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

聖 保 祿 醫 Saint Paul's Hospital

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http://www.sph.org.lw

傳真103+3773373

檢查日期 2021/09/08 (YYYY)(MM)(DD) Date of Examination

流水編號 00908-60192 病歷號 98367536

入境日: 2020/03/26 -

仲介:京兆賢

18M

醫院代號 I07

I. 基 本 資 #

(Basic Date)

院

雇主:彭嘉瑋 レ

CASINOVA NORMALYN EBOJO 姓名 性别 :□男 Male ■女 Female Name Sex 護照號碼 國籍 S_19054619 : P7119566A 菲律賓 Passport No. Nationality 居留證號 出生年月日 08/SEP/1982 ARC No. Date of Birth : (手機 Mobile Phone) 工作縣市別: 新北市 聯絡電話 (住家 Home Phone)02-27648877 City/County(Workplace in R.O.C.) Phone No.

在中華民國健檢種類 Type of health examination don □入國後 3 日內 Within 3 days of arrival ■ 定期(□元本 1 元 2 元 3 元 3 元 3 元 3 元 3 元 3 元 3 元 3 元 3	e in the Republic of China (Tajwan):
□ 補充 supplementary	6、18、30個月)Periodisco, 18, 30 months)

II. 病 史 (Medical History)

曾罹患的疾病 Prior ill	nesses: 無]有		
III. 身 體 檢	查 (Physical l	Examination)		Section
A. 身高 (Height) : 156.1	公分 cms	G. 頭頸部 (Head and neck)	■正常 Normal	□異常 Abnorma
B. 體重 (Weight) : 80	公斤 kgs	H. 胸部 (Thorax)	■正常 Normal	□異常 Abnorma
C. 血壓 : 156/92 (Blood Pressure)	毫米汞柱 mmHg	I.心臟聽診 (Heart auscultation)	■正常 Normal	□異常 Abnorma
D. 脈搏 : 69 (Pulse)	次/分 beats/min	J. 腹部 (Abdomen)	■正常 Normal	□異常 Abnormal
E.體溫 : 36.7 (Body temperature)	.C	K. 體肢運動 (Locomotion)	■正常 Normal	□異常 Abnormal
F. 視力 右 1.5 (Vision) Right	左 2.0 Left	L. 精神狀態 (Mental status)	■正常 Normal	□異常 Abnormal
		M. 其他 Others		

IV. 實驗室檢查(Laboratory Examinations)

Α.	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)
В.	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)

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) 〇有 (Yes) 〇無 (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.				
貝頁醫檢師食早 (Signature of Chief Medical Technologist:) : 機合師 張志住 檢字第009743號				
自 青 醫 師 簽 章				
負責醫師簽草 (Signature of Chief Physician:) · · · · · · · · · · · · · · · · · · ·				
<u> </u>				
醫院負責人簽章 (Signature of Superintendent:) : 院長沈雅蓮				
(Signature of Superintendent:) :				
應注意事項: 血壓偏高請至心臟內科門診追蹤				
日期(Date):(2021/09/13)(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"				

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.

查 (Laboratory Examinations)