

## **NAAF MARINE SERVICES**

NMS/F-04

1 July 2012 Date

TITLE:- PRE-JOINING MEDICAL EXAMINATION REPORT/CERTIFICATE

Issue No 00 Page No 1 of 6

CONF	<b>IDENT</b>	TAL FORM			0-10	1 01 0
SURNAME SURNAME		NAME(S)  KAZI ZOH	1011			
DATE OF BIRTH	PLACE	OF BIRTH	IKUL		ODY	
MONTH O DAY O YEAR 1997		loakhali	COUNT	IRY B'DESH	SEX MALE	□FEMALE
EXAMINATION FOR DUTY AS:		G ADDRESS OF APP				
MASTER					04110114	2 - 4- 4-
DECK OFFICER	CKL	ashpur, wa	HKD 1	NO-05, EKL	-MSHPV4	< ISAZHK
RATING OTHERS (RANK: (OS)	BEG	UMGANJ, N	IDAKI	HALI		
MEDICAL FXAMINATION (SEE REVERSE SIDE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE						
SIO PRESSURE PULSE 84/M/Nr		RESPIRATION		GENERAL APPEAR	ANCE	
		IGMIN. GOOD.				
VISION: RIGHT EYE LEFT EYE WITHOUT GLASSES		HEARING:				
WITH GLASSES		RT. EAR NOW	IAL	LEFT EAF	· wor	mal
COLOR TEST TYPE: BOOK LANTERN CHECK	IF COLO	R TEST IS NORMAL	- YELL	OW FRED FO	REEN CH	BLUE
ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE RI	EOURED	VISION STANDARD	os? Vee [	No 🖪		, BOL (
HEAD AND NECK		HEART (CARDI		CIII AD)		
Nomina		TILTIKI (CAKDI	IOVASC	(COLAR)	MAC	_
LUNGS OLEAR.		SPEECH (DECK/N	NAVIGAT	TIONAL OFFICER AN		
		D SI ELECT CIVINI AIRE	a) FOR NO	RMAL VOICE COMMUNI	ICATION? 7	yes,
EXTREMITIES: WONGAC		LOWER		NOMA	e	
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON POARD?	D BY WOR	· · · · · · · · · · · · · · · · · · ·	EL OD TO	O DESTREE IN (Amp va		
OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD?			DEL, OR TO	J RENDER HIM/HER U	NHII FOR SERV	/ICE AT SEA
IC ADDITION OF THE PROPERTY OF		Yes No C				
IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICA	ATIONS?	YES NO NO				
	1 7 AUG 2022					
SIGNATURE OF APPLICANT				DATE		
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PLANTAGE OF THE PLAN	PHYSICIAN					
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WA	AS GIVE	ито: К <del>Р2</del>	1 20	HIRUL 95	LAM	***
Fit For Duty on Board Ship This applicant is certified tree of communicable disease				NAME OF ADDITION		
SEAFARER IS FOUND TO BEY FIT / NOT FIT FOR DUTY AS A	MAST	ED / DECK OFFE	o). IESE			
CHIEF COOK / COOK / WITHOUT ANY RESTRICTIONS /	WITH	THE FOLLOWING RI	ESTRICT	JENGINEERING OF	FICER / LYN	LATING /
NAME AND DEGREE OF PHYSICIAN DR. M	AD. Ay	ubur Rahman			1	
10 00	Taher (	S.T. (Medicine) Chamber, C/A, Chittagon	<b>a</b>			
AME OF PHYSICIAN'S CERTIFICATING AUTHORITY BMC	OC Reg	No: A-11820 ROVED BY				
PATE OF ISSUE OF PHYSICIAN'S CERTIFICATE	DG S	hipping Bangladesh				
IGNATURE OF PHYSICIAN				1 7 AI	JG 2022	
DR. MD. AYUSUR RAHMAN						
M.B.B.S; P.G.T (Medicine)					DATE	

10, Agraba Toxacrofinate is recompliance with the requirements of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73, STCW I 9/A)

(CONTROLLED DOCUMENT)

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