

Body temperature table

Belonging _____

name _____

※ Measuring every day and when going to the office, submit it to a leader, and be sure to check and sign the leader!

		月 日			月 日			月 日			月 日			月 日			月 日			月 日			月 日		
		朝	昼	夜	朝	昼	夜	朝	昼	夜	朝	昼	夜	朝	昼	夜	朝	昼	夜	朝	昼	夜	朝	昼	夜
The body temperature symptom	40℃																								
	39℃																								
	38℃																								
	37℃																								
	36℃																								
	The cold symptom	Wear in	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±
Cough		#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
Sore throat		#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
Nasal		#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
Headache		#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
Palate and smell		#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
The digestive organ	Nausea	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
	Vomit	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
	The loose bowels	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
	Inappetent	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
	Stomachac	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-	#	+	±	-
Internal use time																									
AntipyreticCold medicine																									
Stamp of confirmation (Signature)																									
Note		<div style="border: 2px solid red; padding: 5px;"> ※ Please measure a morning and the evening every day. ※ Please be sure also to measure a holiday. </div>																							