

NAAF MARINE SERVICES

NMS/F-04

TITLE:- PRE-JOINING MEDICAL EXAMINATION REPORT/CERTIFICATE

CONF	IDENT	IAL FORM		M.B.t.S		
SURNAME RABIN	GIVEN 1	NAME(S) NAZMIR	AL	The state of the s		
DATE OF BIRTH	PLACE	OF BIRTH	Va LADESHI	SEX		
month 02 day 12 year 1991	CITY	COUN	TRY .	MALE	FEMALE	
EXAMINATION FOR DUTY AS:	MAILIN	G ADDRESS OF APPLICAN	Γ:			
MASTER DECK OFFICER ENGINEERING OFFICER RATING OTHERS (RANK: 2/OFF)	DECK OFFICER ENGINEERING OFFICER OLI NAGAR, MIRSHARAI, CHATTOGRAM OLI NAGAR, MIRSHARAI, CHATTOGRAM					
MEDICAL EXAMINATION (SEE REVERSE SIDE FOR MEDICAL REQUIREMENTS) STATE DETAILS ON REVERSE SIDE						
HEIGHT WEIGHT BLOOD PRESSURE PULSE 75KG 120780MMLK 76MIN		RESPIRATION 16 MIN	GENERAL APPEAR	RANCE		
VISION: RIGHT EYE LEFT EYE HEARING:						
WITHOUT GLASSES WITH GLASSES 6/6// 6/6// V	RT. EAR NOMAL LEFT EAR NOMAL					
COLOR TEST TYPE: BOOK DEANTERN CHECK IF COLOR TEST IS NORMAL - YELLOW DEFED GREEN DELUE DE						
ARE GLASSES OR CONTACT LENSES NECESSARY TO MEET THE REQUIRED VISION STANDARDS? YES NO NO						
HEAD AND NECK		HEART (CARDIOVASCULAR)				
LUNGS		SPEECH (DECK/NAVIGATIONAL OFFICER AND RADIO OFFICER) IS SPEECH UNIMPAIRED FOR NORMAL VOICE COMMUNICATION?				
EXTREMITIES:						
UPPERNSMIAL		LOWER	No.c.	~ _		
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 MEDIC	ATIONS?	YES NO NO				
Patri-			0.7 1111 2029	•		
SIGNATURE OF APPLICANT		1 B 8	0 4 JUL 2022	<u> </u>		
THIS SIGNATURE SHOULD BE AFFIXED IN THE PRESENCE OF THE EXAMINING PHYSICIAN						
THIS IS TO CERTIFY THAT A PHYSICAL EXAMINATION WAS GIVEN TO:						
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 / FECK OFFICER / ENGINEERING OFFICER / RATING / CHIEF COOK / COOK / WITHOUT ANY RESTRICTIONS / WITH THE FOLLOWING RESTRICTIONS:						
NAME AND DEGREE OF PHYSICIAN DR. MD. Ayubur Rahman						
ADDRESS Taher Chamber						
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 OR MO AVUBUR RAHMAN		the second secon	0 4	JUL 202	2	
DR MD. AYUBUR RATIMAN				DATE		

DR. MD. AYUBUR RAHMAN
M.B.S: P.G.T (Medicine)
Tahor Chamber

10. Agrabad C/Ahis certificates 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