2017 Student Periodical Health Checkup Questionnaire

		20						IECKU	p Questi	ormaire	5		
(7digits) Student No.							rcle your mair of this year		1. Ueno	2. Toride	e 3. Senju	4. Yokohama	
	Last name		First nam	е			Dept.	e.g. oil p	painting, compo	sition, etc.			
Name							Date of bir	YYYY/	MM/DD				
											Age()	
I. Circle an c	option that applies ②Relatively v			conditi Relativ		vell	⑤Unwell						
II. Subjectiv	ve symptom(s) con	tinuing f	or 2 weeks. Ci	rcle the	numbe	er(s) tha	applies to	you.					
	anting/ asthma	-	Lost more than 3				-		being "better	off dead″for	the past year		
②swollen lymph node/ fever ①Gained more			Gained more tha	ore than 3 kg over the last year			BSelf-accusation/easily get pessimistic						
3Allergic rhinitis / hay fever			(1)Insomnia					ıp several t	times a night				
④Atopic dermatitis/hives			Agitation/feeling	•		⑩Very hard to wake up in the morning							
⑤Headache∕ dizziness			(1)Feeling uneasy					①Having a confused idea					
6Ear ringing /hearing difficulty			⁽¹⁾ Feeling depressed					Being overly self-conscious					
⑦Stomachache/heart burn/nausea			(15)Lack of concentration/judgement					③Feeling being watched by someone					
Onstipation/diarrhea Onstipation/diarrhea			⁽ BHard to go out					(2) Seeing hallucination					
							_	⁽³⁾ Feeling isolated from friends					
III. Are you bo	othered by the follo	owing sy	mptoms during	; your st	tudy, pe	erforman	ce and work	ng? Circl	le the numbe	r(s) that a	pplies to you.		
1. Pai	in or numbness					o (2) fingers	36	elbows, arms	④neck	, spine \sim hip	⑤legs, feet	
2. Ha	ving difficulty in mo	oving the	joints			o (2) fingers	36	elbows, arms	④neck	, spine \sim hip	⑤legs, feet	
3. Fat	tigue or pain in the	eyes				o (2	Yes						
4. Ha	ve you consulted a	inyone al	oout your symp	tom(s) d	describe	ed in 1 ar	d 2?						
			(DNo	2PI	hysician	③medica	specialis	st other than	doctor ④t	eacher ⑤fam	ily or friend 6o	thers
1. ①Yes	nave you been) seei ②No /es, please answer	the foll	owing question 1. Current stat	s for yo us	ur resp	ective di	seases. Q2. S		s direction			co visit after April	
Disease1	(Age of onset)	1)Taking medi 2)Periodical ex				_).Not at all).Yes			①.Decided ②.To be de		
	Age of onset)	Completed(t)				-). res Details			دے. To be de		
			(4)Discontinue).Other							
		~					<u></u>	pagialist'	e direction			o visit ofter Asri	
Disease2:		Q	 Current stat ①Taking medi 		ral annli	cation)).Not at all	s direction		Q3. Hospital 1	o visit after April	
DISCASEZ.	(Age of onset)	2 Periodical ex				0	.Not at all .Yes			(1).Decided (2).To be de		
		/	③Completed(t				-	Details					
			④Discontinue).Other							
		ດ ر	1. Current stat	us			Q2 S	pecialist'	s direction		Q3. Hospital I	o visit after April	
Disease3:		3	①Taking medi		ral, appli	cation)).Not at all			1.Decided		
	(Age of onset)	②Periodical e	kaminatio	on only, r		_).Yes			②.To be d		
			③Completed(t)	reatment	t/visit)		: [Details					
			(4)Discontinue	d(treatme	ent/visit).Other							
1. Yes	u had MR vaccine t ou think is your ide	2. No	-	→ \	/isit me)kg	dical inst	itution for M	R vaccina	ation				
		_											
	option in each que	stion tha			tyle.		-			-			
1. Breakfa	ast			DNo			0	netimes		③Ever	yday		
2. Alcoho	1			DEveryo			-	netimes		3No			
3. Smokir	-				lcigarette	es or more (etes or less per d	ay) ③No	(4)Sto	pped	
4. Taking	exercise twice a w	veek for	thirty minutes	DNo			2Yes	5					
5. Hours	of sleep		(D3 hour	s or les	S	② 4~5	hrs	36~7 hr	rs	④8~9 hrs	⑤10 hrs or	more
	ı live away from yoı ı work part-time at	-		DYes DYes			②No ②No						

 \ast This questionnaire is used to understand your health conditions and to provide an adequate health checkup.

The personal information provided is properly managed in compliance with the Act on the Protection of Personal Information

 \ast If you received a return to clinic notification, please go through another health checkup We will conact you either by mail or phone in case you need to have another chext x-ray.

Tokyo University of the Arts Health Care Service Center

Please turn over

Questionnaire for the students who have attended a health checkup at the university

Your opinions will be used to improve our health checkup operation.

You won't suffer a disadvantage as a result of answering the questions. We seek your cooperation to serve you better.

1.	Please chose any options that apply to you. a. arrive as at present) b. arrive mid-April (during the class registration period) c. arrive as at present) b. arrive mid-April (during the class registration period) c. arrive as at present) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period) c. arrive as at present constraint of the class registration period. The class registration period constraint of the class registration period constraint of the class registration period. The class registration period constraint of the class registration period constraint
	How did you find the duration of the health checkup you have attended? Circle an option that applies to you. a. Appropriate • b. Fair • c. Long • d. Too long)
	For those who answered "Long" or "Too long" in the previous question. low long do you think is appropriate for the duration of a health checkup? min.
	Other -Free coments and opinion on our health checkup /ou are unable to attend a checkup, please provide the reasons.

 \sim Thank you for your cooperation \sim

Health is above everything. We recommend that you take an annual health checkup.

Tokyo University of the Arts Student Affairs Division