

Please write in English

To DAI-ICHI LIFE (第一生命あて)

<海外用>

NOTE: If you make any corrections, please write your signature as proof.

<b>ATTENDING PHYSICIAN'S STATEMENT (入院証明書兼診断書)</b>				
Patient's name (患者氏名)	<input type="checkbox"/> M.(男) <input type="checkbox"/> F.(女)	Patient's date of birth (生年月日) (M) / (D) / (Y)		
Clinical record card No (カルテ番号)	Name of sickness or injury for hospitalization (入院の原因となった傷病名)		Inception date of sickness or injury (Physician's estimate) (医師推定 傷病発生年月日) (M) / (D) / (Y)	
Cause of above sickness or injury (上記の原因)		Inception date of sickness or injury (Physician's estimate) (医師推定 傷病発生年月日) (M) / (D) / (Y)		
Previous sickness (If any) (既往症)	name of illness, treatment term and any other pertinent information (病名・治療期間等)	Was the patient introduced or previously seen by another physician? (If any) (前医・紹介医)	Name of physician (医師名) Name of medical institution (医療機関名)	
Treatment term (治療期間)	First medical Consultation (初診) (M) / (D) / (Y)			
	1st hospitalization (第1回目入院)	Date admitted (入院) (M) / (D) / (Y)	Date discharged (退院) (M) / (D) / (Y)	Presently under treatment (現在治療中) (M) / (D) / (Y)
	2nd hospitalization (第2回目入院)	(M) / (D) / (Y)	(M) / (D) / (Y)	(M) / (D) / (Y)
Condition of sickness from when you first noticed the symptoms to the first medical consultation (発病から初診までの経過) (Please indicate when and how the symptoms first appeared) (いつ頃からどのような症状があったか記入してください)				
Diagnosis at the time of first consultation and progress thereafter (初診時の所見及び経過) (Please give details of the examination and treatment) (検査・治療状況の詳細)				
Circle should be described on type of surgery (手術の種類: 開頭/開胸/開腹/ファイバースコープまたはカテーテルの手術/その他) (1) Craniotomy (2) Thoracotomy (3) Laparotomy (4) Surgery using a fiberoptic or catheter (5) Other				
Name of surgery or operation Include percutaneous surgery (TAE etc.), drainage, shunting (手術名/経皮的手術経カテーテル動脈塞栓術等、ドレナージ、シャント含む)			Date of surgery (手術日) (M) / (D) / (Y)	
Radiotherapy (if any) (根治放射線照射)	Where? (部位)	Period (期間) M D Y ~ M D Y		Quantity in total (総線量) Gy
[for malignant neoplasm] When pathological findings (biopsy) shows the definitive diagnosis, the doctor should describe below.				
Final pathological finding, histological finding (最終病理学的所見 組織学的所見)	Positive / Negative (陽性・陰性)	When positive (陽性と判明した日) (M) / (D) / (Y)		Circle should be described on (上皮内癌または浸潤癌を選択) 1) Carcinoma in situ 2) invasive cancer
The date when the diagnosis was confirmed (診断が確定された日) M D Y				
The date when the diagnosis was informed (診断名が通知された日 患者に/家族に どういう診断名を伝えたか) to the patient ( M D Y ) as having ( ) to the family ( M D Y ) as having ( )				
The statements contained above are true and complete to the best of my knowledge and belief. (上記のとおり証明します)				
Name of hospital (病院名) _____			Date (M) / (D) / (Y)	
Address of hospital (病院住所) _____			Signature of attending physician (主治医の署名) _____	

## Notes regarding the filling in of medical certificates [for malignant neoplasm]

DAI-ICHI LIFE

<How Specific Illness Insurance works>

If the patient gets Specific Illness Insurance, an insurance payment is made in any of the following cases:

① The insured person is diagnosed as having a malignant neoplasm; ② The insured person suffers an acute myocardial infarction and then remains in a certain designated condition for at least a certain designated time; ③ The insured person suffers cerebral apoplexy and then remains in a certain designated condition for at least a certain designated time

★ The definition of malignant neoplasm reimbursed by Specific Illness Insurance (the contract)

● The neoplasm reimbursed by the insurance here means the disease which shows the existence of malignant neoplasm cells and the invasive/destructive increase of the malignant cells.

● Depending on the type of insurance the patient gets, the exceptions are as follows:

1. Carcinoma in situ (including melanoma in situ)
2. Skin cancer (excluding malignant melanoma)

< The notice when you describe the part of “final pathological finding, histological finding” in this attending physician's statement >

1. The final diagnosis which was confirmed by the biopsy and so on should be described in the “final pathological finding.”

2. In situ cancer means the invasion of malignant cells are limited in epithelium and neither invade nor destroy the submembrane area which divides epithelium and connective tissues: in this case the circle should be on the “Carcinoma in situ”. When the malignant cells invade submembrane area, the circle should be on “invasive cancer”.