
	<b>NAAF MARINE SERVICES</b>	NMS/F-04	Date
	<b>TITLE:- PRE-JOINING MEDICAL EXAMINATION REPORT/CERTIFICATE</b>		Issue No
			Page No

## CONFIDENTIAL FORM

SURNAME <b>BILLAH</b>	GIVEN NAME(S) <b>MOHAMMAD MASUM</b>
DATE OF BIRTH MONTH <b>06</b> DAY <b>04</b> YEAR <b>1993</b>	PLACE OF BIRTH CITY <b>CUMILLA</b> COUNTRY <b>B'DESH</b>
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 type="checkbox"/> OTHERS (RANK: <b>OS</b> ) <input checked="" type="checkbox"/>	MAILING ADDRESS OF APPLICANT: <b>GOBINDHUPUR, CHHOTO TULAGAON, BARURA, CUMILLA, BANGLADESH</b>

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

HEIGHT <b>5'8"</b>	WEIGHT <b>68KG</b>	BLOOD PRESSURE <b>120/80 MMHg</b>	PULSE <b>72/min</b>	RESPIRATION <b>16/MIN</b>	GENERAL APPEARANCE <b>GOOD</b>
VISION: WITHOUT GLASSES RIGHT EYE <b>6/6</b> LEFT EYE <b>6/6</b> WITH GLASSES <b>✓</b> <b>✓</b>		HEARING: RT. EAR <b>NORMAL</b> LEFT EAR <b>NORMAL</b>			
COLOR TEST TYPE: BOOK <input checked="" type="checkbox"/> LANTERN <input checked="" 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 checked="" 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 <b>NORMAL</b>			HEART (CARDIOVASCULAR) <b>NORMAL</b>		
LUNGS <b>CLEAR</b>			SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION? <b>YES</b>		
EXTREMITIES: UPPER <b>NORMAL</b> LOWER <b>NORMAL</b>					
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

**22 JAN 2021**

DATE

THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN

THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO:

**MOHAMMAD MASUM BILLAH**

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**  
M.B.B.S., P.C.T. (Medicine)  
**SABA DIAGNOSTIC CENTRE**  
TAHER CHAMBER  
10 AGRABAD C/A, CHITTAGONG.  
BMDC AND DG SHIPPING  
GOVT. OF BD  
23-02-1984

ADDRESS

NAME OF PHYSICIAN'S CERTIFYING AUTHORITY

DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE

SIGNATURE OF PHYSICIAN

**DR. MD. AYUBUR RAHMAN**  
M.B.B.S.; P.G.T. (Medicine).

Taher Chamber

10, Agrabad C/A, Chittagong.  
of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73, STCW I 9/A)  
Regn. No. A-11820

**22 JAN 2021**

DATE

This certificate is in compliance with the requirements

of the Medical Examination (Seafarers) Convention 1946 (ILO No. 73, STCW I 9/A)

Regn. No. A-11820

(CONTROLLED DOCUMENT)

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