

	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 <b>MINER</b>		GIVEN NAME(S) <b>SAIFUL ISLAM</b>	
DATE OF BIRTH MONTH <b>08</b> DAY <b>29</b> YEAR <b>1999</b>		PLACE OF BIRTH CITY <b>DHAKA</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 checked="" type="checkbox"/> RATING <input type="checkbox"/> OTHERS (RANK: <b>4/E</b> ) <input type="checkbox"/>		MAILING ADDRESS OF APPLICANT: <b>BHASHIPUR, AHAMED NAGAR, CHATKHIL, NOAKHALI</b>	

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

HEIGHT <b>5'8"</b>	WEIGHT <b>84KG</b>	BLOOD PRESSURE <b>120/80mm Hg</b>	PULSE <b>84/W/M</b>	RESPIRATION <b>16/MIN</b>	GENERAL APPEARANCE <b>Good</b>
VISION: WITHOUT GLASSES WITH GLASSES		RIGHT EYE <b>6/6</b> LEFT EYE <b>6/6</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

**12 MAR 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:

**SAIFUL ISLAM MINER**

**Fit For Duty on Board Ship**

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)  
SABA DIAGNOSTIC CENTRE  
TAHER CHAMBER**

NAME OF PHYSICIAN'S CERTIFICATING AUTHORITY

**10, AGRABAD C/A, CHITTAGONG.**

DATE OF ISSUE OF PHYSICIAN'S CERTIFICATE

**BMDC AND BG SHIPPING  
GOVT. OF BD  
23-02-1984**

SIGNATURE OF PHYSICIAN

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

**12 MAR 2023**

DATE

**10, Agrabad C/A, Chittagong**  
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