

Employees and Special Hazardous Workers Health Examination Questionnaire Filling Path

English Version

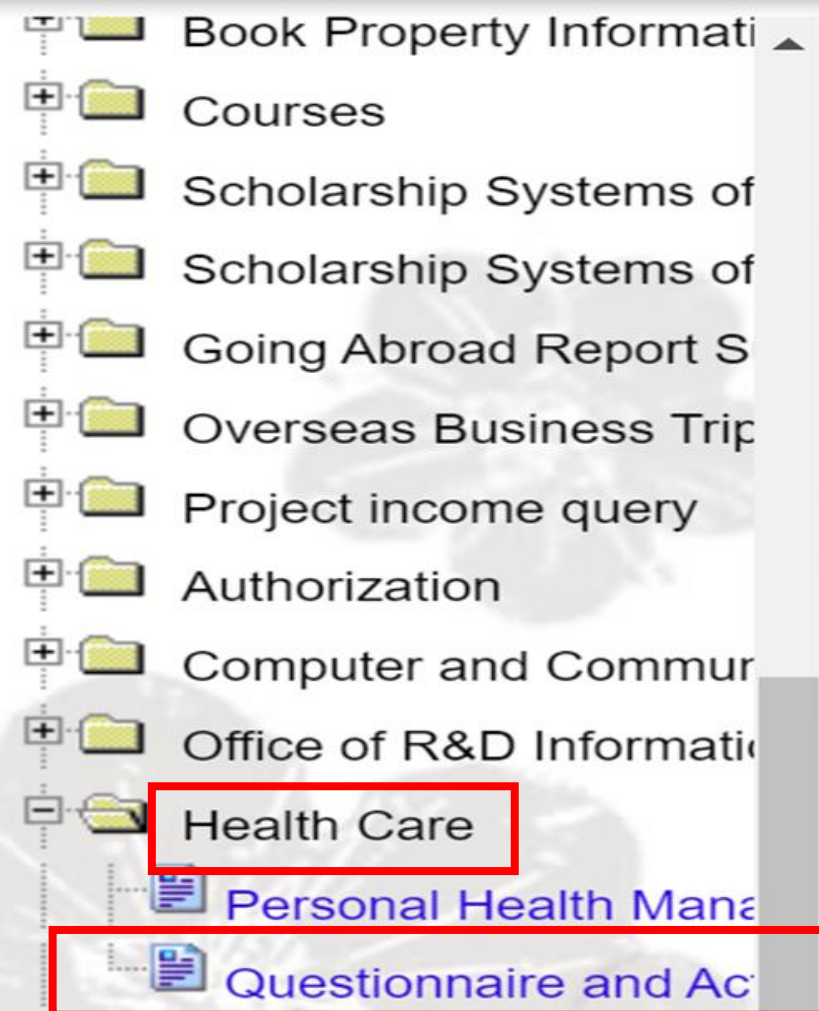


Important Notes

Before the examination day :

- Please fill out the questionnaire and register for the health examination.





Registration path:

- Academic Information Systems
- Health Care
- Questionnaire and Activity Registration
- Event Registration
- Register for Health Examination.

Event Registration



教職員工及特別危害作業人員(含實驗室)健檢問卷調查 Employees and...

Event Registration



Event Registration



【健檢通知 Health Examination Notice】請報名113年4月「教職員工(含實驗室)健康檢查」並完成「健康問卷填寫」 Please register for the Employee Health Examination held in April, 2024 and fill out the questionnaire.

風雲3樓國際學生活動中心

Place : 1100

Remaining places : 1100

Click 【Start registration】 Start the register process ,
or click 【Cancel】 cancel job .

Cancel

Start signing up

Sign up

☐ 總是 Always ☐ 常常 Often ☐ 有時候 Sometimes ☐ 不常 Seldom ☐ 從未 Never

*12.上班/上課時您會覺得每一刻都很難熬嗎? Are you exhausted when you think of a full day of work/classes before going to work/school?

☐ 總是 Always ☐ 常常 Often ☐ 有時候 Sometimes ☐ 不常 Seldom ☐ 從未 Never

*13.不工作/上課的時候，您有足夠的精力陪伴家人或朋友嗎? Do you have enough energy to accompany your friends and family when you are off work?

☐ 總是 Always ☐ 常常 Often ☐ 有時候 Sometimes ☐ 不常 Seldom ☐ 從未 Never

▶ EC009.八、肌肉骨骼症狀調查 Musculoskeletal Scale

*01.慣用手 Dominant hand

☐ 左手 Left ☐ 右手 Right

**After completing the questionnaire,
Please click Next.**

*02.您在過去的1年內，身體是否有長達2星期以上的疲勞、酸痛、發麻、刺痛等不舒服，或關節活動受到限制 In the past year, have you ever felt uncomfortable like fatigue, numbness, soreness, sharp pain, etc., or restricted joint movement for longer than 2 weeks at a time?

☐ 否 No， 結束此調查表 End this survey ☐ 是 Yes， 請繼續填寫下列表格 Please continue to fill out the form below

返回

下一步

After completion, the following screen will appear.

Menu ▾

Survey on Epidemics |

Health Record |

Health Reservation |

Doctor Reservation |

Event Registration |

Questionnaire

1

QUESTIONNAIRE

2

ORDER INFORMATION

3

RESERVE FINISH

▶ Registration content

Event name 【健檢通知 Health Examination Notice】請報名113年4月「特別危害作業(含實驗室)健康檢查」並完成「健康問卷填寫」 Please register for the Special Hazardous Worker (including lab staff) Health Examination held in April, 2024 and fill out the questionnaire.

Registration status Not sent

Special needs

- *Registration time
- ☐ 4/23 10:30-11:00
 - ☐ 4/23 11:00-11:30
 - ☐ 4/24 10:30-11:00
 - ☐ 4/24 11:00-11:30
 - ☐ 4/25 10:30-11:00
 - ☐ 4/25 11:00-11:30
 - ☐ 4/26 10:30-11:00

If you have any special needs, please fill in here

- *Registration time
- ☐ 4/23 10:30-11:00
 - ☐ 4/23 11:00-11:30
 - ☐ 4/24 10:30-11:00
 - ☒ 4/24 11:00-11:30
 - ☐ 4/25 10:30-11:00
 - ☐ 4/25 11:00-11:30
 - ☐ 4/26 10:30-11:00
 - ☐ 4/26 11:00-11:30

If you have any special needs, please fill in here

Please confirm that your email and personal information are correct.

Appointer information

*Appointer Name

葉

Please fill in the name of the appointment person

**Contact number

09

*Email

@mx.nthu.edu.tw

Appointment notice will be sent to this email

在校免費癌篩檢驗

在校每2年免費癌篩檢測
Free cancer screening
once every two years
(select all that apply)

- ☐ 糞便潛血檢查：50 ~ 74歲免費Occult blood test: free for people aged 50 to 74
- ☐ 口腔黏膜檢查：30歲以上抽菸、嚼檳榔者免費Oral mucosal test: free for people aged 30 and above with the habit of smoking and chewing betel nut
- ☐ 口腔黏膜檢查：18 ~ 29 歲原住民嚼檳榔者免費Oral mucosal test: free for indigenous people aged 18 to 29 with the habit of chewing betel nut

Cancel appointment

Make an appointment

Reservation successful, the following screen will appear.

Thank you!! Your event list has been sent!

This registration number : D24011800001 ,
Registration notice has been sent to your email @mx.nthu.edu.tw

➡ Registration content

Registration number	Event name	Registration time	Registration status
D24011800001	【健檢通知 Health Examination Notice】請報名113年4月「特別危害作業(含實驗室)健康檢查」並完成「健康問卷填寫」Please register for the Special Hazardous Worker (including lab staff) Health Examination held in April, 2024 and fill out the questionnaire.	4/24 11:00-11:30	Applied

Registration information Lookup

Please check your email. You will receive a notification confirming your reservation.

重要通知【4/25 09:00-09:30】教職員工健康檢查預約成功 You have successfully reserved the Employees



清大衛保組 <clinic@my.nthu.edu.tw>
收件者 [redacted]@mx.nthu.edu.tw

[↩ 回覆](#) [↶ 全部回覆](#) [→ 轉](#)

2024/1/18 (週四)

親愛的 W12 [redacted] 您好：

您已成功預約 4/25 09:00-09:30 教職員工及特別危害作業人員健康檢查，報名資訊如下：

Dear W12 [redacted]：

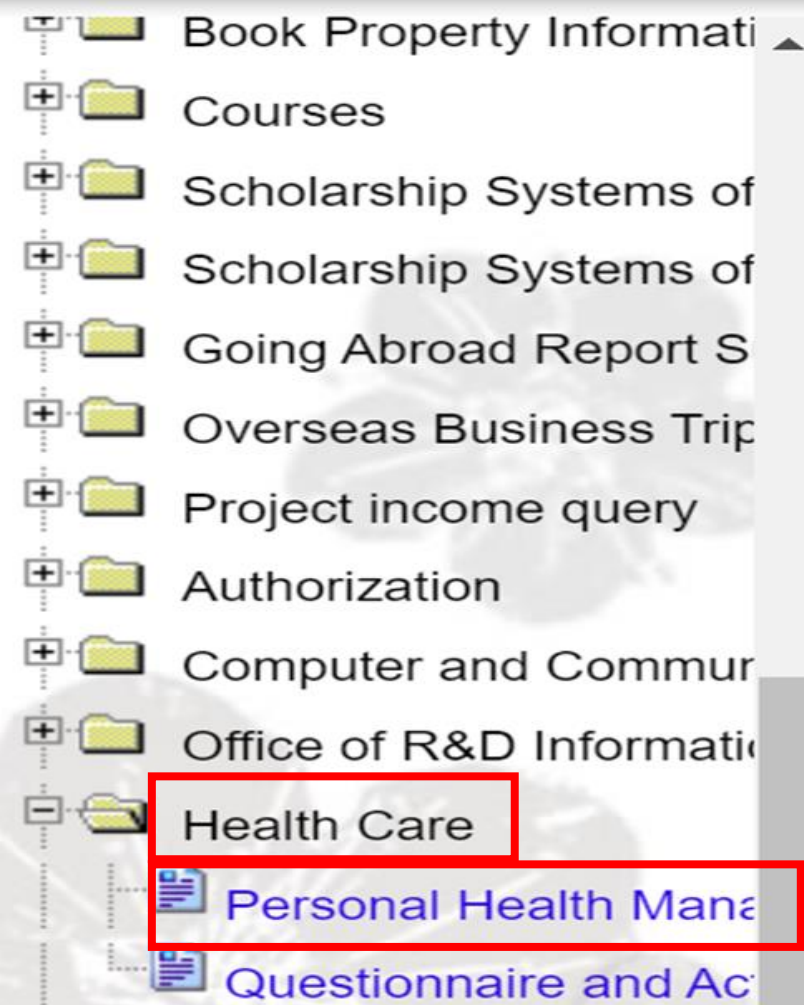
You have successfully reserved Employees and Special Hazardous WorkersHealth Examination for 4/25 09:00-09:30. The registration information is as follows:

名稱Name	內容Content
活動名稱	【健檢通知】請報名 113 年 4 月份「教職員工(含實驗室)健康檢查」
Event Name	Employees and Special Hazardous WorkersHealth Examination
活動日期	2024/04/23 08:00~2024/04/26 12:00
Event Date	
活動地點	
Event Venue	International Student Activity Center located at 3F of Feng Yun building
活動報名場次	4/25 09:00-09:30
Event Registration Sessions	

Important Notes

1. On the examination day:

- Bring the signed papercopy of the examination questionnaire with you. [Please download → print (limited within campus domain) → sign beforehand.]
- ✓ How to print the questionnaire → Download the questionnaire **only in the campus domain.**



Registration path:

- Academic Information Systems
- Health Care
- Personal Health management
- Menu
- Personal Health Info
- Questionnaire Record
- View Record of the Employees and Special Hazardous Workers Health Examination Questionnaire
- Print (input password YYYYMMDD)



Personal Health Info

Health Education

Personal Health Information

nd

/ Self Health Record

/ Questionnaire Record

/ Service Reservation

/ Health Credit Hour

/ My Points

Questionnaire Record

View all your completed questionnaires history

Password hint : please key in your birthdate YYYYMMDD

#	Questionnaire Name	Applied Times	Last Applied Time	Browse
1	Employees and Special Hazardous Workers Health Examination Questionnaire	1	2024/01/17 14:51	<div>View Record</div> <div>Print</div>

請輸入密碼

此文件受到密碼保護，請輸入密碼。

e.g. 19990909

Password hint

Please key in your **birthdate**

YYYYMMDD



提交

After downloading, please confirm whether the information is correct, and sign on the last page.

國立清華大學

姓名：葉 P1/P3

學號/工號： W

教職員工及特別危害作業人員(含列管實驗室)健康檢查紀錄問卷 Labor Physical Health Examination Questionnaire

姓名	葉 <input type="text"/>	學號/工號	W <input type="text"/>	填寫日期	2023/04/07 08:41
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以上資料本人已詳細閱讀並據實寫，且同意將本次報告提供給校方作為工作場所的健康管理資料。

I agree to provide report to my school for occupational health reference.

本人確認以上陳述內容無誤 I confirm that the above statement is correct

(簽名 Signature) **Please sign here.**