**臺北醫學大學洽公人士疫情調查表**

1. 姓名：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. 性別(Gender)：□男(Male) □女(Female)
3. 請問您最近兩周是否出國（包含轉機）？Have you traveled outside of the country in the last two weeks（including transfer）?

□是(Yes) □否(No)

1. 您近兩周曾到過之國家為? Which country have you visited in the last 2 weeks? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. 您近兩周曾轉機之國家為? Which country have you transferred to Taiwan in the last 2 weeks? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. 請問您近兩周是否有5人以上群聚史(如聚餐、唱歌、喝咖啡、逛街購物、慶生、旅遊等)？ Have you clustered over 5 people in the last 2 weeks ( including dining, karaoke, shopping, birthday party, travel, etc)

□是(Yes) □否(No)

1. 請問您是否於這兩周內出現過以下症狀？（複選）Have you had the following symptoms in the last two weeks? \*

□都沒有 None □發燒（38℃以上）Fever (Above 38℃) □全身倦怠 Fatigue

□肌肉酸痛 Muscle soreness □關節酸痛 Joint pain □喉嚨痛 Sore throat □流鼻水、鼻塞 Nasal congestion / runny nose □咳嗽 Cough □呼吸困難 Shortness of breath 、 □胸痛 Chest pain □嘔吐 Nausea or vomiting □腹瀉 Diarrhea □嗅覺/味覺喪失 anosmia, ageusia□尿量減少 Decreased output of urine □下肢水腫 Foot, leg or ankle swelling □血尿 Blood in urine □胸部影像學檢查（CXR或CT）顯示肺炎 CXR or CT shows pneumonia □其他 Others\_\_\_\_\_\_\_\_

敬請誠實填答以上題目以利維護本校師生健康安全，謝謝您的配合。Please fill in the form honestly to protect the health of our students, faculties and staff, thank you.