY FIT FOR SHIP JOB

Dr. Mir Md. Raihan

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

Radical Hospitals Limited

# INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST CHOLERA

AGAINST CHOLERA
CERTIFICATE INTERNATIONAL DE VACCINATION OU DE REVACCINATION
CONTRE LA CHOLERA

	gne (e) certifie que	O2 O7	1998 M
whose si	gnature follows )	Date of Birth	sex Sexe
V dis	gnature suit. has on the date indical a etc. vaccination (e	ed been vaccinated or rev contre la fiever jaune la c	accinated against Cholera
Date	Signature and Professional Status of vaccinator Signature et qualitc Prof. essionalle du vaccinateur	Appr	oved Stamp authentification
MBBS (C	Md. Ariful Islam  ac) BCS (Health), FCPS (MEDICINE)-II, CCD  BMDC Reg. No. 62563  DG Shipping Approved (BD)  s Medical Offices, Charlegong, Bongladean	FOR VACCULAR ATTENT OF THE PROPERTY OF THE PRO	DRAL CHOLERA "DUKORAL" Valid Upto 2 Yrs
<b>3</b> 2		Estata, Chitagong	
1007	man.		
3 MBBS	CMC) BCS (Health), FCPS (MEDICINE)-II, CCD BMDC Reg. No. 82563 DG Shipping Approved (BD)	COR VACCO	ORAL CHOLERA "DUKORAL" 4 Valid Upto 2 Yrs
Tig .	MD. RAIHAN	Estata, Crittagong	
125E	MBSS (DU) DFM. CCD (Birdem), PGT (Ophth BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approve General Physician Radical Hospitals Limited.	3	ORAL CHOLERA "DUKORÂL" Valid Upto 2 yrs
6	Radical Hospitals Edition	* BANGLADEST	
		WAR THE REAL PROPERTY.	

8

# INTERNATIONAL CERTIFICATE OF VACCINATION OR REVACCINATION AGAINST YELLOW-FEVER

CERTIFICATE INTERNATIONAL DE VACCINATION OU DE REVACCINATION
CONTRE LA FIEVER JANUE

This is to Certifie that	02.01.19 Date of Birth	95	M
whose signature follows dont la signature suit.	e (e) le	Sexe	
has on the date indice a etc. vaccination (e)	ated been vaccinated or rev on contre la fiever jaune la	accinated against a date indique.	Yellow-Fever
Date Signature and Professional Status of vaccinator Signature el qualite Prof. essioundlle du Caccinateur	Origin and batch no, of vaccine origine du vaccin Employe et u merco du lot	Official state vaccination cachet Office Center de vaccination cachet Office Center de vaccination de vaccinati	centre.
MBBS (CMC) BCS (Health), FCPS (MEDICINE)-II, CCD BMDC Reg. No. 62563 DG Shipping Approved (BD) Seafarer's Medical Offices, Children, Contended	L NO DAKAR TO DAKAR T	(5) Hales	2  VACC Arifur la serie de la consultation de la co
2 2990 Oc Sixport Action 15 15 150 Action 15 15 15 15 150 Action 15 15 15 150 Action 15 15 15 15 15 15 15 15 15 15 15 15 15		3	4

This certificate is valid on only if the vaccine used his been approved by the World Health Organization and if the vaccinating centre has been designated by 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 or failure to complete any part of it, may render it invalid.

Ce certificate n est valadble que si jevaccine employe a etc, approve part organisation mondiate de la sant.

Et sit c de vaccination a etc habilite part administration du territorie de s lequel ce centre est situe.

Le validity de ce certificate conure une periode de six ans ommencent dix Jours apres la date de la vaccination ou da s le casd une revaccination on cours de cettee periode de dix aus. e Jour de cette; revaccination.

Toute correction ou rature sur le certificate au omission d'un quelonque desmentions nd il comporte peul affector su validite.

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

	THE DE	PUBLIC OF LIBERIA	ANNEX 2
LAST NAME OF APPLICANT		FIRST NAME OF COLUMN	MIDDLE
PATE AS STORY	HAKIM	ABDUC	INITIAL
DATE OF BIRTH	1905	PLACE OF BIRTH	SEX
MONTH DAY	YEAR	CITY	BANGLA MALE FEMALE
EXAMINATION FOR DUTY AS	TA CONTRACTOR OF THE CONTRACTO	MAILING ADDRESS OF APPLICANT	4
MASTER MATE	RATING	WILL: POST: DI	57 HALIH
ENGINEER	MOU DECK MOU ENGINE	= P.S: SATORI	7
RADIO OFF	SUPERNUMERARY		/
MEDICAL EVANDATE	TON YORK BY OR AVERAGE BY	DIST: MANIK	
HEIGHT WEIGHT	ION (SEE PAGE 2) STATE DE BLOOD PRESSURE   PULSE		CENEDAL ADDEAD ANCE
162×1 56KA	-120 Rom 780	respiration.	GENERAL APPEARANCE
VISION:	RIGHT EYE LEFT EYE	,	
WITHOUT GLASSES WITH GLASSES	616 606	-	
DATEOFLASTCOLORVISIO	NTEST(Month/Day/Year) 22 SEP	2023 Testing Required every 6 years	
	DARDS INSTEWCODE, TABLE A-I		· · · · · · · · · · · · · · · · · · ·
COLOR TEST TYPE: BOOK "	LANTERN " CHECK IF COLOR TES	T IS NORMAL YELLOW RED	GREEN BLUE
HEARING:	20		
RT. EAR_	MA	LEFT EAR	VIII
HEAD AND NECK	Vonna/	HEART (CARDIOVASCULAR)	Nonmal
LUNGS	dustan	SPEECH (DECK/NAVIGATIONA	L OFFICER AND RADIO OFFICER)
1	Vonnal		ORMAL VOICE COMMUNICATION
EXTREMITIES:	1010111		
UPPER	Normal	LOWER_	OMNINE_
IS APPLICANT SUFFERING FI	ROM ANY DISEASE LIKELY TO BE	AGGRAVATED BY, OR TO RENDER HIM UN	FIT FOR SERVICE AT SEA OR LIKELY
TO GROWING ENGINEERS IN	OF OTHER PERSONS ON BOARD;	IF YES, EXPLAIN IN DETAILS OF MEDICAL	EXAMINATION ON PAGE 2.
		2 2 SEP 2023	21 000 2000
SIGNATURE OF AP	DI KANT		2 1 SEP 2025
		DATE OF EXAM	EXPIRY DATE
7:	HIS SIGNATURE SHOULD BE AFFI	XED IN THE PRESENCE OF THE EXAMINING	0.00
THIS IS TO CHRIFY THAT A	PHYSICAL EXAMINATION WAS G		HBDUL
	FIT FOR DUTY ON	BOARD SHIP	ANT)
(ME) (SHE) IS FOUND TO BE (	P(I) (NOT FIT) FOR DUTY AS A: (M	ASTER MATE ENGINEER RADIO OFFICER	, RATING, MOU DECK, MOU ENGINE or
		R (HE) (SHE) IS FOUND TO BE (FIF) (NOT FT	FOR LOOKOUT DUTIES?
NAME AND DEGREE O	F PHYSICIAN DR. MIR MD.	RAIHAN MBBS,(DU), DFM	
ADDRESS RADICAL H	OSPITALS LIMITED. 35, S	HAH MAKHDUM AVENUE, SECT	OR-12, UTTARA, DHAKA-1230
NAME OF PHYSICIAN'S	CERTIFICATING AUTHORI	TY DG SHIPPING BANGLADESH	MAINT I
DATE OF ISSUE OF PHY	SICIAN'S CERTIFICATE 06	MAY 2014	
SIGNATURE OF PHYSIC	Minne		EXAMINATION: 22 SEP 2023
This certificate is issued	by authority of the Deputy Cor	mmissioner of Maritime Affairs, R.L. a	nd in compliance with the
		tion, 2006 for the Medical Examination two (2) years from the date of the Exa	
years of age a	and for no more than one (1) year	ir for those under 18 years of age.	and the diese over 10
RLM-105M (REV. 12/17)	DR. MIR. MD. RAIH	IAN 1	Spire Spire
	MBBS (DU), DFM, CCD (Birdem), PGT ( BMDC A-55144, MMC-BGD-	Ophth)	TEI
	DG Shipping Bangladesh Appr General Physician	oved 8	C2008) - A-1230
	Radical Hospitals Limited.	118	- A-1230

### 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:

- 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.
- 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 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.
- An applicant's blood pressure must fall within an average range, taking age into consideration. (d)
- 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.
- Deck/Navigational officer applicants and Radio officer applicants must have speech which is unimpaired for normal voice communication.
- (g) Applicants for able seafarer deck, 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, able seafarer engine 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)

Completed Physical Examination

02. Pathological Test

Radiological Test

Ophthalmology Examination For VA & CV

22 SEP 2023

MBBS (DU), DPM, CCD (Birdem), PGT (Ophth) BMDC A-55144, MMC-BGD-016 DG Shipping Bangladesh Approved General Physician

Radical Hospitals Limited

RLM-I05M (REV. 12/17)

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



Bill No	DIA23090936	Received Date	22/09/2023
Patient's Name	ABDUL HAKIM	Trocerved Bate	22/03/2023
28Y 8M 20D	28Y 8M 20D	Patient's Sex	Male
Ref. by	Dr. Mir Md. Raihan MBBS,(DU),CCD(BIRDEM	I),PGT(Eve),DFM	CDC NO:T/31290
Sample	URINE	,, -, (-, -), -,	000 110.1701230

### 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 By

Medical echnologist,

Dr. Sumalis a Khatun MBBS, MD (Microbiology) Assistant Professor Dept. of Microbiology

East West Medical College and Hospital

35, Shah Makhdum Avenue, Sector-12, Uttara, Dhaka, Phone: +880255087281-2, Mobile: 01955567000-3