



National Center for Global Health and Medicine
Travel Clinic
1-21-1 Toyama, Shinjuku-ku, Tokyo, Japan, 162-8655
Tel: 81-3-3202-7181 Fax: 81-3-3207-1038

Health Certificate for COVID-19

Date of issue: DD MMM YYYY

Client Name:

Gender:

Hospital ID:

Date of Birth: DD MMM YYYY

Age: years old_

Date of Examination: DD MMM YYYY

Laboratory result (collected and tested on the same day as the examination)

Real-time RT-PCR test for SARS-CoV-2 (Nasopharyngeal Swab): Negative (Not detected)

Comments:

It is herewith certified that the above result is confirmed



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Physician's name: XXXX XXXX M.D.

Signature