

TITLE:- PRE-JOINING MEDICAL EXAMINATION REPORT/CERTIFICATE

Issue No 00 Page No 4 of 6

Appendix 1 Medical Exam Form CONFIDENTIAL FORM

Auditional questions		
35. Have you ever been signed off as sick or repatriated from a ship?	Yes	No
36. Have you ever been hospitalized?		
37. Have you ever been declared unfit for sea duty?		
38. Has your medical certificate ever been restricted or revoked?		
39. Are you aware that you have any medical problems, diseases or illnesses?		9
40. Do you feel healthy and fit to perform the duties of your designated position/occupation?		
41. Are you allergic to any medications?		9
Comments.		
Fit For Duty on Board Ship		
42. Are you taking any non-prescription or prescription medications?		
If yes, please list the medications taken and the purpose(s) and dosage(s).		
		den er en
I hereby certify that the personal declaration above is a true statement to the best of m		
Signature of examinee: Date (day/month/year): 13 OCV 2022/ Witnessed by: (Signature) Name: (Typed or printed) OR. MD. AYUBUR RAHMAN M.B.B.S: P.G.T (Medicine) I hereby authorize the release of all hander previous medical records from any health institutions and model. Signature	th profess	
Signature of examinee: The last of the las		
Date (day/month/year): 1 3 OCT 2022/		
Witnessed by: (Signature)		
Name: (Typed or printed) DR. MD. AYUBUR RAHMAN Date and contact details for MBBS: PG-T (Medicine)		Programa.
Date and contact details for previous including (if know): 10, Agrabad C/A, Chittagong. Regn. No. A-11820		