### 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 convenation 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: SM-II

Name of the candidate: MONIRUZZAMAN KHAN. P.port/C.D.C No: T/29922

Sex: MALE

D/B: 28/02/1977 Married / Unmarried:

Height: 5'6"

Weight: 64KG

**Identification mark**: CUT MARK ON THE RT HAND.

## **MEDICAL HISTORY**

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

Have you ever had or de me	/	D :: C / L - CC I must one	Yes/No∨
a) Frequent headache/ Fainting	Yes/No√	n)Parasitic infestation of G.I system	
b) Colour blindness/ Loss of vision	Yes/No	o)Varicose venis	Yes/No~
c) High/ Low blood Pressure	Yes/No	p) Veneral 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✓
1) Renal calculi	Yes/No	y) Piles/Fissues	Yes/No 🗸
m) Illness/accident requiring prolong		z) Have you ever been signed off on	Yes/No
Hospitalization	, 100,110	medical ground	

# IF YES, GIVE DETAILS ON THE REVERSE

I affirm that I am not suffering from any other diseases, which can be concealed and not reveled 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: 64 KG BP: 125/85 mm hg Pulse: 76/min Resp: 16/min Gen. App: GOOD Left ear: NORMAL Right ear: NORMAL Right Eye: Vision: Left Eye: **NORMAL Inspection: NORMAL** Without glass: 6/6 6/6 NORMAL **NORMAL** Hearing: With glass: 6/6 6/6 **Blue: NAD** Green: NAD Red: NAD Color test by book: NAD Yellow: NAD Nervous system: NAD Throat: CLEAR Oral cavity & teeth: CLEAR & HEALTHY **Endocrine system: NAD** Cardiovascular system: NAD