

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

SURNAME ALAM	GIVEN NAME(S) MD MORSHED		
DATE OF BIRTH MONTH 01 DAY 01 YEAR 1970	PLACE OF BIRTH CITY CHANDPUR COUNTRY B'DESH		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 type="checkbox"/> RATING <input checked="" type="checkbox"/> OTHERS (RANK: FITTER) <input type="checkbox"/>	MAILING ADDRESS OF APPLICANT: GHANIA, WARD NO-07, FARINGANJ, GHANIA-3610, CHANDPUR		

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

HEIGHT 167CM	WEIGHT 74KG	BLOOD PRESSURE 140/90MMHG	PULSE 84/MIN.	RESPIRATION 16/MIN	GENERAL APPEARANCE GOOD.
VISION:		RIGHT EYE	LEFT EYE	HEARING:	
WITHOUT GLASSES		6/9	6/9	RT. EAR NORMAL LEFT EAR NORMAL	
WITH GLASSES		6/6	6/6		

COLOR TEST TYPE: BOOK ☐ LANTERN ☒ CHECK IF COLOR TEST IS NORMAL - YELLOW ☒ RED ☒ GREEN ☐ BLUE ☒

ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARDS? Yes ☒ No ☐

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 ☐ No ☒

IS APPLICANT TAKING ANY NON-PRESCRIPTION OR PRESCRIPTION MEDICATIONS? Yes ☐ No ☒

MD Morshed
SIGNATURE OF APPLICANT

01 FEB 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 MORSHED ALAM**
NAME OF APPLICANT

THIS APPLICANT IS CERTIFIED FREE OF COMMUNICABLE DISEASE (OR VIRUSES FOR COOKS): Yes ☒ No ☐

SEAFARER IS FOUND TO BE ☒ FIT / ☐ NOT FIT FOR DUTY AS A ☐ MASTER / ☐ DECK OFFICER / ☒ ENGINEERING OFFICER / ☒ RATING / ☐ CHIEF COOK / ☐ COOK / ☒ WITHOUT ANY RESTRICTIONS / ☐ WITH THE FOLLOWING RESTRICTIONS:

NAME AND DEGREE OF PHYSICIAN **DR. M. AYUBUR RAHMAN**
ADDRESS **M.B.B.S; P.G.T (Medicine)**
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY **SABA DIAGNOSTIC CENTRE**
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE **TAHER CHAMBER**
SIGNATURE OF PHYSICIAN **10, AGRABAD C/A, CHITTAGONG.**
DR. MD. AYUBUR RAHMAN
M.B.B.S; P.G.T (Medicine)
TAHER CHAMBER
10, AGRABAD C/A, CHITTAGONG.
BMDC AND DG SHIPPING
GOVT. OF BD
23-02-1984
01 FEB 2023
DATE

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