

# Health Guidance and Consultations

(The University of Tokyo Hospital)

## ■I 措置不要

No action necessary. Please continue to maintain your health.

## ■II 要保健指導 (Consultation with a public health nurse required)

By appointments only. Please make a reservation with the healthy counselor's office you wish to visit.  
(Staff wellness Consulting Room ext. 32667・32118)

## ■III 要医療 (Consultation with a doctor required)

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

**Chest X-ray:** If necessary a letter of introduction (300 yen) and digital data of the X-rays (500 yen) is available for a fee from each of the health care centers.

\*If the comment "胸部 X 線検査について再検査が必要です。保健センター内科を受診してください" is in the result section for the 'Public Health Nurse Comments', please contact the health center beforehand and arrange a consultation with the doctor for internal medicine.

\*For those who wish to receive documents or consult doctors at a medical center, please contact the health center beforehand.

Health Service Center <http://www.hc.u-tokyo.ac.jp/>

### For any other consultations:

Consultation is available at the healthy counselor's office.

Place: University of Tokyo Hospital Internal Medicine Outpatient Department, Booth 204

Time: Weekdays 13:00~15:00 (Please be aware of days that the office is closed)

MULINS→ <http://www.cc.h.u-tokyo.ac.jp/mulins/anzenkanri/kenkou/index.html>

\*Please go to the fifth window of the outpatient department on first floor to register. (Make sure to take your hospital card and your national health insurance card)

\*Issuing of hospital cards, receiving the initial medical examination can be done on the day.

\*Medical examination by a doctor is available at the internal medicine section at each area's health center.

## ■IV 要継続医療

Please make sure to show your doctor the "Health Check-up Results".

Please fill in the following "response form", and send it by internal mail to the healthy counselor's office

----- cut along line -----  
Date \_\_\_\_\_ Response Form (for staffs) \_\_\_\_\_

Common ID \_\_\_\_\_ Name \_\_\_\_\_

Department \_\_\_\_\_ Ext. number (Contact info) \_\_\_\_\_

Medical examination item ( \_\_\_\_\_ )

(Please place a ✓ in one of boxes below.)

On consulting a medical clinic (Name: \_\_\_\_\_) following the medical check-up,

- ☐ 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 (ex. 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.