

HAQUE & SONS LTD.



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Hacue Tower 1267/A. Goshaildanga, Agrabad C/A, Chattogram, Bangladesh. Tet: +880 31 716214-6, Fex: +880 31 710530 Accreditéd By ... SMDC Accreditation No. A*67*3

PATIENT CONTROL YUMBER

MEDICAL EXAMINATION CERTIFICATE

ATIONALITY: BANGLADESH! SEX: Male Female VESSELTIFE: S0NTACT NUMBER: 8801781526417 (SERMANENT HOME ADDRESS: L. SOUTH MANDARI, PO. MANDARI, 3703, PS. LAKSHMIPUR SADAR, DIST. RANK: OS KSHMIPUR, BANGLADESH. Have you ever had any of the following conditions?		E	FIRST NA	ME	- "		MIDDLE NAME			
ACE AND DATE OF INTH ACSTAND PAIL OF INTH ACHASHMIPUR 22-Oct-2000 AC1782306 AC17823		SAGOR					SEAMANIS BO	OK NUMBER	-	
Male Female VESSEL TYPE CHEM TANKER TRADING AREA WORLD VESRMANENT HOME ADDRESS SAre properties Several Properties S			PASSPOR				SEAWAIN DO			
RIMANENT HOME ADDRESS: SOUTH MANDARI, PO. MANDARI-3703, PS. LAKSHMIPUR SADAR, DIST. SHMIPUR, BANGLADESH. Have you ever had any of the following conditions? Condition YES NO Eye/vision problem Eye/vision problem High blood pressure High blood pressure Heart surgery Heart surgery Heart surgery Heart surgery Home blood pressure Asthma/bronchitis Blood disorder Blood disorder Dizariess/fainting Thyroid problem Digestive disorder Skin problem		, , , , , , , , , , , , , , , , , , ,	/ Male		e VESSEL T	YPE : CHE	M. TANKER TRA	ADING AREA		RLD WID
SOUTH MANDARI, P.O. MANDARI-3703, P.S. LAKSHMIPUR SADAR, DIST. Have you ever had any of the following conditions? Condition	TIONA		V IVIAIC		<u> </u>	CONTA	CT NUMBER :	88017815	26417	(SELF)
Have you ever had any of the following conditions? Condition	SOL	TH MANDARI, PO. MANDARI-370	, PS. LAKS	HMIPURS	SADAR, DIST.	RANK :			os	
Condition Eye/vision problem	SHMIF	PUR, BANGLADESH.							-	
Condition Eye/vision problem High blood pressure Heart/vascular disease Heart surgery Varicose veins Asthma/bronchitis Blood disorder Blood disorder Diabetes Thyroid problem Diabetes Depression Attempted suicide Depression Attempted suicide Depression Diabetes Depression Attempted suicide Depression Diabetes Depression Attempted suicide Depression Diabetes Depression Diabetes Depression Diabetes Depression Diabetes Depression Attempted suicide Depression Diabetes Depression Depressio			ditions?							
Condition Eye/vision problem	Have y	ou ever had any of the following con-	altions:						VEC	NO
1 Eye/vision problem 2 High blood pressure 3 Heart/vascular disease 4 Heart surgery 5 Varicose veins 6 Asthma/bronchitis 7 Blood disorder 8 Diabetes 9 Thyroid problem 10 Digestive disorder 10 Digestive disorder 11 Kidney problem 12 Skin problem 13 Allergies 14 Infectious/contagious diseases 14 Infectious/contagious diseases 15 Hernia 16 Genital disorders 17 Pregnancy 18 Genital disorders 19 Thyroid the above questions were answered a vest obtained. Additional questions 2 Have you over been is six ed obassich or repatriated from a ship? 3 Have you over been six ed obassich or tepatriated from a ship? 3 Have you over been is six ed obassich or tepatriated from a ship? 3 Have you over been lostificate ever been restricted or revoked? 4 Are you aver been in spiritalised? 5 Are you aver been feating and fit to perform the duties of your designated position/occupation? 4 Are you allergic to any medications? Fit For Duty On Beard Ship		Condition								S
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Heart/vascular disease	2	High blood pressure	Si=20		100-30 200 DOMESTO SE					
Heart surgery Varicose veins Asthma/bronchitis Blood disorder Diabetes Thyroid problem Digestive disorder Skin problem Skin problem Skin problem Digestive disorder D			. 100			T				8
Asthma/bronchitis										D /
Asthma/bronchitis				D /					A	
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Blobdetes 25 Depression 3					24 Psychi	iatric proble	ms	0	9	E
p Thyroid problem					25 Depre	ssion	_	IVI		120
10 Digestive disorder					•		751		A	
10 Digestive disbrider 11 Kidney problem				~	- ALVIER ALVIERS COLOUR			ハラ	V	_ GV
Skin problem							911	111		0
Allergies 30	11		U.S.	~				110		3
14 Infectious/contagious diseases	12									
14 Infectious/contagious diseases	13				30	Securiosi	The state of the s			D/
15 Hernia 16 Genital disorders 17 Pregnancy 18 Amputation 19 Amputation 29 Amputation 20 Amputation 21 Amputation 22 Amputation 23 Fracture / dislocations YES Note 25 Amputation 26 Are you ever been signed of assistic or repatriated from a ship? 26 Are you ever been hospitalised? 27 Here you ever been declared unfit for sea duty? 28 Are you ware that you have any medical problems, diseases or illnesses? 29 Are you ware that you have any medical problems, diseases or illnesses? 20 Do you feet healthy and fit to perform the duties of your designated position/occupation? 28 Are you allergic to any medications? 29 Tit For Duty On Beard Ship	14	Infectious/contagious diseases								N/
Genital disorders 17 Pregnancy 34 Fricture / dislocations any of the above questions were answered "yes", please give detail. 35 Have you over been sixtled offastsick or repatriated from a ship? 36 Have you ever been hospitalised? 37 Have you ever been detated until for sea duty? 38 Has you medical certificate ever been restricted or revoked? 39 Are you aware may you have any medical problems, diseases or illnesses? 40 Do you feel fleaithy and fit to perform the duties of your designated position/occupation? The you allergic to any medications? Fit For Duty On Beard Ship	15	Hernia					_			8
Pregnancy Tany of the above questions were answered "yes". Nease give details. Additional questions YES Have you over been six sed or as sick or repatriated from a ship? Have you ever been hospitalised? Have you ever been declared until for sea duty? Has your medical certificate ever been restricted or revoked? Are you aware may you have any medical problems, diseases or illnesses? Do your feat healthy and fit to perform the duties of your designated position/occupation? Fit For Duty On Beard Ship	16	Genital disorders		The same	83 Ampul	tation				~
Fany of the above questions were answered "yes", please give details. Additional questions The veryou ever been stillined or assistict or repatriated from a ship? Have you ever been hospitalised? Have you ever been declared until for sea duty? Has your medical certificate ever been restricted or revoked? Fas your wave may you have any medical problems, diseases or illnesses? Do you feel healthy and fit to perform the duties of your designated position/occupation? The your allergic to any medications? Fit For Duty On Beard Ship	17	Pregnancy N.A	2	Ich	34 Fractu	res/dislocat	ions			
41 Are you allergic to any medications? Comments: Fit For Duty On Beard Ship	36 37 38	Have you ever been hospitalised? Have you ever been declared unit Has your medical certificate ever leave you have any	t for sea duty been restricte	/? ed or revok lems, disea	ed? ases or illnesses	? osition/occ	upation?			do e a a a
Fit For Duty On Beard Ship	41	Are you allergic to any medication	s?							
	'omme	ents:	Fit For D	net On	Board Shir					
42 Are you taking any non-prescription or prescription medications?	JOI III		רוו רטו ט		Deard Olif	•				
42 Are you turning any non-process	3011111								П	T
If yes, please list the medications taken and the purpose(s) and dosage(s)	42	Are you taking any non-prescription	n or prescrip	tion medic	ations?					ď
	42	Are you taking any non-prescription	on or prescrip	tion medic e(s) and do	ations? osage(s)					ď
	42	Are you taking any non-prescription of the properties of the medications taken and the properties of t	on or prescrip	e(s) and do	ations? osage(s)					ď

Hearing meets the standards as laid down in STCW Code Section A-1/9?

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		sual acuity				Visual f	fields
Right ey		Rig	Aide ght eye	ed Left eye		Normal	Defective
Distant 6/6 Near N 5	- NS				Right eye Left eye	~	
Visual acuity meets the s Colour vision as per STC	standard laid dow CW CODE Section	vn in STCV on A-I/9:			VES / NO Doubtful	□ Defective	
Date of last colour vision			_			□ Delective	
		Normal	Abnorma				rmal Abnormal
Head Sinuses nose throat				Varicose vein	107		
Sinuses, nose, throat		A.			c. pedal pulses)		
Mouth/teeth		A		Abdomen and		7	
Ears (general)		A		Hernia	Million Theorem and the second	_	
Tympanic membrane		\square		Anus (not rect	tal avam)	7	
Eyes		S		G-U system	.di GAGIII)	r	
Opthalmoscopy		13		3.70	wer extremities		
Pupils		D.				-	S
Eye movement		S S		Spine (C/S, T/s			
		2		Neurologic (ful	III brief)	E	Y O
Lungs and chest		_ 		Psychiatric		P	2 (\ D
	1-A			General appea	arance		√ \ \□
Heart		5		Skin	M. Table Security	- IN	X I DO
						31/11	2/1/2
RESULTS OF ANCILLARY E	XAMINATIONS					HH	\sim
Chest X-Ray			MICAL (LI)	VER FUNCTION TE	Tennis III	1 1	
ECG FCG		LIRUBIN				LI POSIUV	ve Negative
BLOOD R/E				0.85	Algohol Test	↑ Positiv	ve 🗗 Negative
		GPT		27-0	URINER/E	NA	
DC(differential count)	NAD SG	GOT		DIN	TV	OTHERS	
HAEMOGLOBIN (HGB))	4.5	DRI	UG AND A	ALCOHOL TEST	HBsAg		iv Monreactive
ESR (WESTERGREN)		orphine 🥕	1 1	Positive D Negativ	HIV / AIDS T		Nonreactive
WBC 9	4 00 Am	nphetamine	ie Civi	Positive Y Negative	ve VDRL		Nonreactive
BLOOD GLUCOSE	LEVEL The	ercyclidine	A I D	Rostive M Negative	ve Blood Type		B-PVE
		rbit ate		Positive M Negative		100	
		chine					RMAL
IIIDATO	J. CAL	Amo	<u></u>	Positive Megative	ve Others(KUB UIt	rasound)	(AK)
ereby I declare that I am in king	lowledge of the co	ntants of	the Physic	-1 minations			
sieby russian	Medica	niemo .	the mayare.	al examinations.		2.2.4	
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gnature of Seafarec	1 -		THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAME	SAWON SAGOR Name of Seafarer		440	The state of the s
Jidane Di Coaidi.	<u></u>		14.	ame of Seatalei			Date
sessment of fitness for serv							
the basis of the examinee's p		tion my cl	linical exar	ination and the dir	toot regults	and should 1	Ale A
aminee medically:	701001.3.	1011, 1.1.y	illear on	illiation and the sic.	gnostic test results	recorded above, 10	declare the
	Fit for loo	ookout dutie	es		Not fit for	lookout duties	
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-	■ Ø				Catering ser	VICE	Dirier services
fit	ď						
Without rest							
Without rest	rictions			With restrictions			
ne Seafarer free from any med langer the health of other pers	dical conditions life	kely to be	aggravate	d by service at sea	or to render the se	afarer unfit for such	n service or to
	E	Yes	No 🗆			•	
scribe restrictions (e.g., specific	c position, type o	of ship, trad	de area):	No Rest	trictions		
ion taken by medical examiner	r (e.g., referral):		ALLEY .				
2200	17 000L				OT 20	<u> </u>	
Fitness Date:	1 ZUZ4			Valid Until: 2	106120	20	
			eman.		sh Chakrabo	·rtv	
			114	MBBS (CU), DM	VIU (SUB), CCD (Bird	dem)	
	,	Name and	1 Signature	of COCO CHI	Red Foundation	on)	

	MEDICAL	RTIFICATE	RSONNEL SERVICE	ON BOAKD
			i	
SURNAME: SAGO	R	• (,	ME (S): SAWON	
DATE OF BIRTH:		170	HRTH	SEX
DAY 22	MONTH 10 YEAR	2000	AKSHMIPUR COUNTRY	BANGLADESH MALE T FEMALE
POSITION ON BOAL	200.00-00.000	.v	ADDRESS OF APPLICAN	T:
MASTER		VIL.	UTH MANDARI, PO. MAN	DARI-3703,
DECK OFFICER	. 🗆	PS.	HMIPUR SADAR, DIST. L	AKSHMIPUR, BANGLADESH.
ENGINEERING OFF	ICER			
RADIO OPERATOR		BA*	ESH.	
RATING				
DECLARATION OF	THE AUTHORIZED PHYS	'AN	201 00 7507 7705	HEARING
	VISION	1	COLOR TEST TYPE	HEARING
	WITHOUT GLASSES	WITH GLASSE	ВООК	
RIGHT EYE	66		LANTERN	RIGHT EAR _ NORMAL_
			LOW NAD RED NAD	
LEFT EYE	66		LEN NAD BLUE NA	RIGHT EAR _ NORMAL_
Confirmation that ide	etification documents were	necked at the pol	mination: YES 🗹 NO	
Hearing meets the st	andards in STCW Code,	tion A-1/9? YE.	NO NOT APLICAB	LE 🔲
Unaided hearing satis	sfactory? YES YO			
Visual acuity meets s	tandards in STCW Code, S	Section A-1/9? YES	✓ NO □	
	standards in STCW Code.		NO \square	
Date of the last colou	quired every six years) r vision test: (De Month - tt lenses necess my to m		2024 . 	
Able for watchkeeping		o required to		
		vion modicutions	□ NO 🖭	
	y non-prescription or prescription any medical condition is			seafarers unfit for such service or to
endanger the health o	f other persons on boats	VS □ NO		
Hereby I declare that	Lam in knowledge of the	tents of the Physic	ination.	
Bun	€V	SAWON 5		2 2 OCT 2024
Signature of	Applicant	Name of Ap-		Date
CIRCLE APPROPIA	ATE CHOICE: HE / C	S FOUND TO NR / RATING) (T / NOT FIT) FOR DUTY	AS A (MASTER / DECK OFFCIER / DLLOWING) RESTRICTIONS:
				Restrictions
	it For Duty On Bea			Birdem), CCCD (Heart Foundation)
	OF PHYSICIAN: Dr. Far			ate, Agrabad C/A, Chattogram.
	tholozy, 162, 3K, Muji		MEDICAL AND DENTAL	
NAME OF PHYSICIA	S CERTIFICATING AL	RITY: <u>B</u> - <u>VG</u> E.	VEDICAL AND DENTAL	. COUNCIL (B.M.D.C.)
DATE OF ISSUE PHY	YSICIAN'S CERT FICAT	FC- <u>C5-19</u> 86		
SIGNATURE OF PHY	SICIAN:	-) - - - - - - - - - - - - - - - - - -	Dr. Paritosh Chak MBBS (CU), DMU (SUB), CO COSICIEN (Heart Four BMDC REG No.	ndation) DATE: ZZUUIZ
EXPIRY DATE OF C	RTIFICATE: 210	CT 2026	Seafarers Medical Pr Approved by D.G. Shipp ance with the requirement	and Duake
	of the S. CW Co	n. 1978	he Maritime Labour Con	nvention, 2006.

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