

移工健康檢查項目表  
Health Certificate for Migrant Worker

檢查日期 2021/05/11  
(YYYY)(MM)(DD)  
Date of Examination



聖保祿醫院  
Saint Paul's Hospital

330049 桃園市桃園區建新街123號 電話:03-3613141  
傳真:03-3773373  
123, Jianxin St., Taoyuan Dist.,  
Taoyuan City 330049, Taiwan (R.O.C)  
http://www.sph.org.tw


流水編號 00511-60098  
病歷號 98364626  
入境日: 2019/12/06

仲介: 京兆賢

醫院代號 I07

I. 基本資料 (Basic Date)

雇主: 黃棋石

|   |  |   |
|---|--|---|
| 姓名 : ARLI ANAH<br>Name                          | 性別 : <input type="checkbox"/> 男 Male <input checked="" type="checkbox"/> 女 Female<br>Sex |  |
| 護照號碼 : C4327191<br>Passport No.                 | 國籍 : 印尼<br>Nationality   |   |
| 居留證號 :<br>ARC No.                               | 出生年月日 : 24/JAN/1974<br>Date of Birth   |   |
| 工作縣市別 : 桃園市<br>City/County(Workplace in R.O.C.) | 聯絡電話 : (手機 Mobile Phone)<br>(住家 Home Phone)02-27648877<br>Phone No.                      |   |



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

II. 病史 (Medical History)

曾罹患的疾病 Prior illnesses : 無 有

III. 身體檢查 (Physical Examination)

|                                       |                              |  |
|---------------------------------------|------------------------------|--|
| A. 身高 : 157.7 公分 cms                  | G. 頭頸部 (Head and neck)       | <input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal |
| B. 體重 : 70.2 公斤 kgs                   | H. 胸部 (Thorax)               | <input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal |
| C. 血壓 : 130/87 毫米汞柱 mmHg              | I. 心臟聽診 (Heart auscultation) | <input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal |
| D. 脈搏 : 79 次/分 beats/min              | J. 腹部 (Abdomen)              | <input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal |
| E. 體溫 : 36.5 C                        | K. 體肢運動 (Locomotion)         | <input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal |
| F. 視力 右 1.0 左 1.2 (Vision) Right Left | L. 精神狀態 (Mental status)      | <input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal |
|                                       | M. 其他 Others                 |  |

IV. 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):  
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 \_\_\_\_\_  
b. TPHA/TPPA FTA-abs TPLA EIA CIA  
陽性 / Positive, 效價 / Titers 陰性 / Negative, 效價 / Titers \_\_\_\_\_  
c. other \_\_\_\_\_ 陽性 / Positive, 效價 / Titers \_\_\_\_\_  
陰性 / Negative, 效價 / Titers \_\_\_\_\_  
判定(Result): 合格(Passed) 不合格(Failed)

#### IV. 實驗室檢查 (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)
- 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) 陽性 (Positive) 陰性 (Negative) 未確定 (Equivocal)  
德國麻疹抗體 (Rubella Antibody) 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)

#### V. 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 :)



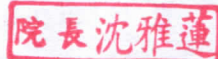
負責醫師簽章

(Signature of Chief Physician :)



醫院負責人簽章

(Signature of Superintendent :)



應注意事項:

日期 (Date) : (2021/05/14) (YYYY/MM/DD) ※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.