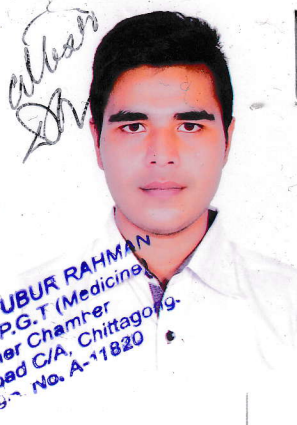


Saba Diagnostic Centre
 Taher Chamber (Ground Floor), 10 Agrabad Commercial Area, Chittagong, Bangladesh.
 Tel: 0088-031-715678, E-mail: sdc-ctg@yahoo.com, www.dr.ayubur.com

SEAFARER'S MEDICAL EXAMINATION CERTIFICATE

Issued in Compliance with the Maritime Labour Convention 2006

FAMILY NAME: DEBNATH	FIRST NAME: PRITHWIRAJ	MIDDLE NAME:
Gender: Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Date of Birth: (day/month/year): 31-12-1994	
Civil Status: Single <input checked="" type="checkbox"/> Married <input type="checkbox"/>	Nationality: BANGLADESHI	
Address: VILL: EAST ANANTAPUR, PO: PARSHURAM, PS: PARSHURAM, FENI, DIST.: CHATTOGRAM, BANGLADESH.		
Passport: EG0685445	Seamen Book: C/O/9311	
Rank applied for: FOURTH ENGINEER	Company: M/S SEASPAN SHIP MANAGEMENT INDIA PVT LTD.	



Fit to perform duties at sea: YES NO If NO, please specify below:

Any restriction(s): NO YES If YES, please specify below:

Satisfactory Hearing <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Date of Test: 10 JUN 2023	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 Date of Test: 10 JUN 2023	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: 10 JUN 2023	
	Approved by: DR. M. AYUBUR RAHMAN M.B.B.S; P.G.T (Medicine) SABA DIAGNOSTIC CENTRE TAHER CHAMBER 10, AGRABAD C/A, CHITTAGONG. BMDG AND DG SHIPPING GOVT. OF BD 2302-1984	

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:

Fit For Duty on Board Ship

Date of Issuance of PEME Certificate: (day/month/year) **10 JUN 2023**

Date of Expiration of PEME Certificate: (day/month/year) **09 JUN 2025**

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.

07-2023-0699