

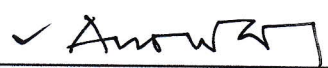
	NAAF MARINE SERVICES		NMS/F-04	Date	1 July 2012
	TITLE: - PRE-JOINING MEDICAL EXAMINATION REPORT/CERTIFICATE			Issue No	00
				Page No	1 of 6

CONFIDENTIAL FORM

SURNAME HOSSAIN		GIVEN NAME(S) MD ANOWAR	
DATE OF BIRTH MONTH 03 DAY 21 YEAR 1993		PLACE OF BIRTH CITY KUSHTIA COUNTRY B'DESH	SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
EXAMINATION FOR DUTY AS: MASTER <input type="checkbox"/> DECK OFFICER (2nd officer) <input checked="" type="checkbox"/> ENGINEERING OFFICER <input type="checkbox"/> RATING <input type="checkbox"/> OTHERS (RANK: _____) <input type="checkbox"/>		MAILING ADDRESS OF APPLICANT: VAL: HORINGASI, P.O: RAFAYETPUR P.S: DAULATPUR, DIS: KUSHTIA.	

MEDICAL EXAMINATION (SEE REVERSE SIDE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE

HEIGHT 5'7"	WEIGHT 78kg	BLOOD PRESSURE 115/75 mmHg	PULSE 90/min	RESPIRATION 16/min	GENERAL APPEARANCE GOOD.
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6 LEFT EYE 6/6		HEARING: RT. EAR NORMAL LEFT EAR NORMAL	
COLOR TEST TYPE: BOOK <input checked="" type="checkbox"/> LANTERN <input checked="" type="checkbox"/> CHECK IF COLOR TEST IS NORMAL - YELLOW <input type="checkbox"/> RED <input type="checkbox"/> GREEN <input type="checkbox"/> BLUE <input type="checkbox"/>					
ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARDS? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					
HEAD AND NECK NORMAL			HEART (CARDIOVASCULAR) NORMAL		
LUNGS CLEAR.			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? YES		
EXTREMITIES: UPPER NORMAL LOWER NORMAL					
IS APPLICANT SUFFERING FROM ANY DISEASE LIKELY TO BE AGGRAVATED BY WORKING ABOARD A VESSEL, OR TO RENDER HIM/HER UNFIT FOR SERVICE AT SEA OR LIKELY TO ENDANGER THE HEALTH OF OTHER PERSONS ON BOARD? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					
IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICATIONS? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					

 SIGNATURE OF APPLICANT		06 AUG 2024 07 AUG 2022 DATE	
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN			
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO:		MD ANOWAR HOSSAIN NAME OF APPLICANT	
THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE DISEASE (OR VIRUSES FOR COOKS): Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
SEAFARER IS FOUND TO BE <input checked="" type="checkbox"/> FIT / <input type="checkbox"/> NOT FIT FOR DUTY AS A <input type="checkbox"/> MASTER / <input checked="" type="checkbox"/> DECK OFFICER / <input type="checkbox"/> ENGINEERING OFFICER / <input type="checkbox"/> RATING / <input type="checkbox"/> CHIEF COOK / <input type="checkbox"/> COOK / <input checked="" type="checkbox"/> WITHOUT ANY RESTRICTIONS / <input type="checkbox"/> WITH THE FOLLOWING RESTRICTIONS:			
NAME AND DEGREE OF PHYSICIAN		DR. MD. Ayubur Rahman M.B.B.S., P.G.T. (Medicine)	
ADDRESS		Taher Chamber, 10, Agrabad C/A, Chittagong	
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY		BMDC Reg No: A-11820 AND APPROVED BY	
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE		DG Shipping Govt. of Bangladesh	
SIGNATURE OF PHYSICIAN		07 AUG 2022 06 AUG 2024 DATE	

DR. MD. AYUBUR RAHMAN
M.B.B.S.; P.G.T (Medicine)
Taher Chamber
10, Agrabad C/A, Chittagong

This Certificate is in compliance with the requirements of the International Convention (Seafarers) Convention 1946 (ILO No. 73, STCW I 9/A)

(CONTROLLED DOCUMENT)

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