


DR. M. AYUBUR RAHMAN M.B.B.S (Reg. No: A-11820)
 Authorized Medical Practitioner for seafarer by Department of Shipping, Govt. of Bangladesh

Saba Diagnostic Centre
 Taher Chamber (Ground Floor), 10 Agrabad Commercial Area, Chittagong, Bangladesh.
 Tel: 0088-031-715678, E-mail: sdc-ctg@yahoo.com, www.drayubur.com


SEAFARER'S MEDICAL EXAMINATION CERTIFICATE

Issued in Compliance with the Maritime Labour Convention 2006

FAMILY NAME: MAWLA	FIRST NAME: MOHMMOD	MIDDLE NAME: GOLAM	
Gender: Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Date of Birth: (day/month/year) 06/06/1980		
Civil Status: Single <input type="checkbox"/> Married <input checked="" type="checkbox"/>	Nationality: BANGLADESHI		
Address: 1029, SUFIA MANJIL, ZAKIR HOSSAIN ROAD, EAST NASIRABAD, CHITTAGONG			
Passport: BP0719030	Seamen Book: C/O/4154		
Rank applied for: CHIEF OFFICER	Company: SEASPAN SHIP MANAGEMENT LTD.		
Fit to perform duties at sea: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> If NO, please specify below:			
Any restriction(s): NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> If YES, please specify below:			

Satisfactory Hearing <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	Satisfactory Sight: Unaided: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Aided: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Colour Vision- Defective: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fit For Look-Out Duties: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Visual Aids: (if worn) Glasses Contact Lenses

Official Stamp 	Hearing is satisfactory/meets the standards in STCW Code Section A-1/9	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Visual acuity is satisfactory/meets the standards in STCW Code Section A-1/9	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Color vision is satisfactory/meets the standards in STCW Code Section A-1/9	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	The seafarer concerned is not suffering from any medical condition 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.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Name and Signature of Examining/Authorized Physician Date of examination: 01 FEB 2021 Approved by: DR. M. AYUBUR RAHMAN Medical Director: M.B.B.S, P.G.T (Medicine) SABA DIAGNOSTIC CENTRE TAHER CHAMBER 10 AGRABAD C/A, CHITTAGONG BD&C AND LOG SHIPPING GOVT. OF BD 23-02-1984	

I hereby authorize the release of all my medical records to the manning agent, my employer, Seaspanship Management Ltd., and the undersigned medical practitioners.
 I have read and understood the contents of my PEME Certificate.

Seafarer's Signature: Golam Mawla

Fit For Duty on Board Ship

Date of Issuance of PEME Certificate: (day/month/year): **01 FEB 2021**

Date of Expiration of PEME Certificate: (day/month/year): **31 JAN 2023**

VALID FOR TWO YEARS In Accordance with Medical Examination (Seafarers) Convention 1946 (ILO No.73 and WHO), STCW 1978/1995 as amended

This certificate does not cover diseases that would require special procedures and examinations for their detection such as bronchiectasis that requires bronchography, peptic ulcer/gall bladder diseases that require Chole GI Series/ultrasound, certain kidney problems that require IVP/ultrasound, diseases that are asymptomatic at the time of examination (including pregnancy and psychological conditions) and any pre-existing illnesses.