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: SM-3

Name of the candidate: RIDOY BAIDDA. P.port/C.D.C No: T/32363 Sex: MALE

D/B: 14/08/2000 Married / Unmarried: Height: 5'6" Weight: 71KG

Identification mark: MOLE IN THE LEFT CHEST.

MEDICAL HISTORY

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

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	a) Frequent headache/ Fainting	Yes/NoV	n)Parasitic infestation of G.I system	Yes/No ✓
	b) Colour blindness/ Loss of vision	Yes/No V	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 V	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 V	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∽
T	k) Diabetes mellitus	Yes/No ✓	x) Backache/Sciatica	Yes/No ✓
ſ	1) Renal calculi	Yes/No ✓	y) Piles/Fissues	Yes/No
	m) Illness/accident requiring prolong	Yes/No V	z) Have you ever been signed off on	Yes/No
	Hospitalization		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

TIEDICIE EMININE REL ORT							
Height: 5'6" Weight: 71 KG BP: 120/80 mm hg Pulse: 72/min Resp: 16/min Gen. App: GOOD							
Vision: Right Eye: Left Eye: Rig	ht ear: NORMAL	Left ear: N	ORMAL				
Without glass: 6/6 6/6 Inspection: NO	DRMAL	ľ	NORMAL				
With glass: 6/6 6/6 Hearing:	NORMAL	NOI	RMAL				
Color test by book: NAD Yellow: NAD	Red: NAD	Green: NAD	Blue: NAD				
Oral cavity & teeth: CLEAR & HEALTHY	Throat: CLEAR	Nervous syst	tem: NAD				
Cardiovascular system: NAD	Endocrine syst	em: NAD					