

[別紙第 1 号様式]

※ () 輸入報告書 (Import Report of Medication)

_____/_____/_____
(Year) (Month) (Date)

(To Minister of Health, Labour and Welfare)

厚生労働大臣 殿

Name of Importer
Importer's Signature

Address of Importer

Phone Number

Fax Number

e-mail _____@

品 名 (Name and Size of the Import Products)		数 量 (Quantity)
輸入の目的 (Purpose of Import)	⑥ For Personal Use ⑩ Other Purpose ()	
誓約事項 (Oath)	<input type="checkbox"/> The import products above are solely for the purpose of import above, not for commercial use and/or gift for others.	
製 造 業 者 名 及 び 国 名 (Name of Manufacturer and Country of Origin)		
輸 入 年 月 日 (Import Date / Arrival Date)	AWB、B/L 等の番号 (AWB No. , B/L No. or Flight No.)	到着空港、到着港又は蔵置場所 (Arrival place (Airport, port or Storage place))
____/____/____ (Year) (Month) (Date)		
備考 (Note)		
厚生労働省 確認欄 (For Official Use)	特記事項 厚生労働省 厚生局 薬事監視専門官 毒物劇物監視員	

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[別紙第5号様式]

商 品 説 明 書 (Explanation of Pharmaceutical Product)

(Purpose of Import : For personal use or for treatment of patients)

商 品 名 (Name of product)	
化学名、一般的 名称又は本質 (Chemical Name or Active Ingredients Name)	①ヒアルロン酸(Hyaluronic acid) ②ボツリヌス毒素(Botulinum toxin) ③痩身効果(Slim figure, Weight Reduction) ④アスコルビン酸(Ascorbic acid) ⑤歯牙漂白剤(Dental bleach) ⑥ミノキシジル(Minoxidil) ⑦アバスタチン(Avastin, Bevacizumab) ⑧サリドマイド(Thalidomide) ⑨不活化ポリオワクチン(Inactivated Poliovirus Vaccine) ⑩リドカイン(Lidocaine) ⑪メラトニン(Melatonin) ⑫ヨウ化カリウム(Potassium iodine) ⑬タミフル(Tamiflu, Oseltamivir) ⑭シルデナフィル(Sildenafil, Viagra) ⑮漢方(Kampo products) ⑯その他(Other) ()
用 途 (Intended purpose)	①ガン治療(Cancer treatment) ②強壮剤・ED薬(Tonic medicine, ED medicine) ③うつ・気分障害・不眠治療(Treatment for Depression, Anxiety Disorder, Insomnia) ④栄養補充(Supplement) ⑤美容(Beauty) ⑥避妊(Birth control) ⑦アレルギー治療(Allergy treatment) ⑧育毛(Hair Restoration) ⑨ワクチン(Vaccine) ⑩皮膚麻酔(Topical anesthesia) ⑪眼科治療(Ophthalmology treatment) ⑫歯科治療(Dental treatment) ⑬特定疾病*治療(Specific disease treatment) ⑭震災関連(Earthquake disaster relations) ⑮動物の治療(Animal treatment) ⑯その他(Other) () ※特定疾病：介護保険法施行令第2条に規定する疾病（ガンを除く。） (※Specific disease; Disease prescribed in Nursing Care Insurance Law enforcement order Article 2. (Cancer is excluded.))
具体的な用途 (効能・効果、用 法) (Efficacy, Dosage)	
規 格 (Specifications)	

[別紙第 6 号様式]

商 品 説 明 書 (Explanation of Product)

(Pharmaceutical Products are excluded)

商 品 名 (Name of product)	
化学名、一般的 名称又は本質 (Chemical Name or Active Ingredients Name)	
用 途 (効能・効果) (Efficacy)	
規 格 (Specifications)	

(Sample)

e.g. Medicine, Medical Device, Cosmetics etc.

[別紙第1号様式]

Date of Request

※ (Medicine) 輸入報告書 (Import Report of Medication)

2013 / Jun / 1

(Year) (Month) (Date)

(To Minister of Health, Labour and Welfare)

厚生労働大臣殿

Name of Importer KANTO SHIN-ETSU

Importer's Signature

Sign here.

Address of Importer 1-1, Saitama-Shintoshin, Saitama

330-9713 JAPAN

Phone Number +81-48-740-0800

Fax Number +81-48-601-1336

e-mail kanto shinetsu@mhlw.go.jp

List name and size of the product. Attach a separate sheet in case the space is short.

Indicate the one we can reach.

品名 (Name and Size of the Import Products)		数量 (Quantity)
1. Aspirin tablet 200mg 2. K-PAP Machine Set • K-PAP Machine • K-PAP Mask (For replacement) • Tube(For replacement) ○ Put "Circle" on either one.		1. 100 tablets 2. (Details) • 1 unit • 3 sheets • 3 tubes
輸入の目的 (Purpose of Import)	<input checked="" type="checkbox"/> ⑥ For Personal Use <input type="checkbox"/> ⑩ Other Purpose ()	
誓約事項 (Oath)	<input checked="" type="checkbox"/> The import products above are solely for the purpose of import above, not for commercial use and/or gift for others.	
製造業者名及び国名 (Name of Manufacturer and Country of Origin)		
Kouseikyoku Co.Ltd. Japan		
輸入年月日 (Import Date / Arrival Date)	AWB、B/L等の番号 (AWB No. , B/L No. or Flight No.)	到着空港、到着港又は蔵置場所 (Arrival place (Airport, port or Storage place))
<u>2013 / Jun / 19</u> (Year) (Month) (Date)	<u>Japan Airlines JLXX</u>	<u>Narita International Airport</u>
備考 (Note)	In the case of receiving, write "AWB No." or "B/L No." In the case of bringing, write "flight No. that you board".	
厚生労働省 確認欄 (For Official Use)	特記事項 厚生労働省 厚生局 薬事監視専門官 毒物劇物監視員	

Write a unit.

Check

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(Sample)

[別紙第5号様式]

商 品 説 明 書 (Explanation of Pharmaceutical Product)

(Purpose of Import : For personal use or for treatment of the patient)

商 品 名 (Name of product)	Aspirin tablet 200mg
化学名、一般的 名称又は本質 (Chemical Name or Active Ingredients Name) Put "Circle" on item.	①ヒアルロン酸(Hyaluronic acid) ②ボツリヌス毒素(Botulinum toxin) ③瘦身効果(Slim figure, Weight Reduction) ④アスコルビン酸(Ascorbic acid) ⑤歯牙漂白剤(Dental bleach) ⑥ミノキシジル(Minoxidil) ⑦アバスチン(Avastin, Bevacizumab) ⑧サリドマイド(Thalidomide) ⑨不活化ポリオワクチン(Inactivated Poliovirus Vaccine) ⑩リドカイン(Lidocaine) ⑪メラトニン(Melatonin) ⑫ヨウ化カリウム(Potassium iodine) ⑬タミフル(Tamiflu, Oseltamivir) ⑭シルデナフィル(Sildenafil, Viagra) ⑮漢方(Kampo products) ⑯その他(Other) (Acetyl Salicylic Acid)
用 途 (Intended purpose) Put "Circle" on purpose.	①ガン治療(Cancer treatment) ②強壮剤・ED薬(Tonic medicine, ED medicine) ③うつ・気分障害・不眠治療(Treatment for Depression, Anxiety Disorder, Insomnia) ④栄養補充(Supplement) ⑤美容(Beauty) ⑥避妊(Birth control) ⑦アレルギー治療(Allergy treatment) ⑧育毛(Hair Restoration) ⑨ワクチン(Vaccine) ⑩皮膚麻酔(Topical anesthesia) ⑪眼科治療(Ophthalmology treatment) ⑫歯科治療(Dental treatment) ⑬特定疾病※治療(Specific disease treatment) ⑭震災関連(Earthquake disaster relations) ⑮動物の治療(Animal treatment) ⑯その他(Other) (Antipyretic analgesics) ※特定疾病：介護保険法施行令第2条に規定する疾病（ガンを除く。） (※Specific disease; Disease prescribed in Nursing Care Insurance Law enforcement order Article 2. (Cancer is excluded.))
具体的な用途 (効能・効果、用 法) (Efficacy, Dosage)	【Efficacy】 Antipyretics, analgesics and anti-inflammatory agents 【Dosage】 Adults : 1 tablet every four hours as needed
規 格 (Specifications)	Aspirin tablets cases in a box aluminum laminate 10 tablets.

(Sample)

[別紙第 6 号様式]

商 品 説 明 書 (Explanation of Product)

(Pharmaceutical Products are excluded)

商 品 名 (Name of product)	K-PAP Machine Set • K-PAP Machine • K-PAP Mask • Tube
化学名、一般的 名称又は本質 (Chemical Name or Active Ingredients Name)	• K-PAP Machine • K-PAP Mask (For replacement) • Tube(For replacement)
用 途 (効能・効果) (Efficacy)	Treatment for sleep apnea syndrome
規 格 (Specifications)	• K-PAP Machine Model; XXX • K-PAP Mask Size; XXX • Tube Size; Taper:XX. Length:XX