H	ealth Cheo	ckup Reque	st Form (Chee	ckup for Special Retirement)	
the	fiscal year (fro	om April 1 to Mar	ch 31 of the follo		
* Plea	se note that a sec	cond examination of t	he same type will be	at your own expense.	
Flow from appointment and examination to receipt of results	(1) Appointment	•Please apply by calling the health center of your choice from among the enclosed			
		"List of Contracted Health Centers." •When making an appointment, be sure to tell them it is for a <u>"Fujitsu Health Insurance Society <b>Free</b></u>			
		Gynecological Checkup."			
	(2) Preparation	•The health center may send you a health checkup kit or other materials. If you have any questions, please ask the health center. •Please prepare according to the health center's guidance.			
	(3) Examination	<ul> <li>Please undergo a checkup on the day of your appointment. (In the unlikely event that you are unable to do so, be sure to contact the health center.)</li> <li>Make sure to bring this Health Checkup Request Form and one of My Number Health Insurance Card, Eligibility Notification (on your Health Up F@mily app), or Health Insurance Eligibility Certificate to the checkup.</li> <li>* The Health Insurance Certificate issued by the Fujitsu Health Insurance Society is valid until December 1, 2025.</li> <li>For those who are unable to undergo the "Gastric X-ray test":Those who have allergic symptoms to barium or who have been previously diagnosed with intestinal obstruction or diverticulitis of the colon may request an "examination by gastroscopy" at the contracted health center. However, please contact the contracted health center to confirm whether such an examination is available and how to proceed with said examination. Any costs incurred for changes or additions are to be covered by the examinee.</li> <li>If additional tests other than those listed among the "Examination Items" on the reverse side are performed, you will be required to bear the additional costs.</li> <li>If you wish to undergo additional tests, please check with the health center regarding the amount you will be required to pay and the payment method.</li> <li>Please note that the Fujitsu Health Insurance Society may not reimburse your health checkup if you receive a checkup at a contracted health center and also at a non-contracted health center (i.e. your primary care physician).</li> </ul>			
	(4) Receipt of result notification	<ul> <li>You will receive a notice of the results of the health checkup from the health center at a later date.</li> <li>If the results indicate that you should undergo a full examination, be sure to do so at a medical institution.</li> <li>* Such further examinations and treatment are covered by insurance.</li> </ul>			
Form	n to Be Comple	ted by the Exami	inee		
Please complete the form in this frame and submit it to the health center on the day of the checkup.					
Date of Checkup		(YYYY/MM/DD)	/ /		
Type of Checkup		Lifestyle-related       •Lifestyle-related disease checkups (including lung, colon, and stomach cancer screenings) are available at no cost to the examinee.         (including cancer screenings)       * For men, prostate-specific antigen (PSA) tests are available.         •For the examination items, please see the reverse side.			
		Gynecological checkup	ast and cervical cancer scre undergo these examinations quest Form (Insured Gynecc	, please use the Health Checkup	
		Code	Number	<requirements checkups="" for="" health=""></requirements>	
Examinee		9001		<ul><li>(1)Must be an insured person of Fujitsu Health Insurance for special retirement as of the date of the examination.</li><li>(2)Must be examined by the day before one's 75th birthday.</li></ul>	
* *		Nar	ne	Date of Birth	
* You can find your code and number on your currently valid Health Insurance Certificate, My Number Health Insurance Card, Eligibility Notification (on your Health Up F@mily app), or Health Insurance Eligibility Certificate.		(Furigana)		(YYYY/MM/DD)	
				( ) years old	
		(=		ntact Information	
		(〒 -	)		
_			r any purpose other than to imp	(Contact Phone No )	

\* Personal information collected using this form will not be used for any purpose other than to implement Fujitsu Health Insurance Society's health services. The information will be properly managed in accordance with the Personal Information Protection Law.

\* Fujitsu Health Insurance Society health checkup business is entrusted to Best Life Promotion, a wholly owned group company of Fujitsu.

Do not think you are fine merely because you underwent an annual health checkup; if you have noticed symptoms of concern, we recommend seeking a medical consultation as soon as possible.

## [Checkup for Special Retirement]

Examination Item		amination Item	Details of Examination		
	Medical examination Measurement		Physician examination, subjective symptoms, other symptoms, medical history (medication and smoking history) Height, weight, abdominal circumference, BMI, blood pressure, visual acuity, hearing (1,000 Hz, 4,000 Hz)		
Lifestyle-related Disease Checkup	Urinalysis		Proteins, sugars, sediment		
	General blood		White blood cell count, platelet count		
		Anemia	Red blood cell count, hemoglobin level, hematocrit		
	Blood test	Liver function	<u>AST (GOT), ALT (GPT), γ-GTP</u> , total protein, total bilirubin		
		Lipids	Triglycerides, HDL cholesterol, LDL cholesterol, total cholesterol		
		Glucose metabolism	Fasting blood glucose or HbA1c (whichever is performed)*1		
		Kidney function	eGFR, serum creatinine		
	Uric acid Uric acid		Uric acid		
	Physiology		Electrocardiogram		
			Fundoscopy		
Cancer Screenings	Lung cancer     Chest X-ray test		Chest X-ray test		
		Colon cancer	Fecal occult blood test		
	Stomach cancer(ileus). After the examination, please follow the health center's instruction that you expel the barium without any trouble.In addition, if you are undergoing treatment for a gastrointestinal disorder received treatment for a gastrointestinal disorder, or have ever experience		<ul> <li>* Note on barium tests:</li> <li>After the test, barium may harden in the intestine, causing an intestinal obstruction (ileus). After the examination, please follow the health center's instructions to ensure that you expel the barium without any trouble.</li> <li>In addition, if you are undergoing treatment for a gastrointestinal disorder, have ever received treatment for a gastrointestinal disorder, or have ever experienced allergic symptoms attributable to barium, be sure to inform the health center at the time of your</li> </ul>		
		Prostate cancer Prostate-specific antigen (PSA) test			

## To the Health Center

\*1 Fasting blood glucose and HbA1c should be performed according to the contract.

Always perform HbA1c if fasting blood glucose cannot be obtained.

 $\cdot$  For specific health checkups, please be sure to perform the underlined items.