## 受聘僱外國人健康檢查項目表 Health Certificate for Employed Aliens

保禄

检查日期 2022/10/19 (YYYY)(MM)(DD) Date of Examination

Saint Paul's Hospital 330049 桃園市建新街 123 號。電話: 03-3613141 傳真: 03-3773373

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http://www.sph.org.tw

流水編號 01019-60145 病歷號 98351881

入境日: 2022/04/30

I. 基本資料	( Basic Dat	e)	雇主:唐	進益
姓名 : MARLINA BANOWATI	性別 Sex	:□男 Male ■女	Female	-
護照號碼 : AU110331	國籍	: 印尼		72 3
Passport No.	Nation	ality		3-51
居留證號:	出生年 Date o	f Birth: 22/DEC/1995		4 7
工作縣市別 : 新北市	mil an offi	:(手機 Mobile Phone)	7040077	
ity/County(Workplace in R.O.C.)	聯络電 Phone		7648877	145
	JA: ATOMAS	100	THE REAL PROPERTY.	
在中華民國健檢種類 Type of h	ealth examin	ation done in the Republic	c of China (Taiwa	an);
□入國後3日內 Within 3 days	of arrival	□境內聘僱 Employment in	n the territo	
□補充 supplementary ■ 定其	月(6、18、30	個月)Periodic(6, 18, 30 mo	nths)	18
II. 病 史(Medical His	story)		( ) 章	21 37
曾罹患的疾病 Prior illnesse		有		
		Examination )		
V W X	( Filysical			
A. 身高 : 160.9 公 (Height)	分CMS	G. 頭頸部 (Head and neck)	■正常 Normal	□異常 Abnorma
B. 體重 . 50 2 A	斤 kgs	H. 胸部	■ # Wormal	□異常 Abnorma
(Weight) - 50.5 公 C. 血壓 : 128/86 +	/  ngs	(Thorax) I. 心臓聴診	TEM NOT MAIL	- 34 to voice me
(Blood Pressure)	米汞柱 mmHg	(Heart auscultation)	■正常 Normal	□異常 Abnorma
D. 脈搏 : 87	/分 beats/mir	J. 腹部	■正常 Normal	□異常 Abnorma
(ruise)	С	(Abdomen) K. 體肢運動	- 4. 1	
(Body temperature)		(Locomotion)	正常 Normal	□異常 Abnorma
F. 視力 右 1.0 (Vision) Right	左 1.5 Left	L. 精神狀態 (Mental status)	■正常 Normal	□異常 Abnorma
(vision) Right	Lere	M. 其他 Others		
	40 NACOS 0			W.C. Toll
IV. 實驗室檢	查 ( Labor	ratory Examinations )		
A. 胸部 X 光肺結核檢查 (Chest V 光發現(Findings):	X-kay for 1	uberculosis).		
X 光發現(Findings): 判定(Result):				
	結核 (TB susr	ect) □無法確認診斷(Pend	ding) 口不合材	冬(Failed)
B. 梅毒血清檢查 (Serological	[급명]		g/	, (Turrey)
檢驗(Tests):				
a. ■RPR □VDRL □ 陽性 / F	ositive,效化	間 / Titers 🔳 陰性 / Neg	gative,效價 /	Titers
b. □TPHA/TPPA □ FTA-abs □	TPLA 🗆 EI	A CIA		
□陽性 / Positive, 效價 /	Titers <b>■</b> 陰	性 / Negative, 效價 / Tit	ers	

□ 陰性 / Negative, 效價 / Titers \_\_\_

判定(Result): ■合格(Passed) □不合格(Failed)

IV	. 實 4 驗 室 檢 查 (Laboratory Examinations)
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(Result): ■合格(Passed) □不合格(Failed)
	□第三類外國人來自中央衛生主管機關公告之特定國家、地區得免驗/Not required for Category 3
237	Aliens from countries/areas announced by the central competent health authority
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
de	Antibody or Measles and Rubella Vaccination Certificates):
a.	抗體檢查(Antibody Tests )
	麻疹抗體(Measles Antibody) □陽性(Positive)□陰性(Negative)□未確定(Equivocal)
1.	德國麻疹抗體(Rubella Antibody) □陽性(Positive)□陰性(Negative)□未確定(Equivocal)
D.	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)
	□有接種禁忌,暫不適宜預防接種。(Having contraindications, not suitable for vaccination
C.	一分级性示心。 省不远直接的极往。(Having Contramulcations, 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)
V.	漢 生 病 檢 查 (Examination for Hansen's disease)
判□	○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) 定(Result):■合格(Passed)□須進一步檢查(Needs further examinations.)□不合格(Failed) 第三類外國人來自中央衛生主管機關公告之特定國家、地區得免驗/Not required for Category 3 Aliens from countries/areas announced by the central competent health authority
	合格 (Passed) □須進一步檢查 (Need further examinations.) □不合格 (Failed)
	負責醫檢師簽章 医精神检查用章
	(Signature of Chief Medical Technologist:)  書 検師 張志 律 絵字第009743號
	to against our action rectand (plant)
	負責醫師簽章 (Signature of Chief Physician:) : 分格 操作版好語 景字第053152並
	醫院負責人簽章
	(Signature of Superintendent:) : 院長沈雅蓮
ele s	AN ANY PROPERTY OF THE PROPERT
	注意事項: 期(Date):(2022/10/24)(YYYY/MM/DD)※本證明三個月內有效(The certificate is valid for three months.
	是醒一/Notice 1:人國後 3 日內健檢或定期健檢結果為領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
	拉爾或再檢查: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
	ou require further examinations or you have failed the examination, you have to comply with Article 7 through Article 9 of the "Regulations Governing
IV.	fanagement of the Health Examination of Employed Aliens". Failing to pass thehealth examination will render your work permit terminated.
- 25	上解二/Notice 2: 定期傳輸及補充傳輸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.