

日本国籍を持つ学生／日本国内居住中の留学生は回答不要です。
Students with Japanese citizenship and international students currently
living in Japan need not fill out this form.

INSTRUCTIONS
THE UNIVERSITY OF OSAKA STUDENT HEALTH DATA FORM

2026

To ensure you receive appropriate medical care and necessary medications after arriving in Japan, we require your health information.

Based on this information, the University of Osaka will help you find your doctor in Japan.

Purpose

- Your health data on this form are used by Health and Counseling Center to provide you with better service and care in terms of your health management and promotion.
- Should you have any health concerns during your stay in Japan, the data will help us to detect their causes earlier and more accurately, and to support you either by ourselves, or in cooperation with faculty members of your department and medical institutions outside the campus. In case you are currently seeing a doctor and/or on medication, the data are essential for us to help you continue necessary treatment and medication in Japan.
- The data are kept strictly confidential and only used by Health and Counseling Center for the purposes above, except in:
 1. emergency situations in which safety of yourself and/or others are in jeopardy
 2. situations where we consider it serves your support and/or treatment to share the information with other people involved (e.g., faculty members of your department, medical institutions outside campus), in which case, we will ask for your permission first.
- Your cooperation with this health data form is optional.

Procedure

- Fill out all sections of this form.
- Please promptly submit a written document to Health Management Department (保健管理部門) at Health and Counseling Center upon arrival in Japan. (For locations, click the link or read the QR code below.)

<https://hacc.osaka-u.ac.jp/ja/contact/>



- Even if a medication is available in your home country, it may not be available in Japan, or it might only be prescribed at specialized medical institutions. Therefore, please take the time to research such information on your own as well.
- Should you have any inquiries, kindly direct them via email to shinryou@hacc.osaka-u.ac
- This form differs from the health check-up administered to all incoming international students; thus, a distinct health check-up, including an online questionnaire, must be taken post-admission to the University of Osaka.

Vaccinations Recommendation

- In Japan, most people get vaccinations of measles, german measles, chicken pox, and mumps in their childhood. We strongly recommend that you get these vaccinations before you come to Japan. Also, we advise that you vaccinate against meningococcus, especially if you plan group living (dormitories, extracurricular activities, etc.) It will be costly to get these vaccinations in Japan.

Special Notes on Mental Health:

If you have concerns about your mental health, please ensure that you consult a healthcare provider and seek necessary advice before coming to Japan. Additionally, if you are already receiving medication, please be aware that some medications available in your home country may not be accessible in Japan or may require visits to specialized medical institutions (e.g., methylphenidate). It is essential to thoroughly consider whether the treatment you are receiving in your home country can be continued in Japan. Please carefully investigate this matter before your arrival.

Student Information

Student ID:	Department	
Name:		
Date of Birth (dd/mm/yyyy):	Nationality:	Gender (Male/Female/Other):

Health History (Describe if any)

<p>Are you currently seeing a doctor?</p> <p><input type="checkbox"/> Yes → <u>Please bring us a letter of referral from your doctor.</u></p> <p><input type="checkbox"/> No → If you have any medical/psychological conditions that concerns you, please describe.</p>
<p>Are you currently on any medications?</p> <p><input type="checkbox"/> Yes → Please describe the name of medicines you are taking.</p> <p><u>If they are prescribed medicines, please bring us a letter of referral from your doctor.</u></p> <p><input type="checkbox"/> No</p>
<p>Do you have any allergies (drug, food, insect, latex, etc.)?</p> <p><input type="checkbox"/> Yes → Please describe which substances you are allergic to.</p> <p><input type="checkbox"/> No</p>
<p>Special Needs (Reasonable Accommodation):</p> <p>If you have a disability (this includes a specific learning difficulty or medical condition) that may affect your studies at the university or which might require special arrangements or facilities, please describe it.</p> <p><i>Do you want medical/educational support by Health and Counseling Center?</i></p> <p><input type="checkbox"/> Yes → We shall arrange the requisite assistance for you.</p> <p><input type="checkbox"/> No → We might contact you should the necessity arises.</p>