

## ■ Consultation with a public health nurse required

By appointments only. Please make a reservation with the health service center you wish to visit.

(Reception time: 9:00~17:00) Please have the consultation as soon as possible.

\* Please be aware that health guidance may not be available on certain days.

Hongo Health Service Center	Tel: 03-5841-2579 E-mail: hoken-kanri-hongo.adm [at sign] gs.mail.u-tokyo.ac.jp
Komaba Health Service Center	Tel: 03-5454-6166 E-mail: hoken-kanri-komaba.adm [at sign] gs.mail.u-tokyo.ac.jp
Kashiwa Health Service Center	Tel: 04-7136-3040 E-mail: hoken-kanri-kashiwa.adm [at sign] gs.mail.u-tokyo.ac.jp

## ■ Consultation with a doctor required

**Make sure to print and take your Health Check-up Results** when consulting a doctor.

Please have the medical examination as soon as possible.

Following the consultation, please print and complete the “response form” below and bring it to the health service center on your campus.

- ECG:** A letter of introduction (JPY 300) can be provided.  
Come to the health care room of the health center.

- Chest X-ray:** **Please contact the health center beforehand.**

\* For those whose ‘Details’ of Result of Chest X ray column of the medical checkup result reads “#1”  
Please contact the health center where you received medical check-up and consult its internal medicine doctor.

\* For those whose ‘Details’ of Result of Chest X ray column of the medical checkup result reads “#2” or “#3”

A letter of introduction (300 yen) and digital data of your X-ray (500 yen) can be provided.

\* For those with “#2”, please visit a hospital with a department of respiratory medicine for further examinations.

\* For those with “#3”, please visit a hospital with a cardiology department for further examinations.

<b>If you consult a doctor from a medical institution other than the Health Service Center</b>	
If you consult a doctor from a medical institution other than the Health Service Center, please print, complete the “response form” below and bring in person to the health service center on your campus.	
<b>If you wish to be examined at the Health Service Center</b>	
<b>【Internal Medicine Dept. at the Health Service Center】</b>	
(Opening times: weekdays from 10:00 a.m. to 12:20 p.m., and from 2:00 p.m. to 3:45 p.m.)	
○As consultations are not by appointment, you may be required to wait before your consultation. Also, there are no set dates for consultations; please check the Health Service Center website for dates when there are no consultations.	
○If an abnormal value in "Uric protein," "Urinal sugar" or "Uric blood" has been reported: Please obtain a container for urinalysis from the health center beforehand, and collect a urine sample first thing on the morning of the day of your visit.	
○If an abnormal value in "glucose," "Urinal sugar" "triglycerides," "HDL cholesterol," or "LDL cholesterol" has been reported: A blood sample may be required. Please do not have anything to eat for at least ten hours before coming for your examination. (Please make sure to keep hydrated by taking drinks without calories, such as water or straight tea.)	
○Those who have previously used the Health Center, please make sure to bring your health center card.	
○Please make sure to bring the “Health Check-up Results”.	
Health Center Internal Medicine Hongo 03-5841-2583 Komaba 03-5454-6168 Kashiwa 04-7136-3040	
<b>Please make sure to bring your Student ID card.</b>	

# Response Form (for students)

Date \_\_\_\_\_

Name: \_\_\_\_\_

Common ID: \_\_\_\_\_

Student ID: \_\_\_\_\_

TEL: \_\_\_\_\_

Email: \_\_\_\_\_

① **Medical examination item** (Please place a ✓ in boxes below.)

血压 (Blood Pressure)	炎症反応 (Test for incidences of inflammation)
尿検査 (Uric protein・Uric blood)	脂質代謝 (Test for lipid metabolism)
胸部X線検査 (Chest X-ray)	糖代謝 (Tests for diabetes mellitus)
血液学的検査 (The cell ingredient of the blood)	腎機能 (Kidney functions)
肝機能等 (Liver functions)	尿酸 (Uric acid)
心電図検査 (Electrocardiogram)	

② **On consulting a medical clinic (Name: \_\_\_\_\_) following the medical check-up,**  
(Please place a ✓ in one of boxes below.)

1. No treatment or further follow-up is required
2. Follow-up check (No treatment, only for check-up or examination) Follow-up visit is on \_\_\_\_\_ / \_\_\_\_\_
3. Starting out-patient treatment (e.g. internal medication, etc.)
4. Hospital care
5. Others (\_\_\_\_\_)
6. I am discussing the results of this examination with my regular doctor from prior to the check-up.