

# 《Health Guidance and Consultations》

(Shirokanedai)

## ■ I 措置不要

No action necessary. Please continue to maintain your health.

## ■ II 要保健指導・III 要医療

Make sure to print out your Health Check-up Results and take them with you when consulting a doctor of a nearby medical institution.

\* For those whose 'comment' column of the health check-up result reads "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", please check "[Re-examination schedules for X-ray](#)" on the Health Service Center website and see the physician on the appropriate date and time.

\* ECG: A letter of introduction can be provided at a cost (JPY 300), if necessary.

Chest X-ray: A letter of introduction (JPY 300) and digital data of X-rays (JPY 500) can be provided, if necessary.

**For those who wish to receive documents and digital data, please contact the Health Service Center beforehand. (Telephone Response Time 9:00-17:00)**

Hongo Health Service Center	Tel: 03-5841-2579・2580 ext. 22579・22580 E-mail: <a href="mailto:hoken-kanri-hongo.adm[at sign]gs.mail.u-tokyo.ac.jp">hoken-kanri-hongo.adm[at sign]gs.mail.u-tokyo.ac.jp</a>
Komaba Health Service Center	Tel: 03-5454-6166 ext. 46166 E-mail: <a href="mailto:hoken-kanri-komaba.adm[at sign]gs.mail.u-tokyo.ac.jp">hoken-kanri-komaba.adm[at sign]gs.mail.u-tokyo.ac.jp</a>
Kashiwa Health Service Center	Tel: 04-7136-3040 ext. 63040 E-mail: <a href="mailto:hoken-kanri-kashiwa.adm[at sign]gs.mail.u-tokyo.ac.jp">hoken-kanri-kashiwa.adm[at sign]gs.mail.u-tokyo.ac.jp</a>

### If you wish to be examined at the Health Service Center (only those eligible for III 要医療)

【Internal Medicine Dept. at the Health Service Center】

(Opening times: weekdays from 10:00 a.m. to 12:20 p.m., and from 2:00 p.m. to 3:45 p.m.)

<https://www.hc.u-tokyo.ac.jp/en/>

○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.

○Please have the medical examination as soon as possible.

○If an abnormal value in "HbA1c" "glucose" "Urine 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.)

○For Those who have previously used the Health Service Center please make sure to bring your health center card.

○There is a consultation fee of JPY 100 (separate charge will be made if more examination is required)

○**Please make sure to bring your Staff ID card.**

\* Please be aware that the Health Service Center's Health Management Office may forward you to another doctor for further consultation.

## ■ IV 要継続医療

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

■ **About the Response Form (see the other side)** : If you are visiting a medical institution other than the Health Service Center or your family doctor about your result of health check-up, please be sure to fill out a response form after your visit and **submit the form to the mail box labeled "健康診断結果票" in the General Affairs Team of the Administration Group.**

【Contact】 General Affairs Team, Administration Group, The Institute of Medical Science

E-mail: [t-soumu@ims.u-tokyo.ac.jp](mailto:t-soumu@ims.u-tokyo.ac.jp)

～See the other side～

# Response Form

Date \_\_\_\_\_

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

Name \_\_\_\_\_

Department \_\_\_\_\_

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

① **Health check-up item** (Please place a ✓ in boxes below.)

<input type="checkbox"/>	身体計測 (BMI Abdominal girth)	<input type="checkbox"/>	脂質 (Test for lipid metabolism)
<input type="checkbox"/>	血圧 (Blood Pressure)	<input type="checkbox"/>	糖代謝 (Tests for diabetes mellitus)
<input type="checkbox"/>	尿検査 (Uric protein・Uric blood)	<input type="checkbox"/>	腎機能 (Kidney functions)
<input type="checkbox"/>	胸部 X 線検査 (Chest X-ray)	<input type="checkbox"/>	診察 (Physician examination)
<input type="checkbox"/>	心電図検査 (Electrocardiogram)	<input type="checkbox"/>	尿酸 (Uric acid)
<input type="checkbox"/>	血液一般 (Cell ingredients of blood) : 血色素量 (Hb) 、血小板 (plt) ,白血球数 (WBC)	<input type="checkbox"/>	便潜血検査 (Fecal occult blood test)
<input type="checkbox"/>	肝・胆道系 (Liver functions) : AST,ALT,γ-GTP, 総ビリルビン (Total bilirubin) ,ALP	<input type="checkbox"/>	CRP (Test for incidences of inflammation)
<input type="checkbox"/>	他 (other exams _____ )	<input type="checkbox"/>	LDH (Lactate Dehydrogenase)

② **On consulting a medical clinic** (Name: \_\_\_\_\_ ) following the health 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.