

	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) MOHAMMED IDRIS	
DATE OF BIRTH MONTH 06 DAY 05 YEAR 1988	PLACE OF BIRTH CITY CHATTOGRAM 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: (05)) <input type="checkbox"/>	MAILING ADDRESS OF APPLICANT: SOUTH PATENGA, SOUTH PARA, W-41, PATENGA, CHITTAGONG AIRPORT-4205, CHATTOGRAM	

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

HEIGHT 5'5"	WEIGHT 70 KG	BLOOD PRESSURE 130/80 mm Hg	PULSE 82 /min	RESPIRATION 16 /min	GENERAL APPEARANCE GOOD
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE 6/6 <input checked="" type="checkbox"/>	LEFT EYE 6/6 <input checked="" type="checkbox"/>	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 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 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"/>					

md Idris Alam**26 NOV 2023**

SIGNATURE OF APPLICANT

DATE

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

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

MOHAMMED IDRIS 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. MD. Ayubur Rahman
ADDRESS	M.B.B.S. P.G.T (Medicine) Taher Chamber, 10, Agrabad C/A, Chittagong
NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY	BMDC Reg No: A-11820
DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE	AND APPROVED BY DG Shipping Govt. of Bangladesh
SIGNATURE OF PHYSICIAN	26 NOV 2023

DR. MD. Ayubur Rahman
M.B.B.S. P.G.T (Medicine)
Taher Chamber,
10, Agrabad C/A, Chittagong
BMDC Reg No: A-11820
AND APPROVED BY
DG Shipping
Govt. of Bangladesh

This certificate is in compliance with the requirements
of the International Convention (Seafarers) Convention 1946 (ILO No. 73, STCW 1978)

(CONTROLLED DOCUMENT)

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

