Public Health Center, No.

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Date:

To:

From: Director of　 Public Health Center

Recommendation for hospital admission

It has been ascertained that you have been infected with a designated infectious disease (novel coronavirus infection) stipulated in Article 6 of the Act on the Prevention of Infectious Diseases and Medical Care for Patients with Infectious Diseases (hereinafter referred to as the “Act”).

Therefore, we recommend that you be admitted to a hospital as follows, based on the provisions of Article 3 of the Cabinet Order Designating the Novel Coronavirus Infection as a Designated Infectious Disease, as applied mutatis mutandis pursuant to Article 19 (1) of the Act (as applied mutatis mutandis pursuant to Article 26 of the Act).

If you do not follow this recommendation, measures for hospitalization may be taken based on the provisions of Article 19 (3) of the Act (as applied mutatis mutandis pursuant to Article 26 of the Act).

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| 1 | Medical institution in which you are to be hospitalized |
|  | 1. Name
2. Location
 |
| 2 | Date of hospital admission |
|  | Please be hospitalized by: (Date) 　　 |
| 34 | Period of hospitalization　　　From (Date) To (Date) 　Reasons for recommending hospitalization |
|  | (1) | To prevent the spread of infectious disease |
|  | (2) | Due to the presence of the symptoms of the infectious disease |
|  |  |
| 5 | Others |
|  | You may request to be discharged from the hospital under the provisions of Article 22 (3) of the Act (as applied mutatis mutandis under section 26 of the Act), and if it is confirmed that you are not carrying the pathogen of the infectious disease in question or that the symptoms of the infectious disease have disappeared, your hospitalization will be terminated under Article 22 (1) of the Act (as applied mutatis mutandis pursuant to Article 26 of the Act). |
|  | You may also file a written or oral complaint about the treatment you received during your hospitalization in accordance with the provisions of Article 24-2 (1) of the Act. |
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Contact person：