

DR. M. AYUBUR RAHMAN
Saba Diagnostic Centre
Taher Chamber (Ground Floor), (To the west of James Finlay Office)
10, Agrabad Commercial Area, CTG. TEL: 031-715678, Mobile: 01727690222

Seafarar's pre & post employment healthcare medical examination done in accordance with regulation 1.9 of the STCW convention 1995 & convention C73 (under ILO convention adapted on 29/06/1983)

Medical Officer**JF (BANGLADESH) LIMITED****Name of the company : JF (BANGLADESH) LTD. Name of ship: MV "AL MESSILAH" Rank: DK/U/H****Name of the candidate: MD. NUR UDDIN. P.port/C.D.C No: T/33420 Sex: MALE****D/B: 13/10/1989 Married / Unmarried: Height: 5'6" Weight: 74KG****Identification mark: NIL.****MEDICAL HISTORY**

Have you ever had or do now have any of the following (strike off whichever not applicable).

a) Frequent headache/ Fainting	Yes/No ✓	n) Parasitic infestation of G.I system	Yes/No ✓
b) Colour blindness/ Loss of vision	Yes/No ✓	o) Varicose venis	Yes/No ✓
c) High/ Low blood Pressure	Yes/No ✓	p) Venereal disease	Yes/No ✓
d) Chest pain/Angina pectoris	Yes/No ✓	q) Skin disease	Yes/No ✓
e) Breathlessness/ Spitting blood	Yes/No ✓	r) Epilepsy of any kind	Yes/No ✓
f) Rheumatic fever/ Arthritis	Yes/No ✓	s) Addicted to alcohol/drugs	Yes/No ✓
g) Asthma/Bronchitis	Yes/No ✓	t) Allergy to any food/drugs	Yes/No ✓
h) Tuberculosis	Yes/No ✓	u) Are you on any medication	Yes/No ✓
i) Pep.ulcer/Jaundice/Haematemesis	Yes/No ✓	v) Urinary tract infection	Yes/No ✓
j) Hernia/Hydrocele	Yes/No ✓	w) Past accident/operation	Yes/No ✓
k) Diabetes mellitus	Yes/No ✓	x) Backache/Sciatica	Yes/No ✓
l) Renal calculi	Yes/No ✓	y) Piles/Fissures	Yes/No ✓
m) Illness/accident requiring prolong Hospitalization	Yes/No ✓	z) Have you ever been signed off on medical ground	Yes/No ✓

IF YES, GIVE DETAILS ON THE REVERSE

I affirm that I am not suffering from any other diseases, which can be concealed and not revealed by me I agree and declare the above statement shall be the basis of my medical test report and that I personally stand responsible for any action the company may take, if prove, otherwise.

Details on above of required:

Chittagong :

Candidate Signature**MEDICAL EXAMINE REPORT**

Height : 5'6" Weight: 74 KG BP: 120/80 mm hg Pulse: 72/min Resp: 16/min Gen. App: GOOD					
Vision:	Right Eye:	Left Eye:	Right ear: NORMAL	Left ear: NORMAL	
Without glass: 6/6	6/6	Inspection: NORMAL		NORMAL	
With glass: 6/6	6/6	Hearing: NORMAL	NORMAL		
Color test by book : NAD	Yellow: NAD	Red: NAD	Green: NAD	Blue: NAD	
Oral cavity & teeth : CLEAR & HEALTHY			Throat: CLEAR	Nervous system: NAD	
Cardiovascular system: NAD			Endocrine system: NAD		