

醫院代號: H04

編號: 16713

工號:

仲介: 京兆賢

廠商: 蘇佳莉 1

類別 Category 第二類 Category 2 Alien 第三類 Category 3 Alien

天主教耕莘醫療財團法人耕莘醫院

輔仁大學附屬醫院第一教學醫院

地址: 中華民國新北市新店區中正路362號

Address: 362, Zhongzheng Rd., Xindian Dist., New Taipei City, Taiwan (R.O.C.)

電話(TEL): (02)22193300 傳真(FAX): (02)22191361

受聘僱外國人健康檢查項目表

Health Certificate for Employed Aliens

檢查日期 2023/4/20

Date of Examination

BAYATO CHERRY ANN DEVELERES 資料 / Basic Data

姓名: _____ 性別: 男/M 女/F
 Name: _____ Sex: _____
 護照號碼: P9990940A 國籍: 菲律賓 入境日: 2022/11/10
 Passport No.: _____ Nationality: _____
 居留證號: A900566117 出生年月日: 1992/7/6
 ARC No.: _____ Date of Birth: _____
 工作縣市別: _____ 手機: 2708-4588
 City/County: 台北市 (Mobile Phone)
 (Workplace in R.O.C.): _____ (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 境內聘僱 / Employment in the territory of the ROC
 補充 / supplementary 定期 (6、18、30 個月) / Periodic (6, 18, 30 months)

病史 / Medical History

曾罹患的疾病 / Prior illnesses: 無

身體檢查 / Physical Examination

身高 / Height: 149.1 cms 頭頸部 / Head and neck: 正常 / Normal 異常 / Abnormal
 體重 / Weight: 48.2 kgs 胸部 / Thorax: 正常 / Normal 異常 / Abnormal
 血壓 / Blood pressure: 128 / 77 mmHg 心臟聽診 / Heart auscultation: 正常 / Normal 異常 / Abnormal
 脈搏 / Pulse: 96 beats/min 腹部 / Abdomen: 正常 / Normal 異常 / Abnormal
 體溫 / Body temperature: 36.7 °C 體肢運動 / Locomotion: 正常 / Normal 異常 / Abnormal
 視力 / Vision: 右 / Right 2.0 左 / Left 2.0 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: 無明顯異常

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 0.07

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

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. 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 and 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 / 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

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 : _____

日期 / Date : 2023/4/27

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 examination 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 or supplementary health examination should be kept by the person who undertook the health examination.

林恒毅

合格

