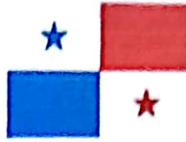




REPÚBLICA DE PANAMÁ  
REPUBLIC OF PANAMA  
AUTORIDAD MARÍTIMA DE PANAMÁ  
PANAMA MARITIME AUTHORITY  
CERTIFICADO MÉDICO DE LA GENTE DE MAR  
MEDICAL FITNESS STANDARDS CERTIFICATE FOR SEAFARERS



Certificate No.: ALCH-40303-2024

Este certificado se emite en conformidad con las disposiciones de la regla I/9 del Convenio STCW, 1978, enmendado, y la norma A-I/2 del CTM, 2006, enmendado, y certifica que la gente de mar es apta para el servicio en el mar.

This certificate is issued in accordance with the provisions of the regulation I/9 of the 1978 STCW Convention, as amended and the standard A-I/2 of the MLC, 2006, as amended, and certifies that seafarers are fit for sea service.

Apellido Surname: <b>PUTRA</b>	Nombre Given Name(s): <b>DERIE WIDYA</b>	Cédula / Pasaporte No. Id. Number/Passport No. <b>C 9086952</b>
Fecha de Nacimiento(dd/mm/aaaa); Date of Birth(dd/mm/yyyy) <b>14/12/1992</b>	Nacionalidad: Nationality <b>Indonesia</b>	Sexo: Sex <b>Male</b>
Yes      No		
¿Confirmación de que se examinaron los documentos de identidad en el lugar del examen? Confirmation that identification documents were checked at the point of examination		
<input checked="" type="checkbox"/> <input type="checkbox"/>		
¿La audición cumple con el estándar? Hearing meets standards?		
<input checked="" type="checkbox"/> <input type="checkbox"/>		
¿La audición es satisfactoria sin ayuda? Unaided hearing satisfactory?		
<input checked="" type="checkbox"/> <input type="checkbox"/>		
¿La agudeza visual cumple con el estándar? Visual acuity meets standards?		
<input checked="" type="checkbox"/> <input type="checkbox"/>		
¿La visión cromática cumple con el estándar? Colour vision meets standards?		
<input checked="" type="checkbox"/> <input type="checkbox"/>		
Fecha de la última prueba de visión cromática (Año/Mes/Día)? Date of last color vision test	2024-02-06	
¿Apto para cometidos de vigía? Fit for look out duties?	<input checked="" type="checkbox"/> <input type="checkbox"/>	
¿Existen limitaciones o restricciones respecto de la aptitud física? Si la respuesta es "sí", dar detalles de las limitaciones o restricciones: Limitations or restrictions on fitness?	<input type="checkbox"/> <input checked="" type="checkbox"/>	
¿Está el marino libre de cualquier condición médica que pueda verse agravada por el servicio en el mar o discapacitarle para el desempeño de tal servicio o poner en peligro la salud de otras personas a bordo? Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?	<input checked="" type="checkbox"/> <input type="checkbox"/>	
Confirmo que he sido informado sobre el contenido del presente certificado y sobre el derecho a solicitar una revisión del dictamen, con arreglo a lo dispuesto en el párrafo 6 de la Sección A-I/9. I hereby confirm that I have been informed about the content of this certificate and of the right to a review in accordance with the paragraph 6 of Section A-I/9.		
		Firma de la Gente de Mar Seafarer 's Signature

Date of Issue: 2024-02-07  
Expiration Date: 2026-02-07  
Name of the recognized medical practitioner: **Pony Ndaruaji**



Firma y sello del medico  
reconocido/Signature and Stamp of  
the recognized medical practitioner  
**dr. Pony Ndaruaji**  
SIP No : 10B.15A31.72.04.1005.9.K-3/4/1.779.3/e/2022

Reg: 3111100317053064

- El original de este certificado deberá estar disponible durante el servicio a bordo./The original of this certificate must be kept available while serving on board ship.
- En caso de pérdida de este certificado, el titular deberá notificar a los puertos y a la Autoridad Marítima de Panamá./In case of loss of this certificate, the holder should notify ports and the Panama Maritime Authority.
- La autenticidad de este certificado puede ser verificada contactando a la Autoridad Marítima de Panamá./The authenticity of this certificate can be verified contacting the Panama Maritime Authority.





## MEDICAL EXAMINATION REPORT

COMPANY	: PT. ANDHINI EKAKARYA SEJAHTERA			 <span style="position: absolute; left: 741px; top: 265px;">AT 2024</span>	
NCU NO.	: CLC-00-28-00				
NAME	: DERIE WIDYA PUTRA				
SEX	: PRIA/MALE				DATE EXAMINE : 06 Feb 2024
PLACE & DATE OF BIRTH	: SURABAYA / 14 December 1992				NATIONALITY : INDONESIA
MAILING ADDRESS OF EXAMINE	: PANDEGILING 5/22 B RT. 006 RW. 007 KEL. TEGALSARI KEC.				
DUTY	: THIRD OFFICER			PASSPORT : C9086952	

MEDICAL HISTORY (EXAMINE PERSONAL DECLARATION)		PHYSICAL EXAMINATION					
	Yes / No	HEIGHT	WEIGHT	BMI	BLOOD PRESSURE	PULSE	RESPIRATORY RATE
1. ALCOHOL HISTORY	No	162 cm	65 kg	24.80 kg/m <sup>2</sup>	111/73 mmHg	76 X/min	19 X/min
2. ALLERGIC HISTORY	No						
3. AMPUTATION	No						
4. BLOOD DISORDER	No						
5. BALANCE PROBLEM	No						
6. BACK OR JOINT PROBLEM	No						
7. COLOUR BLINDNESS	No						
8. CANCER	No						
9. DIABETES	No						
10. DIGESTIVE DISORDER	No						
11. DEPRESION	No	NORMAL					
12. EPILEPSY	No						
13. EYE / VISION PROBLEM	No	1. EYES	Yes				
14. EAR PROBLEM	No	2. EARS	Yes				
15. FRACTURE	No	3. NOSE	Yes				
16. GENITAL DISORDER	No	4. MOUTH	Yes				
17. HEART SURGERY	No	5. THROAT	Yes				
18. HEART DISEASE	No	6. NECK	Yes				
19. HIGH BLOOD PRESSURE	No	7. THROID	Yes				
20. HERNIA	No	8. LYMP NODE	Yes				
21. INFECTIOUS DISEASE	No	9. LUNGS	Yes				
22. KIDNEY PROBLEM	No	10. HEARTS	Yes				
23. LUNG DISEASE	No	11. ABDOMEN	Yes				
24. LIVER PROBLEM	No	12. UROGENITAL SYSTEM	Yes				
25. LOST OF MEMORY	No	13. UPPER EXTREMITIES	Yes				
26. NARCOTIC HISTORY	No	14. LOWER EXTREMITIES	Yes				
27. NEUROGICAL DISEASE	No	15. BACK ABNORMALITY	Yes				
28. OPERATION / SURGERY	No	16. HERNIA	Yes				
29. PSYCHIATRIC PROBLEM	No	17. CENTRAL NERVOUS SYSTEM	Yes				
30. RESTRICTED MOBILITY	No	18. SKIN & NAILS	Yes				
31. SKIN PROBLEM	No	19. SPEECH	Yes				
32. SLEEP PROBLEM	No	20. OTHERS	Yes				
33. THYROID PROBLEM	No						
34. TUBERCULOSIS	No						
35. SMOKING	No						
DENTAL EXAMINATION		HEARING		If abnormal give details			
8 7 6 5 4 3 2 1   1 2 3 4 5 6 7 8 8 7 6 5 4 3 2 1   1 2 3 4 5 6 7 8 • : Filling O : Caries ^ : Root Rest x : Missing V : Prothesia		NORMAL Right Ear Yes Left Ear Yes		<b>RESESSIAN DOKUMEN INI</b> <b>HUBUNGI</b> <b>TOTOT RUMEKSO</b> <b>HP. 0858 1392 5019</b>			





**INDOSEHAT 2003**  
CLINIC & MEDICAL CHECK-UP



**SURAT KETERANGAN**  
TO WHOM IT MAY CONCERN

Dengan ini kami menerangkan bahwa :  
Here with acknowledge that :

**Nama** Name : DERIE WIDYA PUTRA

**Jenis Kelamin** Gender/Sex : PRIA/MALE

**Tempat / Tanggal Lahir** Place / Date Of Birth : SURABAYA / DECEMBER 14, 1992

**Perusahaan** Company : PT. ANDHINI EKAKARYA SEJAHTERA

**Jabatan** Occupation : THIRD OFFICER



**Benar telah melakukan Medical Check-Up di Indosehat 2003 Medical Centre.**  
*Have trully complete Medical Standart Check-Up in Indosehat 2003 Medical Centre.*

**Dengan Hasil** : Sehat untuk Bertugas.  
*With Final Result : FIT.*

**Demikian surat keterangan ini kami sampaikan untuk dapat dipergunakan sebagaimana mestinya.**  
*I hope this letter will be found useful where necess.*



DERIE WIDYA PUTRA

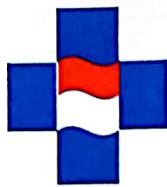
Jakarta, 06 February 2024



dr. Ponny Ndaruaji  
Examination

Date Of Examination, February 06, 2024

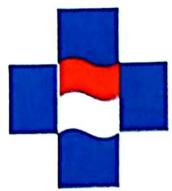
Expiration Of Validity, February 05, 2026



### REPORT LABORATORY RESULT

<b>Company</b>	: PT. ANDHINI EKAKARYA SEJAHTERA	<b>Sex</b>	: Male
<b>Name</b>	: MR.DERIE WIDYA PUTRA	<b>No. MR</b>	: 002800
<b>MCU No.</b>	: 006/MCUIIS/AES/II/24	<b>Age</b>	: 32 Years Old
<b>Date Examination</b>	: FEBRUARY 06, 2024		

Laboratory Test	Reference Ranges	Result
<b>HAEMATOLOGY</b>		
Haemoglobin	13.0 – 18.0	gr / dl
White Blood Cell Count	5.0 – 10.0	/ ul
ESR	0 - 15	mm / hour
<b>DIFFERENTIAL COUNT</b>		
Eosinophil	0 - 1	%
Basophil	1 - 3	%
Stab	2 - 6	%
Segment	50 - 70	%
Lymphocyte	20 - 40	%
Monocyt	2 - 8	%
Platelet/ Trombosit	150.000-440 .000	
<b>BLOOD CHEMISTRY</b>		
Fasting Blood Sugar	60-110	mg / dl
Blood Sugar 2 PP	60-140	mg/ dl
Random Glucose	60 - 180	mg / dl
Cholesterol	< 200	mg / dl
Triglyceride	< 200	mg / dl
SGOT	< 35	U / L
SGPT	< 45	U / L
Creatinin	0,7 - 1,4	mg / dl
Ureum	15 - 45	mg / dl
Fosfatase Alkali	30-120	mg/ dl
GGT	< 49	g/ml
BIL TOTAL	0,2-1,0	mg/dl
BIL DIRECT	0,1-1,2	mg/dl



### REPORT LABORATORY RESULT

Company	: PT. ANDHINI EKAKARYA SEJAHTERA		
Name	: MR.DERIE WIDYA PUTRA	Sex	: Male
MCU No.	: 006/MCUIS/AES/II/24	No. MR	: 002800
Date Examination	: FEBRUARY 06, 2024	Age	: 32 Years Old

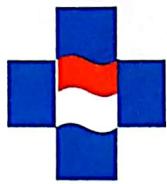
Laboratory Test	Reference Ranges	Result
<b>URINALYSIS</b>		
Macroscopic		
Spesific Gravity	1,010 – 1,030	1010
Albumin	Negative	Negative
Glucose	Negative	Negative
PH		6
Microscopic		
Sediment		
Epithels / hpf	Positive	Positive
WBC / hpf	1 – 4	0-2
RBC / hpf	1 – 4	0-1
Cast	Negative	Negative
Crystal	Negative	Negative
Bacteria	Negative	Negative
Others	Negative	Negative
<b>SEROLOGY / IMMUNOLOGY</b>		
VDRL	Non Reaktive	Non Reactive
Hbs Ag	Non Reaktive	Non reactive
HIV	Non Reaktive	Non reactive
 <u>dr. Gunawan Eka Putra, Sp.PK</u> Chief Laboratory		



## **LABORATORY FINDING**

BLOOD TEST		URINALYSIS	
<b><u>HEMATOLOGY</u></b>		<b>SPECIFIC GRAFTY</b> : 1010	
HB	: 16 gr/dl	PROTEIN	: Negative
WBC	: 5,4	GLUCOSE	: Negative
DIFF COUNT : 0,5/2,5/6/67/27,5/5,5			
<b><u>BLOOD CHEMISTRY</u></b>		<b>MICROSCOPIC :</b>	
CHOLESTEROL : 154 mg / dl		WBC	: 0-2 / hpt
TRYGLISERIDES : 119 mg / dl		RBC	: 0-1 / hpt
GDS : mg / dl		CAST	: Negative
SGOT : 31 U/L		CRYSTALS	: Negative
SGPT : 41 U/L		BACTERIA	: Negative
Creatinin : 0,8 mg / dl			
<b><u>SEROLOGY / IMUNOLOGI</u></b>			
Hbs Ag	: Non reaktive		
HIV	: Non reaktive		
VDRL	: Non Reaktive		
<b>CHEST X-RAY</b>	<b>Report</b>	<b>NORMAL</b>	
<b><u>OTHER DIAGNOSTIC TEST</u></b>			
ECG	: NORMAL		
<b>COMMENT ON MEDICAL HISTORY AND CLINICAL EVALUATION</b>			
The abovenamed person physically :			
<input checked="" type="checkbox"/> FIT <input type="checkbox"/> FIT WITH MINOR CORRECTABLE DEFECT <input type="checkbox"/> HAS MAYOR PHYSICAL DEFECT ; FIT WITH RESTRICTION OF SELECTED ASSIGNMENT <input type="checkbox"/> UNFIT TEMPORARY			
<b>FIT TO BE DUTY ON BOARD SHIP</b>			
For duties on board ship Doctor's Advice			
<b><u>HEALTH CERTIFICATE</u></b> No. : 006/MCUIS/AES/II/24			
THIS TO CERTIFICATE THAT A MEDICAL EXAMINATION WAS GIVEN TO : <b>MR. DERIE WIDYA PUTRA</b> AGE 32 YEARS			
<b>HE IS FOUND TO BE FIT FOR DUTY AS : THIRD OFFICER</b> ISSUED AT JAKARTA DATE FEBRUARY 06, 2024 VALID UNTIL FEBRUARY 06, 2026			
 <b>dr. PONY NDARUAJI</b> Chief Physician			

**Eks. Komp. Gaya Motor**  
**Jl. Isuzu No. 32 RT. 04 RW. 08 Semper Timur,**  
**Cilincing, Jakarta Utara 14130**  
**Telp. (021) 4411281**  
**Email : info@indosehat2003.id**



## CERTIFICATION DRUGS AND ALCOHOL

MCU. No	: 006/MCUIS/AES/II/24
Company	: PT. ANDHINI EKAKARYA SEJAHTERA
Date	: FEBRUARY 06, 2024

This is to certify that

Name	: MR. DERIE WIDYA PUTRA
Sex	: Male
Place/Date Of Birth	: SURABAYA/ DECEMBER 14, 1992
Age	: 32 Years Old
Rank	: THIRD OFFICER

Was examined for the presence of the following drugs and alcohol in the urine using the competitive immunoassay / chromatographic Absorbent method and was found :

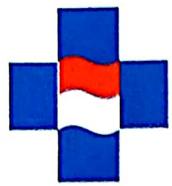
1. Amphetamine	:	Negative	6. Cocaine	:	Negative
2. Methamphetamine	:	Negative	7. Marijuana/Cannabinoids	:	Negative
3. Opiate/Morphine	:	Negative	8. Barbiturate	:	Negative
4. Phencyclidine	:	Negative	9. Benzodiazepine	:	Negative
5. Codeine	:	Negative	10. Alcohol	:	Negative

Note  
N/E : Not Examine

JAKARTA FEBRUARY 06, 2024



dr. PONY NDARUAJI  
Medical Review Officer



## **DENTAL HEALTH CERTIFICATE**

This is to certify that today I have examined :

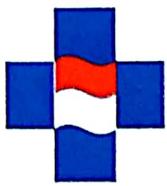
Name : MR. DERIE WIDYA PUTRA  
Age : 32 Years Old

And was found him / her dentally **FIT**.

Jakarta, FEBRUARY 06, 2024



**Dentist**



## DENTAL CHECK UP REPORT

MCU No. : 006/MCUIS/AES/II/24  
Date : FEBRUARY 06, 2024  
Name of Crew : MR. DERIE WIDYA PUTRA  
Age : 32 Years Old

Company/Shiping Co.:

### CHIEF COMPLAINT :

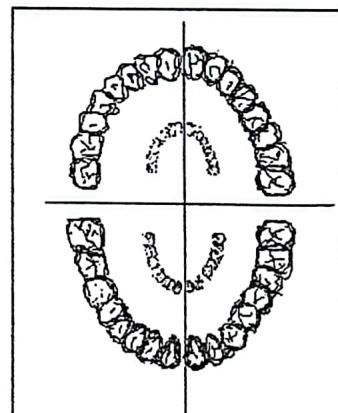
### FINDINGS :

1. Teeth Missing :

2. Carious Teeth :

3. Periodontally involved teeth :

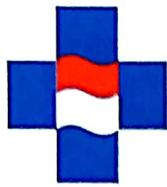
4. Others :



### ADVISED :

Jakarta, FEBRUARY 06, 2024





### Declaration of Anti HIV Test Result

I Declara that Anti HIV Test Result From :

Name : **MR. DERIE WIDYA PUTRA**  
No Client : 002800  
MCU No. : 006/MCUIS/AES/II/24  
Sex : Male  
Age : 32 Years Old

HIV	Negative
-----	----------

Jakarta, FEBRUARY 06, 2024

Examiner



**dr. PONY NDARUAJI**  
Medical Review Officer

Laboratory Analyst



# KLINIK UTAMA INDOSEHAT 2003 MEDICAL CENTRE

Ex. Komp. Gaya Motor  
JI. Isuzu No. 32 Semper Timur, Cilincing, Jakarta Utara 14130  
Telp. (021) 4411281 Fax. (021) 4411281 Email : [indosehat2003@hotmail.com](mailto:indosehat2003@hotmail.com)

Nama Pasien : MR. DERIE WIDYA PUTRA..... Pengirim : PT. ANDHINI EKAKARYA SEJAHTERA

Umur / No. Foto : 32 TH / 002800..... Rontgen : THORAX AP.....

Tanggal Rontgen : FEBRUARY 06, 2024.....

Yth. Ts.

## CHEST C-RAY POSTEROANTERIOR PROJECTION :

No sign of heart enlargement  
Normal bronchovascular pattern  
No sign of infiltrate or nodul in both lungs  
Diaphragms are smooth, costophrenic sinuses are sharp  
Bone of costae within normal limit

Conclusion : No sign of abnormality in chest X-ray

dr. ROSALINA, Sp. Rad.  
NIP 15831.72.04.1005.05.005.C.1/3-1.779.3/e/2020

dr. ROSALINA, Sp. Rad.

21/B.15b/31.72.04.1005.05.005.C.1/3-1.779.3/e/2020.

Tanda tangan : .....

Radiolog / Assisten : .....

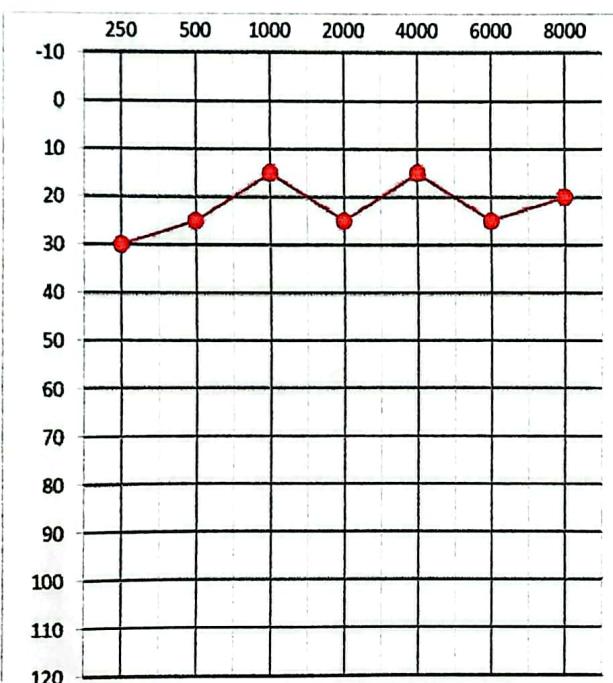
PATIENT DATA

<u>Company</u>	:	ANDHINI
<u>Name</u>	:	DERIE, W.P
<u>Age</u>	:	31 YO
<u>No</u>	:	00-28-00

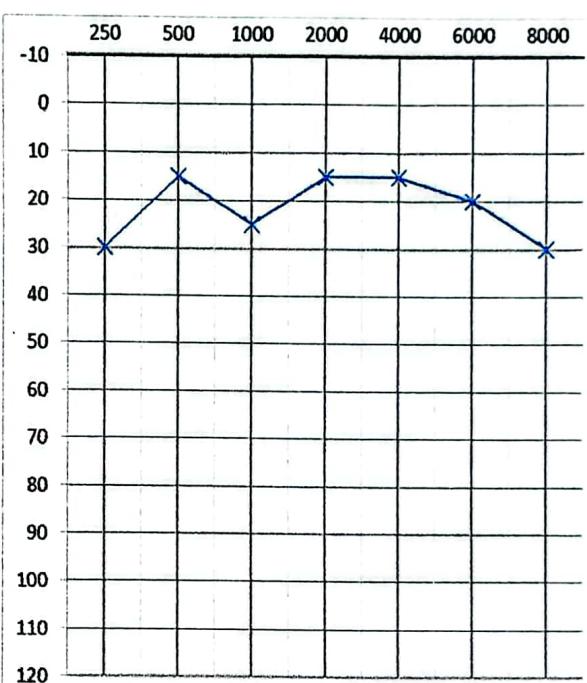
Instrument : Audiometer audiometri

Tone Audiogram

RIGHT - FFI



LEFT - FFI



Right Ear Air Conduction							Right Ear (dB)
250	500	1000	2000	4000	6000	8000	
30	25	15	25	15	25	20	20

Left Ear Air Conduction							Left Ear (dB)
250	500	1000	2000	4000	6000	8000	
30	15	25	15	15	20	30	17,5

Right Ear Bone Conduction							Right Ear (dB)
250	500	1000	2000	4000	6000	8000	
							0

Left Ear Bone Conduction							Left Ear (dB)
250	500	1000	2000	4000	6000	8000	
							0

Right Ear : Ambang dengar normal 20 dB

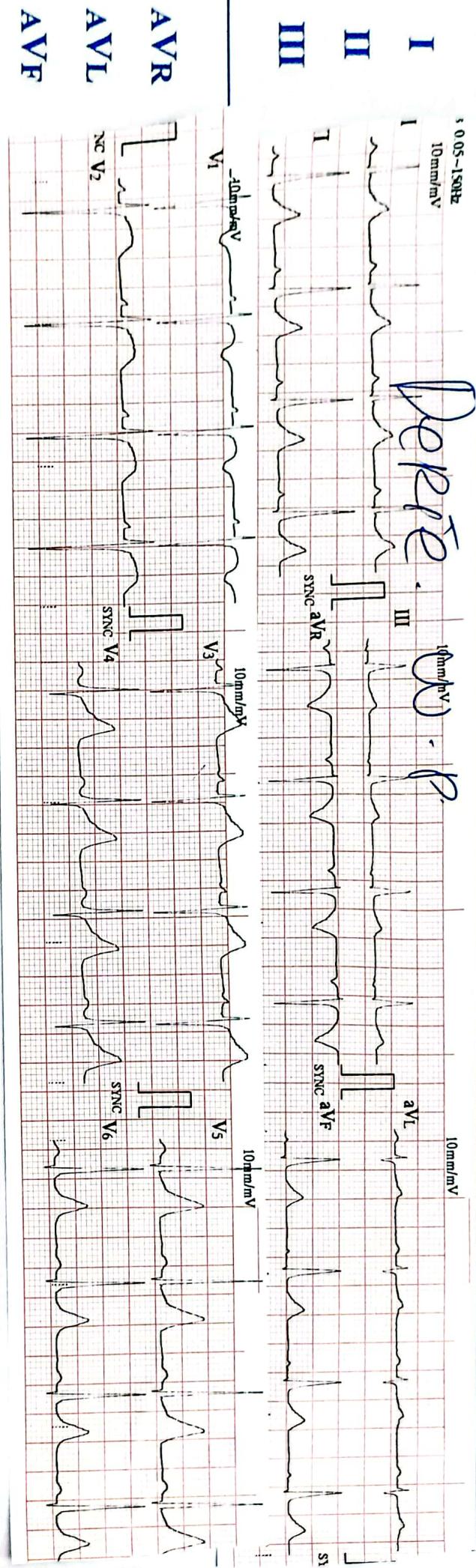
Left Ear : Ambang dengar normal 17,5 dB

Conclusion : Pendengaran kedua telinga dalam batas normal

dr. KARISMA PRAMESWARI PM, Sp. THT-KL  
14/B 15B/31.72.04.1005.05.005 C.1/3/-1.779 3/e/2021

Examining Physician  
dr Karisma Prameswari Sp.THT-KL

# ELECTROKARDIOGRAM REPORT



V1  
V2  
AVF

V4  
V5  
V6

**PEMERIKSAAN ELECTROKARDIOGRAM  
MEDICAL CHECK UP**

NO. MCU	:	00-28.00
TANGGAL PERIKSA	:	6 Februari 2024
NAMA	:	Dede W.P.
UMUR	:	31
PERUSAHAAN	:	Pelita
KESIMPULAN	:	Sinus 84 x / min Normal

Dr. Ismugi, SpJP-FIHA  
Spesialis Kardiovaskular & Penulis Kitab Darah  
[Signature]

**dr. ISMUGI SpJP, FIHA**  
**CARDIOLOGIST**