## For those who have symptoms like a cold

If you work at Chiba University hospital, or a student of medical training, please follow the instructions from infection control team of CUH.

## For others who have symptoms like a cold,

Please fill out the following form and Email us in Safety and Health Organization.

Faculty / Department

Student ID no. / Employee ID no.

Name

Body temperature

Telephone number(ext#), Email address to contact

Contact history /Travel history in 2020

If you have any contact history with COVID-19 patient, or person with infection suspected, please tell us.

## **Symptoms**

Cough, sputum, nasal discharge, sore throat, shortness of breath, malaise, joint pain, diarrhea, headache, loss of smell and/or taste,etc.

## Date

When symptoms first appeared written above.

Have you went to any medical institution with this symptom? yes Please tell us when and where you went?

Free entry field

example: allergy of pollen etc.

Chiba University
Safety and Health Organization
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