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

Saint Paul's Hospital

b. TPHA/TPPA FTA-abs TPLA EIA CIA

C. _other _

□陽性 / Positive, 效價 / Titers ■ 陰性 / Negative, 效價 / Titers _

判定(Result): ■合格(Passed) □不合格(Failed)

□ 陽性 / Positive, 效價 / Titers _____

□ 陰性 / Negative · 效價 / Titers _

检查日期 2024/07/01 (YYYY)(MM)(DD)Date of Examination

330049 桃園市建新街 123 號 號 03 951 3141 傳真:03-3773373 123, Jianxin St., Taoyuan D. Taoyuan Caty 330049, Taiwan (R.O.C)

流水編號 00701-60006

病歷號 98425417

院

	http://www.s	Provide the Second	入境日	: 2024/06/28
醫院代號 I07 ■ 第二類 Cat	egory 2	類 Category 3 Al	ien 仲介:	京兆賢
I. 基 本 資 料			雇主:禁-	
姓名 . BASCO DIVINA M Name · VILLARUZ 護照號碼 : P6796481 Passport No. 居留證號 : ARC No. 工作縣市別: 桃園市 City/County(Workplace in R.O.	Sex B 國籍 Nation 出生年 Date of	月日: 04/MAR/1970 : Birth: (手機 Mobile Phone) : (在家 Home Phone)02-2		
在中華民國健檢種類 Type o			OF CHANGE	*/*/
■入國後3日內 Within 3 d □補充 supplementary □	ays of arrival	□境內聘僱 Employment in	the territor	of the ROC
	State of the state	47) Ferrodic(0, 10, 50 mo	iitiis)	
II. 病 史 (Medical				
曾罹患的疾病 Prior illne	MARIN WALLS	有		
III. 身 體 檢	查 (Physical)	Examination)		
A. 身高 : 154.8 (Height)	公分 cms	G. 頭頸部 (Head and neck)	■正常 Normal	□異常 Abnorma
B. 體重 (Weight) : 61.3	公斤 kgs	H. 胸部 (Thorax)	■正常 Normal	□異常 Abnorma
C. 血壓 : 135/83 (Blood Pressure)	毫米汞柱 mmHg	I. 心臟聽診 - (Heart auscultation)	■正常 Normal	□異常 Abnorma
D. 脈搏 : 89 (Pulse)	次/分 beats/min	J. 腹部 (Abdomen)	■正常 Normal	□異常 Abnorma
E.體溫 : 36.3 (Body temperature)	.C	K. 體肢運動 (Locomotion)	■正常 Normal	□異常 Abnorma
F. 視力 右 1.0 (Vision) Right	左 1.2 Left	L. 精神狀態 (Mental status) M. 其他 Others	■正常 Normal	□異常 Abnorma
IV. 實 驗 室 檢	本 (Labora	ntory Examinations)		
11. 頁 敬 重 敬	E (Labor 6	reory Examinations /		
A. 胸部 X 光肺結核檢查 (Che X 光發現(Findings): 無明 判定(Result): ■合格(Passed) □疑似 B. 梅毒血清檢查 (Serologic 檢驗(Tests):	肺結核(TB suspe	ect) □無法確認診斷(Pend	ling) □不合析	\$(Failed)
	/ Positive, 新僧	/ Titers ■ 陰性 / Neg	ative,效價 /	Titers

V. 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)人芽囊原蟲 □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(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 periodicor supplementary health examination, or workers who have passed this examination under the Regulations Governing Management of the Health Examination of Employed Aliens				
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) □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: (Signature of Chief Medical Technologist:) 負責醫師簽章: (Signature of Chief Physician:) 警院負責人簽章: (Signature of Superintendent:) 「院長沈雅蓮				
應注意事項:				

日期(Date):(2024/07/05)(YYYY/MM/DD) ※本證明三個月內有效 (The certificate is valid for three months.)

提醒一/Notice 1:人國後 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 thehealth 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.