

奈良県感染症発生動向調査検査票(病原体)

【主治医記載欄】 (該当するものに ✓ 又は○して下さい) (定点把握五類感染症)※急性呼吸器感染症を除く

Form containing patient information, diagnosis, clinical course, and vaccination history. Includes sections for 'Medical Institution', 'Patient Information', 'Diagnosis', 'Onset Date', 'Specimen Collection', 'Clinical Course', 'Recent Overseas Travel', 'Vaccination History', and 'Basic Diseases'.

【保健環境研究センター記載欄】

Form for laboratory testing details, including 'Pathogen Detection' and 'Detection Method'.

【その他の特記事項】

Blank box for additional remarks or special notes.