

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

檢查日期 2022/02/23

(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 00223-60106

病歷號 98375448

入境日: 2019/09/16

仲介: 京兆賢

雇主: 張欣樺

30M



醫院代號 I07

I. 基本資料 (Basic Date)

姓名 : MU AROFAH ALVIATUL
Name

性別 : 男 Male 女 Female
Sex

護照號碼 : C5695637
Passport No.

國籍 : 印尼
Nationality

居留證號 :
ARC No.

出生年月日 : 22/JUL/1994
Date of Birth

工作縣市別 : 新北市
City/County(Workplace in R.O.C.)

聯絡電話 : (手機 Mobile Phone) 02-27648877
Phone No. (住家 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

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 : 157.9 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 : 55 公斤 kgs	H. 胸部 (Thorax)	<input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal
C. 血壓 : 138/77 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 : 76 次/分 beats/min	J. 腹部 (Abdomen)	<input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal
E. 體溫 : 36.3 °C	K. 體肢運動 (Locomotion)	<input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal
F. 視力 右 2.0 左 0.9	L. 精神狀態 (Mental status)	<input checked="" type="checkbox"/> 正常 Normal <input type="checkbox"/> 異常 Abnormal
(Vision) Right Left	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)

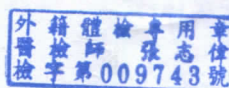
V. 漢生病檢查 (Examination for Hansen's disease)

- 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):

院長沈雅蓮

合格

應注意事項:

日期 (Date): (2022/03/01) (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.