



# 外籍勞工健康檢查項目表

## Health Certificate for Foreign Labor

羅東聖母醫院ST.MARY'S HOSPITAL 宜蘭縣羅東鎮中正南路160號

No.160, Zhongzheng S. Rd., Luodong Township, Yilan County 26546, Taiwan (R.O.C.)

電話 TEL : 886-3-9544106 傳真 FAX : 886-3-9574951

檢查日期/  
Date of Examination

2017/12/02

**合格**

仲介: \_\_\_\_\_ 僱主: 徐婀娜 \_\_\_\_\_ **基本資料/Basic Data** 106 007244

姓名 : SRIPIN Name	性別 : <input type="checkbox"/> 男/M <input checked="" type="checkbox"/> 女/F Sex	
護照號碼 : AT888213 Passport No.	國籍 : 印尼 Nationality	
居留證號 : GD30047889 ARC No.	出生年月日 : 1989/06/26 Date of Birth	
工作縣市別 : 宜蘭縣 City/County (Workplace in R.O.C.)	手機 : _____ (Mobile Phone) 住家 : 9773189 (Home Phone)	

### 在中華民國健檢種類/Type of health examination done in the Republic of China (Taiwan):

- 入國後3日內/Within 3 days of arrival  
 定期(6、18、30個月)/Periodic (6, 18, 30 months)  補充/supplementary

### 病史/Medical History

曾罹患的疾病/Prior illnesses: 無

### 身體檢查/Physical Examination

身高/Height : 148 公分 cms	頭頸部/Head and neck : <input checked="" type="checkbox"/> 正常Normal <input type="checkbox"/> 異常Abnormal
體重/Weight : 51.9 公斤 kgs	胸部/Thorax : <input checked="" type="checkbox"/> 正常Normal <input type="checkbox"/> 異常Abnormal
血壓(Blood pressure) : 103 / 76 毫米汞柱 mmHg	心臟聽診/Heart auscultation : <input checked="" type="checkbox"/> 正常Normal <input type="checkbox"/> 異常Abnormal
脈搏/Pulse : 92 beats/min	腹部/Abdomen : <input checked="" type="checkbox"/> 正常Normal <input type="checkbox"/> 異常Abnormal
體溫/Body temperature : 36.6 °C	體肢運動/Locomotion : <input checked="" type="checkbox"/> 正常Normal <input type="checkbox"/> 異常Abnormal
視力/Vision : 右Right 0.6 左Left 0.5	精神狀態/Mental status : <input checked="" type="checkbox"/> 正常Normal <input type="checkbox"/> 異常Abnormal
其他/Others : _____	

### 實驗室檢查/Laboratory Examinations

#### A. 胸部X光肺結核檢查/Chest X-ray for Tuberculosis :

X光發現/Findings : 輕微脊椎側彎

判定/Result :

- 合格/Passed  疑似肺結核/TB suspect  無法確認診斷/Pending  不合格/Failed

#### B. 梅毒血清檢查/Serological Tests for Syphilis :

檢驗/Tests :

- a.  RPR  VDRL  
 陽性/Positive, 效價/Titers \_\_\_\_\_  陰性/Negative, 效價/Titers 1:1x (-)
- b.  TPHA  TPPA  FTA-abs  TPLA  EIA  CIA  
 陽性/Positive, 效價/Titers \_\_\_\_\_  陰性/Negative, 效價/Titers 1:80x (-)
- c.  other \_\_\_\_\_  陽性/Positive, 效價/Titers \_\_\_\_\_  
 陰性/Negative, 效價/Titers \_\_\_\_\_
- 判定(Results) :  合格/Passed  不合格/Failed



C. 腸內寄生蟲糞便檢查 / Stool Examination for Parasites :

陽性, 種名 / Positive, Species \_\_\_\_\_  陰性 (Negative)

判定(Results):  合格(Passed) <sup>合格</sup>  不合格(Failed)

D. 麻疹及德國麻疹之抗體陽性檢驗報告或預防接種證明 / Proof of Positive Measles and Rubella

Antibody or Measles and Rubella Vaccination Certificates :

a. 抗體檢查 / Antibody Tests

麻疹抗體(Measles antibody titers)  陽性(Positive)  陰性 (Negative)  未確定 (Equivocal)

德國麻疹抗體(Rubella antibody titers)  陽性(Positive)  陰性 (Negative)  未確定 (Equivocal)

b. 預防接種證明 / Vaccination Certificates (證明應包含接種日期、接種院所及疫苗批號; 接種日期與出國日期應至少間隔兩週 / The certificate should include the date of vaccination, the name of administering hospital or clinic and the batch no. of vaccine; the date of vaccination should be at least two weeks prior to traveling overseas.)

麻疹預防接種證明 / Measles Vaccination Certificate

德國麻疹預防接種證明 / Rubella Vaccination Certificate

c.  有接種禁忌, 暫不適宜預防接種 / Having contraindications, not suitable for vaccination

d.  入國後3日內、定期健檢及補充健檢免驗 / Not required for within-3-day-of-arrival, periodic, and supplementary health examination.

漢生病檢查 / Examination for Hansen's disease

全身皮膚視診結果 / Skin Examination

正常 / Normal

異常 / Abnormal :

非漢生病 / Not related to Hansen's disease : \_\_\_\_\_

疑似漢生病須進一步檢查 / Hansen's disease suspect who needs further examinations

a. 病理切片 / Skin Biopsy : \_\_\_\_\_

b. 皮膚抹片 / Skin Smear :  陽性 / Positive  陰性 / Negative

c. 皮膚病灶合併感覺喪失或神經腫大 / Skin lesions combined with sensory loss or enlargement of peripheral nerves :  有 / Yes  無 / No

判定 / Result :  合格 / Passed  須進一步檢查 / Needs further examinations  不合格 / Failed



健康檢查總結果 / The final result of health examination :

合格 / Passed  須進一步檢查 / Need further examinations  不合格 / Failed

負責醫檢師簽章 /

Signature of Chief Medical Technologist : \_\_\_\_\_

負責醫師簽章 /

Signature of Chief Physician : \_\_\_\_\_

醫院負責人簽章 /

Signature of Superintendent : \_\_\_\_\_

日期 / Date : 2017/12/09

備註 / Note : 本證明三個月內有效。 / The certificate is valid for three months.

提醒一 / Notice 1 : 入國後3日內健檢或定期健檢結果為須進一步檢查或不合格者, 得依「受聘僱外國人健康檢查管理辦法」第7條至第9條規定治療或再檢查; 未依規定者, 將因健檢不合格, 廢止其聘僱許可。 / If the results of your within-3-day-of-arrival or periodic health examination show that you require further examinations or you have failed the examination, you have to comply with Article 7 through Article 9 of the "Regulations Governing Management of the Health Examination of Employed Aliens". Failing to pass the health examination will render your work permit terminated.

提醒二 / Notice 2 : 定期健檢及補充健檢之健康檢查證明之正本應由勞工本人留存。 / The original copy of the periodic and supplementary health certificate should be kept by the person who undertook the health examination.

聖國不  
林滿足  
檢3985

