



The acceptance or failure of the medical tests is based upon the American Club Pre-Employment Medical Examination—Acceptance Guidelines

Name of Medical Clinic:	<b>SABA DIAGNOSTIC CENTER</b>	Signature of Physician
Address of Medical Clinic:	Taher Chamber, 10, Agrabad C/A, Chattogram	
Contact Phone:		 <b>DR. MD. AYUBUR RAHMAN</b> M.B.B.S: P.G.T (Medicine) Taher Chamber Official Seal, Chattogram. Regn. No. A-11820
Contact Fax:		
Name and Degree of Physician:	<b>031-715678</b> <b>DR. M. AYUBUR RAHMAN</b> M.B.B.S: P.G.T (Medicine)	
Name of Physician's Licensing:	<b>SABA DIAGNOSTIC CENTRE</b> TAHER CHAMBER 10 AGRABAD C/A, CHITTAGONG. BMDC AND DG SHIPPING GOVT. OF BD 23-02-1984	
Date of issue of Physician's License:		
Date of Examination:	<b>16 AUG 2021</b>	

1. Physical Exam	<input type="checkbox"/>	24. Urinalysis	<input type="checkbox"/>
2. Vision	<input type="checkbox"/>	25. Eye Examination	<input type="checkbox"/>
3. Psychological Test	<input type="checkbox"/>	26. VOT	<input type="checkbox"/>
4. Hearing Test	<input type="checkbox"/>	27. HIV Test	<input type="checkbox"/>
5. Chest Exam	<input type="checkbox"/>	28. Sputum Test	<input type="checkbox"/>
6. ECG/EKG	<input type="checkbox"/>	29. Diabetes	<input type="checkbox"/>
7. Pathology	<input type="checkbox"/>	30. Tuberculin	<input type="checkbox"/>
8. Blood Tests	<input type="checkbox"/>	31. Fasting Blood Sugar	<input type="checkbox"/>
9. Urinalysis	<input type="checkbox"/>	32. Hemoglobin	<input type="checkbox"/>
10. Hematology	<input type="checkbox"/>	33. Liver Function Test (ALT & AST)	<input type="checkbox"/>
11. Serology (Hepatitis markers only)	<input type="checkbox"/>	34. Alcohol/Drug Test	<input type="checkbox"/>
12. Serology (Blood Count)	<input type="checkbox"/>	35. Substancy	<input type="checkbox"/>

If failed in any above mentioned examinations, please provide results with name of lab/center.

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