

樣本 海事處指定認可註冊醫生發出之STCW健康證明書 (適合PST,FF,REFT,PMC,CPSC課程)

Medical Fitness Certificate

Medical Examinations conducted in accordance with ILO/WHO Guidelines for conducting pre-sea and Periodic Medical Fitness Examinations for seafarers. Medical Certificate issued under the provisions of the International Convention and Standards of Training, Certification and Watchkeeping for Seafarers (STCW), 1978, as amended and the Maritime Labour Convention (MLC, 2006) of ILO. Authorizing authority: Maritime Administration / Regional Centre of Occupational Medicine.

I. Seafarer's Information 個人資料必須與身份證明文件完全吻合

Name (last, first, middle): _____
 Date of birth (day/month/year): _____ Nationality: China/HK Gender: Male / Female
 Passport No.: Seaman's Book No. or other relevant identity document No.: _____
 Height: 1.53 m Weight: 45 kg

II. Declaration of the recognised medical practitioner

Identification documents were checked at the point of examination: YES / NO

Sight
 Visual ability is satisfactory / meets standard in STCW Code, section A-I/9? (see page 2) YES / NO
 Colour vision is satisfactory / meets standard in STCW Code, section A-I/9? (see page 2) YES / NO
 (testing only required every six years)
 Date of last colour vision test: 04 DEC 2025

Hearing
 Hearing is satisfactory / meets standard in STCW Code, section A-I/9? YES / NO
 Unaided hearing satisfactory? YES / NO

III. Laboratory examination

Chest X-Ray: Normal.
 Blood Test: V.D.R.L.: Negative.
 Urine Test: Normal.
 Other: BP: 110/70mmHg. P: 70/min.

IV. Assessment of fitness for sea service 必須證明本人適合戶外訓練

On the basis of the examinee's personal declaration, my clinical examination and the diagnosis test results above, I declare the examinee medically

☒ Fit for look-out duty ☐ Not fit for look-out duty

	Deck service	Engine service	Catering service	Other service
Fit	☒	☒	☐	☐
Unfit	☐	☐	☐	☐

Without restrictions ☒ With restrictions ☐ Visual aid required YES / NO

Describe restrictions (e.g. specific position, type of ship, trade area, other restrictions): Nil.

Is the applicant suffering from medical conditions to be aggravated by, or to render him unfit for service at sea or likely to endanger the health of other persons onboard? YES / NO

Date of medical examination (day/month/year): 04 DEC 2025
 Certificate expiry date (day/month/year): 04 DEC 2027

Signature and stamp of authorised medical practitioner: _____

有效期必須在上課日期範圍內

Name and official stamp of medical practitioner's certifying authority: _____
 Date of issue and number of Physician's License: _____
 Name of authorised medical practitioner: _____