

Self-Health Management Form

ID Number ()

Name ()

	1 st Day	2 nd Day	3 rd Day	4 th Day	5 th Day	6 th Day	7 th Day
Date							
Temperature (Morning/Evening; twice a day)	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C
	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C
Strong feeling of weariness	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Cough	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Difficulty breathing	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Gastrointestinal symptoms	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Other symptoms							

	8 th Day	9 th Day	10 th Day	11 th Day	12 th Day	13 th Day	14 th Day
Date							
Temperature (Morning/Evening; twice a day)	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C
	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C	(:) °C
Strong feeling of weariness	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Cough	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Difficulty breathing	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Gastrointestinal symptoms	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Other symptoms							

- If you have had cold symptoms or a fever of 37.5 degrees celsius or over for four days or more, or if you have a strong feeling of weariness (fatigue) or shortness of breath (difficulty breathing), please consult with the consultation center for people with potential exposure to COVID-19 set up at your nearest public health center.
東京都 新型コロナウイルス感染症電話相談窓口 03-5320-4509
帰国者・接触者電話相談センター(専用窓口) https://www.mhlw.go.jp/stf/seisakunitsuite/bunya/kenkou_iryuu/covid19-kikokusyasessyokusya.html
- if you are infected with COVID-19, Call the Health Center at 03-3238-3394.