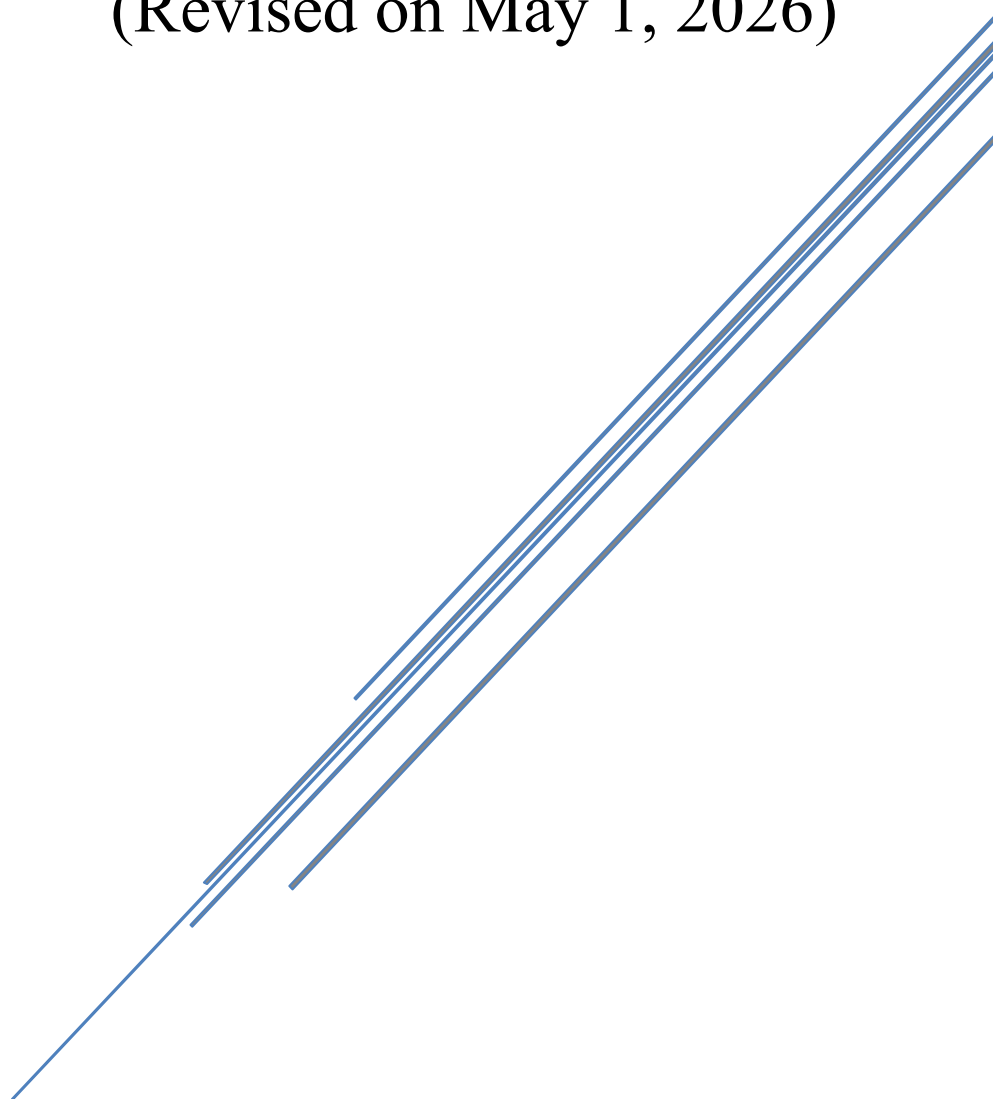


Medical Examination Manual for Training

Released Version
(Revised on May 1, 2026)



Japan Institute for Health Security
Bureau of Global Health Cooperation
Infection Prevention and Control (IPC)

I. Purpose of Medical Examinations

Japan Institute for Health Security (JIHS) holds training programs in Japan for medical professionals from around the country and the world. As a training organizer, JIHS needs to check the health of participants and ensure safe and smooth training. In addition to monitoring the health of participants, JIHS must guarantee the safety of patients and pregnant women in the healthcare facilities where including patient contact takes place. In particular, precautions must be taken to prevent international participants from spreading measles and active tuberculosis (TB) in Japanese hospitals. In Japan, those who want to participate in hospital tours and including patient contact are usually requested to submit their measles, mumps, rubella and varicella antibody test results, vaccination status, and chest X-rays in advance, but it is often difficult for participants from low- or middle-income countries to meet such requirements.

Therefore, this Manual has been developed by JIHS's Bureau of Global Health Cooperation, Disease Control and Prevention Center (DCC), and Infection Prevention and Control (IPC) team to outline the procedures that are acceptable to both training participants and facilities and effective in ensuring safe and smooth training without unnecessary restrictions on participation.

II. Applicable Training and Persons

- Applicable training

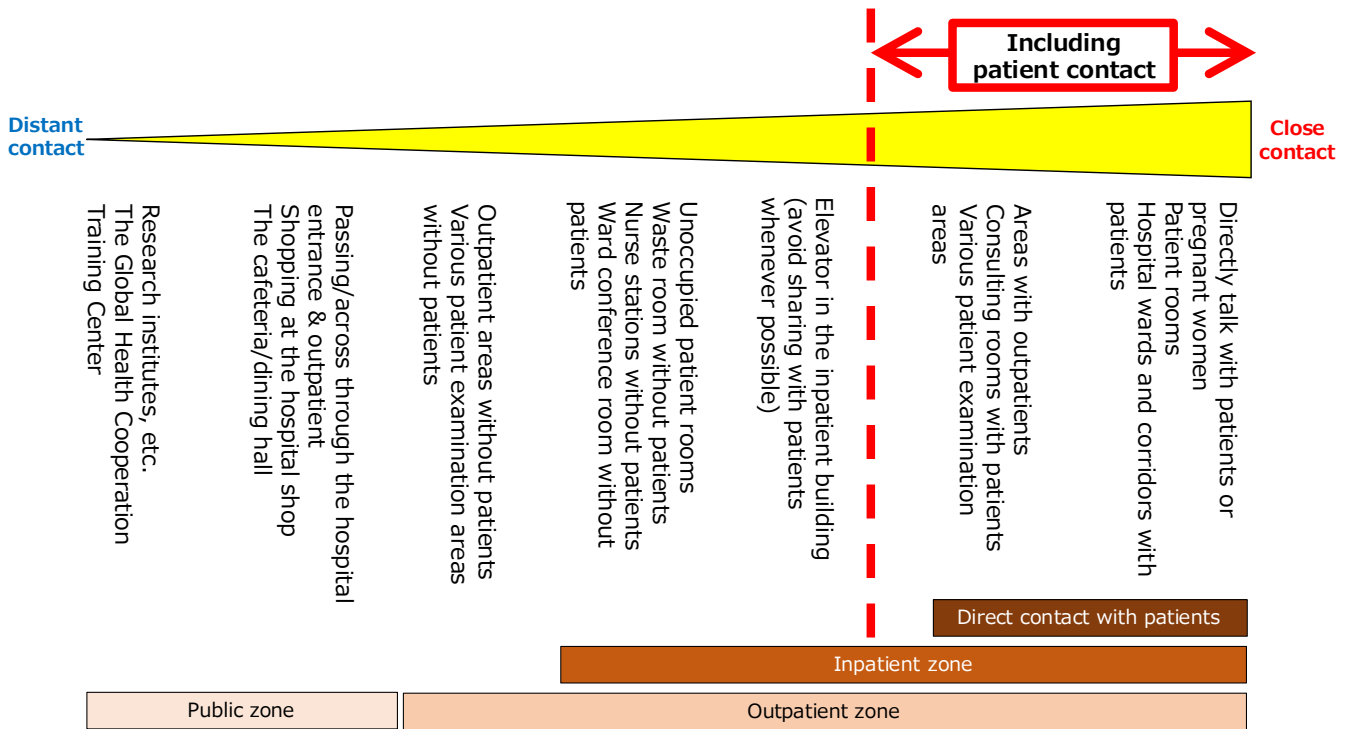
This Manual applies to the following training courses that accept participants from inside and outside of Japan:

1. All training courses **including patient contact**
(See Figure 1. Definition of including patient contact); and
2. Training courses not including patient contact and **lasting 30 days or more**.
(Required only for active TB screening)

- Definition of including patient contact

This definition of including patient contact is illustrated in Figure 1 with examples of training settings. While an indefinite number of exposures have taken place in outpatient zones, access to inpatient zones is limited to medical professionals and healthy family members and friends; therefore, for this manual, training courses that involve entering inpatient zones where patients are present are defined as training courses including patient contact. Any change to this definition under unavoidable circumstances must be discussed with the IPC team.

Figure 1. Definition of training courses, including patient contact



*Any shift of this line under unavoidable circumstances must be discussed with IPC

- Applicable persons

This Manual applies to all individuals who enter any of the areas specified in the definition of including patient contact, including participants from inside and outside of Japan, training attendants and other accompanying persons, training coordinators, and interpreters.

(For individuals living in Japan who have a history of staying overseas, a chest X-ray is not required if they have undergone a health checkup including a chest X-ray within the past 12 months.)

III. Details of Medical Examinations

1. **Symptom assessments (e.g., chronic cough and weight loss) and chest X-rays for active TB screening (Send X-ray digital data or films to Japan)**
2. **Measles, mumps, rubella, and varicella antibody test results or double vaccination certificates**

IV. Precautions for Medical Examinations

The domestic training manager should take the following precautions when preparing training sessions: confirm that each participant has consented to the matters.

1. Invitation to applications and consent acquisition

Clarify the requirement of medical examinations in the course information and application guidance and confirm that each applicant has consented to medical examinations (including antibody testing, vaccinations, and chest X-ray examinations) through the application process (Applications without consent cannot be processed). In addition, confirm that each applicant has consented that they may lose their eligibility to participate in training due to their health conditions.

2. Information on vaccines and antibody tests in participants' countries should be collected, including information on the availability of antibody testing and vaccines in participants' countries. Support can be requested from local training managers to find vaccination sites (ranging from public hospitals to private clinics for foreigners).

In low- or middle-income countries, vaccines are often available for foreigners at clinics and pharmacies. Therefore, helpful information may be collected from clinics for Japanese and other foreign residents.

It is not allowed to use vaccines personally imported from neighboring countries or Japan because they may cause side reactions that cannot be locally addressed.

3. Payments for antibody tests and vaccinations

Discuss with participants who will bear the costs of vaccinations and antibody tests, which are usually highly expensive.

4. Management of participants' personal information
Participants' medical examination results and other personal information should be handled with care to prevent their disclosure to unauthorized persons.
5. Timeline
Refer to the medical examination flowcharts and be sure to complete the process before the training session. Ensure the X-ray digital data / films are received in Japan no later than six weeks before the training session, and the measles, mumps, rubella, and varicella vaccination process starts at least six weeks before the training session (because these live vaccines should be administered in two doses at intervals of four weeks).
6. Communication with participants
The domestic training manager should keep close contact with participants to ensure they complete all the preparation before the training session. In particular, pay close attention to the vaccination schedule as the process is subject to errors, such as inappropriate simultaneous administration and intervals.
7. Health management during the training session
Check the body temperatures and health conditions of participants during the session. Any participant who develops a fever should be taken to a hospital and absent from training.

V. Medical Examination Procedures

1. Active TB screening

1) Submission of chest X-ray films

* Applicants must submit a digital copy in DICOM-PDI format or an original X-ray film taken within the past year (via DHL or other courier services). A chest X-ray examination report (e.g., a health checkup report) issued within the past year by a Japanese medical institution can be submitted as an alternative. The examination results should be submitted to the domestic training manager.

Applicants are not eligible to participate in the training course unless their X-ray film is received in Japan at least six weeks before the training session.

In principle, applicants must submit an X-ray film with their application form. Although

applicants with abnormal chest X-rays are generally screened out (because those suspected of active TB are not allowed to take flight), the decision should be made individually based on the X-ray analysis results. Moreover, in special cases where applicants have no access to X-ray scanning services in their countries, they should be supported (consulted on their behalf) to undergo X-ray examinations in Japan after they arrive. This support should not be offered to applicants who cannot undergo X-ray examinations due to personal reasons.

2) X-ray analysis procedures and handling of the analysis results

(i) Procedure for X-ray images to be taken outside of Japan and analyzed in Japan

(Medical Examination Flowchart 1-A)

The training administrator brings applicants' X-ray films to a medical institution in Japan for consultation and X-ray analysis on their behalf. A doctor at the medical institution in Japan is asked to fill in Appendix 2 based on the analysis results. The training administrator obtains approval from the IPC Director.

(ii) Procedure for X-ray images to be taken outside of Japan and analyzed at JIHS

(Medical Examination Flowchart 1-B)

The training administrator requests an outpatient receptionist to issue patient ID cards and capture applicants' X-ray images. After capturing the X-ray images, a radiologist (the chief of the diagnostic radiology division, a doctor-in-charge of the nuclear medicine division, or the director of the department) is requested to analyze the X-ray images, and the domestic training manager fills in Appendix 2 based on the analysis results. The completed Appendix 2 is submitted by the training administrator to the IPC Director to obtain approval.

(iii) Procedure for X-ray images to be taken at a medical institution in Japan (For applicants with no access to X-ray scanning services in their countries)

If X-ray images are taken at a **medical institution** in Japan, the results (e.g., analytical reports) should be submitted with Appendix 2 to the IPC Director to obtain approval.

3) Procedure to follow when abnormal shadow suspected of TB is observed in chest X-rays

(i) The domestic training manager informs the applicants (and sends a CC to the local training managers in their countries)

The applicants are informed of the following three points: 1. The applicants need to

submit additional materials to participate in training; 2. Without the additional materials, the applicants cannot enter Japan; and 3. Based on the additional materials, the training institution will decide whether to accept the applicants.

In addition, the applicants are asked whether the same abnormality was detected over six months ago or within the last six months (or for the first time).

(ii) The doctors in charge in their countries fill in the Medical Certification for TB Control (Appendix 4) based on the additional materials and examination results

The applicants must submit the following materials with comments as well as an X-ray film.

● If the same abnormality was detected over six months ago

- A) A chest X-ray film taken before (over six months ago)* (Dated)
- B) TB examinations (3 sputum smear tests + 3-week culture test or PCR test) (Dated)
- C) Other examinations (and CT films, if available): Add diagnostic evidence for the diagnosis of diseases other than TB)
- D) TB treatment history, if available (resume, time period, and treatment year)

* If the X-ray film attached to the application form was taken over six months ago, submit an X-ray film taken at the time of request (at present).

● If the abnormality was detected for the first time

*** In principle, it is advisable to give priority to detailed examinations and therefore postpone the visit to Japan.**

- A) If more than one month has passed since the last X-ray was taken, take another X-ray and submit it
- B) TB examinations (3 smear tests + 3-week culture test or PCR test) (Dated)
- C) IGRA or PPD (tuberculin reaction)
- D) If possible, take a CT scan and submit it
- E) TB treatment history, if available (resume, time period, and treatment year)

(iii) The IPC Director consults a TB specialist (a respiratory medicine doctor or infectious disease medicine doctor, if available) on the following options and makes a final decision within two days from the receipt of the additional materials

- Confirm eligibility for training in Japan (For applicants diagnosed as obsolete TB or other diseases)

- Determine eligibility for training in Japan based on additional examination results (For applicants suspected of TB)
- Cancel eligibility for training in Japan (For applicants highly and undeniably suspected of TB)

A notice of this decision should be sent to the training management team and signed in the footer of the page by the person in charge.

訪日研修の X 線画像データに関するお願い

国立健康危機管理研究機構における研修の参加者は、事前に X 線画像データを提出いただく必要があります。下記の要領で撮影したデータをご準備願います。

1. X 線撮影は DICOM(Digital Imaging and Communications in Medicine)を使用すること
2. IHE PDI(Portable Data for Imaging)準拠であること
3. DICOM タグ表示 (値) は、既存の DICOM 規格を利用すること
4. その他
 - ・ 1 メディアに 1 患者 ID とする
 - ・ 事前合意のない動画は同梱禁止とする
 - ・ 参加者氏名、提供元医療機関名などをメディア表面に記載すること

Request for X-ray digital data of a training course in Japan

Japan Institute for Health Security requests a participant who is planning to join a training course in Japan to submit X-ray digital data in advance. Please make sure that the data meets the specifications as follows.

1. X-ray photo should be taken by and stored in DICOM (Digital Imaging and Communications in Medicine) system.
2. The X-ray digital data should be applied to IHE PDI (Integrating the Healthcare Enterprise, Portable Data for Imaging).
3. DICOM Tag should be displayed in original setting.
4. Others
 - ・ One ID is subject to one participant in a data.
 - ・ Approval of the participant to submit his/her data should be obtained in advance.
 - ・ The name of the participant and the hospital should be displayed clearly.

Tag	Attribute Name (属性名)
(0010 , 0010)	Patient's Name (患者氏名)
(0010 , 0020)	Patient ID (患者識別子)
(0010 , 0030)	Patient's Birth Date (患者生年月日)

※ Patient = Participant

2. Submission of two dose immunizations certificates or antibody test results of the measles, mumps rubella and varicella

1) If the participant can submit vaccination certificates (administered in two doses at intervals of four weeks) (Medical Examination Flowchart 2-A)

The participant should submit one of the following documents as proof of vaccinations: Form A2; vaccination certificates issued by a medical institution in the participant's country; or vaccination records, such as a maternal and child health handbook. Neither the participant's recollection of vaccinations nor medical history can be considered as an alternative. Any obvious error (e.g., stating that the participant has been administered vaccines not available in their country) should be questioned with the participant.

2) If participants will receive two doses of the measles, mumps, rubella, and varicella vaccines (If the participant requires two doses of vaccines as shown in the Medical Examination Flowchart 2-B)

- The participant needs to receive two doses at least four weeks apart (at a minimum interval of 27 days) and submit proof of these vaccinations no later than a week before the training session
- The participant must submit one of the following as proof of vaccinations: Form A2; vaccination certificates issued by a medical institution in the participant's country; or a maternal and child health handbook (the participant's recollection of vaccinations cannot be considered as an alternative)
- Vaccination cards without lot numbers are acceptable, though it is desirable that lot numbers are stated.
- Because they are live vaccines, the schedule should be made taking into account that the first and second doses must be administered at intervals of at least four weeks (at a minimum interval of 27 days)
- Participants who cannot receive live vaccines due to pregnancy, immunodeficiencies, or allergies should be consulted and supported individually
- After the second dose, the vaccination certificate should be submitted to the domestic training manager.

3) If the participant can only receive one dose (cannot receive two doses) in their country
(If the participant requires **two doses** of vaccines: (iv) **If the participant can only receive one dose in their country** as shown in the Medical Examination Flowchart 2-B)

- Participants who have received the first dose in their countries at least 28 days before the training session may receive the second dose at a medical institution in Japan after they arrive. However, they cannot attend the training course, including patient contact, for six days after the second dose.
- In this case, the domestic training manager should consult a medical institution in Japan (on behalf of the participant) in advance (before they arrive in Japan), discuss the past vaccination history and the vaccination schedule after arrival in Japan, and make an appointment for vaccination.
- After the second dose, the vaccination certificate should be submitted to the domestic training manager.

4) If the participant has no access to vaccines in their country (If the participant requires **one dose** of vaccines: (ii) **If the participant cannot get vaccinated in their country** as shown in the Medical Examination Flowchart 2-B)

The local training managers should make all possible efforts to help participants get vaccinated (e.g., finding vaccination sites, including clinics for foreigners). Participants who cannot receive any doses in their countries are taken to a medical institution in Japan after they arrive to undergo antibody tests to determine whether they can attend the training course, including patient contact.

So far, it has been found that people in some countries can only access the MMR vaccine and cannot access the varicella vaccine. Although all participants should acquire immunity to varicella as well as measles, mumps, and rubella, some participants who cannot access varicella vaccine in their countries, no matter how much they try, may follow the following steps as exceptions.

< If the participant can be vaccinated against measles, mumps, and rubella but not against varicella:

EXCEPTIONS >

The participant should be given **a varicella antibody test and vaccination simultaneously after arriving** in Japan. The participant should follow one of the following steps, depending on the test results:

- Tested above the threshold: Allowed to attend, including patient contact after the test results are confirmed
- Tested weak positive: Allowed to attend, including patient contact seven days after the vaccination
- Tested negative: Allowed to attend, including patient contact seven days after the vaccination (Enhanced health monitoring). During the training session, the participant is subject to close monitoring to check for fever and rashes.
- The participants attending, including patient contact, **should, in principle, meet the requirements for varicella antibody testing and vaccination as outlined in this manual (This is strongly recommended if the participant is in their 20s or 30s).**
- Participants with extremely limited access to vaccination and/or antibody testing may exceptionally be **given varicella vaccine immediately after arriving in Japan and allowed to attend, including patient contact, seven days after the vaccination.**

5) In the case of submission of measles, mumps, rubella, and varicella antibody test results (Medical Examination Flowcharts 2-A and 2-B)

The participant must undergo the antibody tests in their country.

Table 1. Thresholds for antibody positivity

	PLACE	POSITIVE	WEAK POSITIVE
Measles	Japan	EIA method (IgG) ≥ 16 FIA method ≥ 1.5 AI NT method $\geq 1:8$	2 to < 16 0.4 to < 1.5 AI 1:4
	Outside Japan*	IgG ≥ 0.72 IU/mL (720 mIU/mL)	Positive (non-IU units) Equivocal
Mumps	Japan	EIA method (IgG) $4 \geq$ FIA method 1.3 AI \geq	2 to < 4 0.7 to < 1.3 AI
	Outside Japan*	IgG Positive	Equivocal
Rubella	Japan	EIA method (IgG) $8 \geq$ HI method $1:32 \geq$ FIA method 3.0 AI \geq <Other methods**> Determined by data	2 to < 8 1:8 to $< 1:16$ 1.0 to < 3.0 AI <Other methods**> Determined by data
	Outside Japan*	IgG 18.4 IU/mL \geq	Positive (non-IU units) Equivocal
Varicella	Japan	EIA method (IgG) $4 \geq$ IAHA method $1:4 \geq$ NT method $1:4 \geq$ FIA method 0.5 AI \geq	2 to < 4 1:2 1:2 0.3 to < 0.5 AI
	Outside Japan*	IgG Positive	Equivocal

*Any testing method

**LTI method, CLEIA method, FIA method (International Units), CLIA method, ELFA method

(i) If the participant has tested **positive**

Participants who have tested positive above the thresholds using the methods specified in Table 1 are allowed to attend the training course, including patient contact, on the condition that they submit Appendix 2 with the test results.

(ii) If the participant has tested **weak positive** (If the participant requires **one dose** of vaccines as shown in the Medical Examination Flowchart 2-B)

The thresholds set out in this Manual are higher than the commonly used thresholds for antibody positivity (established by the Japanese Society for Infection Prevention and Control). Therefore, some participants who tested positive may have antibody levels

below the thresholds set out in this manual.

These participants should be considered weak positive and **allowed to attend the training course, including patient contact, on the condition that they receive one dose of vaccines.**

(iii) If the participant has tested **negative** (If the participant requires **two doses** of vaccines as shown in the Medical Examination Flowchart 2-B)

Participants with negative antibody results are allowed to attend the training course, including patient contact, **on the condition that they receive two doses of vaccines.**

Participants who have tested negative using methods other than those specified are also allowed to attend the training course, including patient contact, on the condition that they receive two doses of vaccines.

Even though all the required vaccines can be co-administered, the second dose should be administered four weeks after the first dose (at an interval of 27 days) because they are live vaccines.

(iv) In Japan, if an inspection is conducted using a method other than the one specified in this manual, determined by data.

3. Acute Respiratory Infection (ARI) contact tracing information

Participants must fill in and submit Form A3 (ARI risk assessment) to the domestic training manager before the training course.

- (i) Comply with the hospital's infection control and prevention requirements (wear a mask in the hospital)
- (ii) Participants who have marked symptoms should consult an infectious disease physician and undergo an examination.

VI. Documents to Be Submitted

The following documents will be submitted to the IPC team through the training course director, considering your training period and whether or not it includes patient contact.

< Documents to be submitted >

1. Medical History (Form A1 or Appendix 1)

Participants should fill in the Medical History form, either in English (Form A1) or Japanese (Appendix 1), and submit it to the domestic training manager through the local training managers in their countries before arrival in Japan (Equivalent medical history forms can be used as an alternative).

2. Test Report / Clinical Training Attendance Permit (Appendix 2)

The Test Report form should be completed and accompanied by a chest X-ray analysis report and vaccination certificates or antibody test results. After confirming the results, the IPC Director determines whether the participant can attend the training session and signs the Including Patient Contact Attendance Permit.

3. Test Certificate / Permit (Appendix 3)

This form is used for participants who undergo medical examinations at JIHS. A travel clinic doctor should fill in Appendix 3 and hand it over to the domestic training manager or training administrator. It is noted that the certificate fees are charged on the date of issuance.

4. ARI risk assessment (A3)

The ARI risk assessment form should be completed by each participant and confirmed by the domestic training manager before the training course.

If any of the symptoms are marked, immediately should consult an infectious disease physician and undergo an examination.

If the participant has no symptoms or close contact with someone infected with ARI, the form does not need to be signed.

Table 2. Medical certificates and test results are to be submitted depending on the training content

Document	Document prepared by	Deadline	* Not including patient contact			* Including patient contact
			Less than 1 day	2-29 days	30 days or more	
(i) Medical History (Form A1)	Participant	Before arrival in Japan	No	Required	Required	Required
DICOM or Chest X-ray film (ii) Test Report / including patient contact training attendance Permit (Form 2)	(ii) Domestic training manager / Japanese medical institution	Before arrival in Japan	No	No	Required	Required
(iii) Test Certificate / Permit (Appendix 3)	Domestic training manager / IPC Director in JIHS	After arrival in Japan	No	No	Required	Required
(iv) ARI risk assessment (Form A3)	Participant	After arrival in Japan	No	No	No	Required

Sample

Japan Institute for Health Security (JIHS)
1-21-1, Toyama Shinjuku-ku, Tokyo 162-8655 Japan
Tel : 81-3-3202-7181 Fax : 81-3-3205-7860



The Chest X-ray and Immunization Requirements

Date 日付

Dear _____,

Japan Institute for Health Security (JIHS) welcomes practicing healthcare professionals in _____ プログラム名 _____ including clinical observership at our affiliated and training hospitals.

To protect you and our patient's health to be in compliance with immunization practices, JIHS REQUIRES well as evaluation for tuberculosis as the proof of two doses of vaccination or immunity to measles, mumps, rubella, and varicella PRIOR to the program begins.

All participants must submit all the necessary documents listed below to the program leader for your training course.

The participant of training courses involving patient contact are required to submit:

1. **A digital copy in DICOM-PDI format or original X-ray film taken within the past year (via DHL or other courier services)**
2. **Proof of the following two doses of MMRV (measles, mumps, rubella, and varicella) vaccines* and/or antibody titers** of measles, mumps, rubella, and varicella.**

* The second dose of vaccine is allowed at any time as long as it is at least 28 days after the first dose.

** Required antibody titers (Any testing method)

	POSITIVE	WEAK POSITIVE
Measles	IgG \geq 0.72 IU/mL (720 mIU/mL)	Positive (non-IU units) Equivocal
Mumps	IgG Positive	Equivocal
Rubella	IgG 18.4 IU/mL \geq	Positive (non-IU units) Equivocal
Varicella	IgG Positive	Equivocal

Please be advised that this application applies to observational activity only. If you have questions or need further information, please get in touch with the program leader for your training course at XXXXX@jihs.go.jp or +81 (3)3202-7181

Kind regards,

Norihiro KOKUDO, MD, PhD.
President,
Japan Institute for Health Security (JIHS)

(A1)

研修参加者が記載⇒現地責任者⇒コースリーダー

Medical History

1. Present Medical Condition

- (a) Do you currently use any medicine or have regular medical checkup by a physician for your illness? No Yes

If yes, please answer the questions below.

What is the name of illness? [_____]

What is the name of medicine? [_____]

If yes, please attach your doctor's letter (preferably, written in English) that describes current status of your illness and agreement to join the program.

- (b) Are you pregnant?

No Yes :gestation weeks[_____] weeks]

- (c) Are you allergic to any medication of food?

No Yes: Please specify[_____]

- (d) Do you have a cough for more than 2 weeks?

No Yes: **How long ?** [_____]weeks

- (e) Are you losing the weight?

No Yes: [_____] kg in [_____] month

2. Past History

- (a) Have you had any significant or serious illness?

No Yes: Please specify[_____]

- (b) Have you ever been a patient in a mental clinic or been treated by a psychiatrist?

No Yes: Please specify[_____]

3. Other medical problems

If you have any other medical problems, please indicate below

I certify that I have read the above instructions and answered all questions truthfully and completely to the best of my knowledge. I understand and accept that medical conditions resulting from an undisclosed pre-existing condition may not be financially compensated by NCGM and may result in termination to the program.

Date _____

Print Name _____

Signature _____

(A2)

ワクチンや検体検査を行った現地医師が記載⇒現地責任者⇒コースリーダー

Medical Certificate

Name _____ Sex Male / Female

Date of Birth (DD/MM/YY) ____ / ____ / ____ Age ____

Nationality _____

i) Immunization records

	1st dose	2nd dose
Measles	Date: (DD/MM/YY) Lot No: <input type="checkbox"/> Unknown/Not done	Date: (DD/MM/YY) Lot No: <input type="checkbox"/> Unknown/Not done
Mumps	Date: (DD/MM/YY) Lot No: <input type="checkbox"/> Unknown/Not done	Date: (DD/MM/YY) Lot No: <input type="checkbox"/> Unknown/Not done
Rubella	Date: (DD/MM/YY) Lot No: <input type="checkbox"/> Unknown/Not done	Date: (DD/MM/YY) Lot No: <input type="checkbox"/> Unknown/Not done
Varicella	Date: (DD/MM/YY) Lot No: <input type="checkbox"/> Unknown/Not done	Date: (DD/MM/YY) Lot No: <input type="checkbox"/> Unknown/Not done

ii) Antibody titer (Data attached) Date: ____ / ____ / ____ (DD/MM/YY)

	Antibody titer	Unit	Measuring Methods
Measles IgG			EIA(ELISA)・PA・NT・Others()
Mumps IgG			EIA(ELISA) ・Others()
Rubella IgG			EIA(ELISA)・HI・Others()
Varicella IgG			EIA(ELISA)・IAHA・Others()

Date ____ / ____ / ____ (DD/MM/YY)

Examining medical practitioner;

Name _____

Name of facility _____

Address _____

(A3)

研修参加者が記載⇒現地責任者⇒コースリーダー

Acute Respiratory Infection (ARI) risk assessment

Name _____ Male _____ Female _____

Age _____ Date of Birth _____

Nationality _____

Please check all that apply	Morbidity risk	When was the last time you had that opportunity? (DD/MM/YY)
<input type="checkbox"/> No <input type="checkbox"/> Yes	Did you have contact with an ARI patient or a highly suspected ARI patient without protection in the last week?	

Please describe symptoms you have had within the past 10 days.

Please check all that apply	Symptoms	Duration (DD/MM/YY)	Have you sought medical attention for this symptom?
<input type="checkbox"/> No <input type="checkbox"/> Yes	Fever >=37.0°C	Start: Improved: <input type="checkbox"/> ongoing	<input type="checkbox"/> Yes Diagnosis () <input type="checkbox"/> No
<input type="checkbox"/> No <input type="checkbox"/> Yes	Respiratory symptoms Including cough, phlegm, sore throat etc.	Start: Improved: <input type="checkbox"/> ongoing	<input type="checkbox"/> Yes Diagnosis () <input type="checkbox"/> No
<input type="checkbox"/> No <input type="checkbox"/> Yes	altered sense of taste and/or smell	Start: Improved: <input type="checkbox"/> ongoing	<input type="checkbox"/> Yes Diagnosis () <input type="checkbox"/> No

----- (for IPC Dr. use) -----

(上記で Yes があった場合に記載)

() 検査： 抗原 RT-PCR 未実施 結果：陽性 陰性 保留

上記の研修生について、医学的根拠に基づき下記を判断した。

- 特に問題はないため、本日以降の研修は可能である。
- 診断名 () の濃厚接触者であり、____月____日より患者接触を伴う研修が可能である。
- 症状改善後 24 時間経過したら患者接触を伴う研修への復帰が可能である。
- その他 ()

年 月 日

国立健康危機管理研究機構 (JIHS) 総合感染症科

診断医師 (自署)