	<b>NAAF MARINE SERVICES</b>	NMS/F-04	Date	1 July 2012
	<b>TITLE:- PRE-JOINING MEDICAL EXAMINATION</b>		Issue No	00
	<b>REPORT/CERTIFICATE</b>		Page No	6 of 6

Appendix 1  
Medical Exam Form  
**CONFIDENTIAL FORM**

Other diagnostic test(s) and result(s):

Test *ILU, HIV, DCA* Result *NDMB*

Medical practitioner's comments and assessment of fitness, with reasons for any limitations:

**Fit For Duty on Board Ship**

Vaccination status recorded (optional, but recommended by Administrator): ☒ Yes ☐ No

**Assessment of fitness for service at sea**

On the basis of the examinee's personal declaration, my clinical examination and the diagnostic test results recorded above, I declare the examinee medically:

☒ Fit for look-out duty ☐ Not fit for look-out duty

	Deck service	Engine service	Catering service	Other services
Fit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unfit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Without restrictions ☒ With restrictions ☐ Visual aid required ☐ Yes ☒ No

Describe restrictions (e.g., specific positions, type of ship, trade area)


Action taken by medical practitioner (e.g., referral): \_\_\_\_\_

Medical certificate's date of expiration (day/month/year): 12 / JAN 2023 / \_\_\_\_\_

Date of medical certificate issued (day/month/year): 13 JAN 2021 / \_\_\_\_\_

Number of medical certificate: 07-2021-0039

Official stamp:

Signature of medical practitioner: 

Name of medical practitioner: *(Typed or printed)* **DR. M. AYUBUR RAHMAN**  
M.B.B.S., F.P.S. (Medicine)

License number of medical practitioner: **Taher Chamber**  
10, Agrabad C/A, Chittagong.  
Regn. No. A-11820

Address of medical practitioner:

Authorized by: \_\_\_\_\_ (competent authority)

**(CONTROLLED DOCUMENT)**

Quality Manual: Naaf Marine Services, Chittagong, Bangladesh: July 2012