
	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 PATWARY		GIVEN NAME(S) MD FOISAL UDDIN	
DATE OF BIRTH MONTH 11 DAY 03 YEAR 1987		PLACE OF BIRTH CITY CUMILLA COUNTRY BD/ESH	SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
EXAMINATION FOR DUTY AS: MASTER <input type="checkbox"/> DECK OFFICER <input type="checkbox"/> ENGINEERING OFFICER <input checked="" type="checkbox"/> RATING <input type="checkbox"/> OTHERS (RANK: C/E) <input type="checkbox"/>		MAILING ADDRESS OF APPLICANT: HATIAMURI, MELLA BAZAR, MANOHARGANJ, CUMILLA	

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

HEIGHT 169 CM	WEIGHT 68 KG	BLOOD PRESSURE 135/85 mmHg	PULSE 88/min	RESPIRATION 16/min	GENERAL APPEARANCE Good.
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 8/9 6/6		LEFT EYE 8/9 6/6	
HEARING:		RT. EAR NORMAL LEFT EAR NORMAL			
COLOR TEST TYPE: BOOK <input checked="" type="checkbox"/> LANTERN <input type="checkbox"/> CHECK IF COLOR TEST IS NORMAL - YELLOW <input checked="" type="checkbox"/> RED <input checked="" type="checkbox"/> GREEN <input checked="" type="checkbox"/> BLUE <input type="checkbox"/>					
ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARDS? Yes <input checked="" type="checkbox"/> No <input 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	20 JUN 2023 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 FOISAL UDDIN PATWARY	
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 type="checkbox"/> DECK OFFICER / <input checked="" 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. M. AYUBUR RAHMAN
ADDRESS	M.B.B.S; P.G.T (Medicine) SABA DIAGNOSTIC CENTRE TAHER CHAMBER 10, AGRABAD C/A, CHITTAGONG. BMDG AND DG SHIPPING GOVT. OF BD 23-02-1984
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY	
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE	
SIGNATURE OF PHYSICIAN	20 JUN 2023
DR. MD. AYUBUR RAHMAN M.B.B.S; P.G.T (Medicine) Taher Chamber 10, Agrabad C/A, Chittagong. Regd. No. A-11820	

This Certificate is in compliance 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