

# 受聘僱外國人健康檢查項目表

Health Certificate for Employed Aliens 類別Category ■第二類Category 2 Alien | 第三類Category 3 Alien 雇主: 陳薏文

仲介: 京兆賢

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Taiwan R.O.C

TEL: (03)4941234#8759 Fax: (03)2831288

Date of Examination

序號:202310251670

檢查日期:

2023/10/25

#### 基本資料/Basic Data

姓 名(Name): DESI FELANI	性別Sex:□男/M ■女/F	
護照號碼(Passport No.): E2264502	國籍(Nationality): 印尼	James .
居留證號(ARC No.):	出生年月日 (Date of Birth): 1986/05/06	100 10
工作縣市別City/County(Workplace in R.O.C.): 新北市	手機:(Mobile Phone): 住家:(Home Phone):	
在中華民國健檢種類/ Type of health examination o 定期6個月 / Periodic (6 months)	done in the Republic of China (Taiwan)	

#### 病 史/ Medical History

曾罹患的疾病Prior illnesses:

## 身體檢查/Physical Examination

身高( <b>Height</b> ): 164.2 公分(cms)	頭頸部(Head and neck): ■正常Normal□異常Abnormal
體重(Weight): 76.7 公斤(kgs)	胸部(Thorax): ■正常Normal□異常Abnormal
血壓(Blood/pressure):129/81 毫米汞柱mmHg	心臟聽診(Heart auscultation): ■正常Normal □異常Abnormal
脈搏(Pulse): 95 次/分beats/min	腹部(Abdomen): ■正常Normal□異常Abnormal
體溫(Body temperature): 35.9 ℃	體肢運動(Locomotion): ■正常Normal□異常Abnormal
視力(Vision): 裸視(Vision): 右 Right 1.0 左 left 1.0 矯正(Corrected):	精神狀態(Mental status): ■正常Normal□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): 無異常發現
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 □ Bt. □ TPHA ■ TPPA □ FTA-abs □ TPLA □ EIA □ CIA
□陽性/Positive,效價/Titers ■陰性/Negative,效價/Titers 1:80X(-)
c. other
判定(Result): ■ 会核(Passed) □ 不会核(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(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 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 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( <u>Rubella Vaccination Certificate</u> ) 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、補充健檢或曾依受聘僱外國人健康檢查管理辦法辦理本項檢查且結果合格者得免驗/		
Not required for health examination performed within 3 days of arrival, for periodic or supplementary health examination, or workers who have passed this examination under the Regulations Governing Management of the Health Examination of Employed Aliens		
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(Results): '■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		
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)    This is a signature of the signature		
負責醫師簽章 (Signature of Chief Physician ) : (Name & Signature)		
醫院負責人簽章 (Signature of Superintendent)		
日期(Date):2023/11/01 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、境內聘僱健檢、定期健檢及補充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 health examination performed within 3 days of arrival, for employment in the territory of the ROC, or periodic or supplementary 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:		
入國後3⊣內健檢、境內聘僱健檢、定期健檢及補充健檢之健康檢查證明之正本應由受聘僱外國人本人留存。The original copy of		
入國後3日內健檢、境內聘僱健檢、定期健檢及補充健檢之健康檢查證明之正本應由受聘僱外國人本人留存。The original copy of the health certificate of the health examination performed within 3 days of arrival, for employment in the territory of the ROC, or periodic		