**國立中正大學體溫及健康狀況紀錄表**

## 編號： 姓名： 單位/系所：

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **日期： 月/日**  **Date: m/d** | **體溫**  Body Temperature | **咳嗽**  Cough | **流鼻水/鼻塞**Runny/ stuffy nose | **腹瀉**  Diarrhea | **嗅/味覺異常**  Loss of smell or taste | **全身倦怠**  Malaise | | **四肢**  **無力**  Limb weakness | **呼吸困難**  Breathing difficulties | **當日就醫**  Seek immediate medical attention | **單位 / 記錄者** |
| **1** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **2** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **3** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **4** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **5** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **6** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **7** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **8** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **9** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **10** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
|  |  |  |  |  |  |  |  |  | |  |  |  |

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|  | **日期： 月/日**  **Date: m/d** | **體溫**  Body Temperature | **咳嗽**  Cough | **流鼻水/鼻塞**  Runny/ stuffy nose | **腹瀉**  Diarrhea | **嗅/味覺異常**  Loss of smell or taste | **全身倦怠**  Malaise | **四肢**  **無力**  Limb weakness | **呼吸困難**  Breathing difficulties | **當日就醫**  Seek immediate medical attention | **單位/記錄人** |
| **11** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **12** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **13** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| **14** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| ***15*** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| ***16*** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| ***17*** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| ***18*** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| ***19*** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| ***20*** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |
| ***21*** |  | **AM °C**  **PM °C** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無No**  **□有 Yes** | **□無 No □有 Yes，**  **疑似 suspected＿＿＿** |  |