

7 FAM 330

HEALTH AND MEDICAL ISSUES AND INFORMATION PROGRAM, INTER-AGENCY COORDINATION, AND LISTS OF MEDICAL RESOURCES

(CT:CON-120; 12-06-2005)
(Office Of Origin: CA/OCS/PRI)

7 FAM 331 CONSULAR ROLE

(CT:CON-120; 12-06-2005)

As a consular officer, you develop information for the Consular Information Sheets (see 7 FAM 050 and 7 FAM 333) standard paragraphs about “medical facilities and health information.” You report on emerging communicable disease and other health issues. In addition, every three years, you develop a list of medical resources (doctors, dentists, hospitals, air ambulance services, and telemedicine services) available in your consular district.

7 FAM 332 SOURCES OF HEALTH INFORMATION

(CT:CON-120; 12-06-2005)

Sources that you may draw on for health information as you prepare the draft consular information sheet “medical facilities and health information” text, or proposed public announcements include:

- (1) The Regional Medical Officer (RMO) or other medical professionals at post;
- (2) Local news reports;
- (3) Your hospital visits;
- (4) Host country health officials;
- (5) Assessments by international organizations, such as:

- (a) World Health Organization;
 - (b) Pan American Health Organization; and
 - (c) Medical Association of South East Asian Nations.
- (6) The Centers for Disease Control and Prevention (CDC).

7 FAM 333 DISSEMINATING HEALTH INFORMATION THROUGH THE CONSULAR INFORMATION PROGRAM

(CT:CON-120; 12-06-2005)

- a. Medical and health information, depending upon its urgency and lifespan, may be presented through the Consular Information Program (see 7 FAM 050) in one or more of the following:
 - (1) Consular Information Sheet;
 - (2) Public Announcement;
 - (3) Travel Warning;
 - (4) Fact Sheet; and
 - (5) Warden Message.
- b. Consular information program documents have enumerated reflect situations involving disease, environmental hazards and other health related topics. These examples may be useful to you in developing draft language about similar scenarios.

HEALTH ISSUES AND THE CONSULAR INFORMATION PROGRAM

CA/OCS Intranet Consular Information Program Health Issues

- 2005 – Avian Flu Fact Sheet
- 2004 – SARS Fact Sheet
- 2003 – SARS Fact Sheet
- 2003 – SARS Public Announcement

- 2002 – Responding to Radiological and Nuclear Incidents Fact Sheet
- 2002 – Gabon, Congo Ebola Virus Outbreak Public Announcement
- 2001 – Chemical and Biological Agents Fact Sheet
- 2001 – Foot and Mouth Disease Fact Sheet
- 1999 – Anthrax Fact Sheet
- 1998 - Mexico, Central America Public Announcement on Environmental Health Hazards
- 1998 - Brunei, Indonesia, Malaysia Public Announcement on Environmental Health Hazards
- 1995 - Japan Subway Sarin Gas Attack Public Announcement
- 1986 – Travel/Health Advisory Chernobyl Nuclear Accident
- 1984 – Travel Advisory Bhopal Gas Leak

7 FAM 334 COMMUNICABLE DISEASES

7 FAM 334.1 Background

(CT:CON-120; 12-06-2005)

Working with U.S. Department of State regional medical officers (RMO's), you should continue to provide significant reporting on emerging health issues. In recent years, this coordination has proven essential, for example, in connection with the outbreaks of SARS, Anthrax, "Mad Cow" and the Ebola virus.

7 FAM 334.2 Liaison With The Centers For Disease Control And Prevention (CDC)

(CT:CON-120; 12-06-2005)

a. CA/OCS/ACS works closely with M/MED and the CDC in providing guidance to posts on outbreaks of communicable diseases in a number of ways:

- (1) The CA Home Page has links to CDC information on specific topics;

- (2) When appropriate, information about outbreaks is included in Consular Information Program documents; and
 - (3) The Consular Information Sheets include links to the websites for the CDC and the World Health Organization (WHO). These websites host information such as:
 - (a) General travelers' health guidance;
 - (b) Vaccinations and inoculations requirements and recommendations;
 - (c) Known local outbreaks of disease and prophylactic measures; and
 - (d) Travel advisories from the CDC.
- b. 42 U.S.C. 264 (Section 361 of the Public Health Service (PHS) Act) gives the Secretary of Health and Human Services (HHS) responsibility for preventing the introduction, transmission, and spread of communicable diseases from foreign countries into the United States and within the United States and its territories/possessions. This statute is implemented through regulations found at 42 CFR 70 and 42 CFR 71. Under its delegated authority, the Centers for Disease Control (CDC) and Prevention (CDCP) is empowered to detain, medically examine, or conditionally release individuals reasonably believed to be carrying a communicable disease.
- c. See the CDC Internet page for legal authorities for the control of communicable diseases. The CDC page also includes information about CDC quarantine stations and the CDC Division of Global Migration and Quarantine. 7 FAM 1363.2 provides guidance about medical evacuation of U.S. nationals suffering from a U.S.-designated quarantinable communicable disease.

Executive Order 13295 Quarantinable Communicable Diseases

April 1, 2005 - Executive Order: Amendment to E.O. 13295 Relating to Certain Influenza Viruses and Quarantinable Communicable Diseases; Federal Register Notice April 2005

Office of the Press Secretary April 4, 2003 – Executive Order: Revised List of Communicable Diseases; Federal Register Notice April 9, 2003; CDC Home Page Executive Order 13295

Note: Executive Order 13295 of April 4, 2003 revoked Executive Order 12452 of December 22, 1983. Executive Order 12452 revoked Executive

Order 9708 of March 26, 1946, Executive Order 10532 of May 28, 1954 and Executive Order 11070 of December 12, 1962.

See CDC – HHS Legal Response to SARS

d. Contacting the CDC: **Although CDC’s official authority is limited to the diseases listed in Executive Order 13295 you may consult with them on any other communicable disease travel-health related issues. Key contact points are:**

- (1) Duty Officer, Division of Global Migration and Quarantine (DGMQ)
24/7:

Telephone: 866-694-4867
FAX: 404-498-1633

- (2) DGMQ Duty Officer at the Director’s Emergency Operations Center (DEOC):

Telephone: 770-488-7100
FAX: 770-488-7107
E-mail: eocop@cdc.gov

- (3) Chief, Quarantine and Border Health Services Branch (for problems or administrative issues. The CDC can also be reached via the DEOC):

Division of Global Migration and Quarantine
National Center for Infectious Diseases
Centers for Disease Control and Prevention Office

Telephone: 866-694-4867
FAX: 404-498-1633 (please call prior to sending a fax)

7 FAM 334.3 The Inter-Agency Working Group (IWG)

(CT:CON-120; 12-06-2005)

During and after the 2003 SARS epidemic, the Department established the Inter-Agency Working Group (IWG) to coordinate U.S. Government preparedness and response to outbreaks of quarantinable infectious diseases such as SARS, and, potentially, Avian Flu.

- (1) The Department’s Office of International Health Affairs (OES/IHA) chairs the IWG. Several State Department Bureaus, including CA,

EB, INR, IO and regional bureaus, are active participants. The group also includes the National Security Council, the Homeland Security Council, the DGMQ/CDC and at least 9 other Federal agencies.

- (2) Subgroups composed of relevant agencies are addressing key lessons learned from the SARS epidemic such as:
 - (a) Medevac protocols;
 - (b) Passenger manifest access;
 - (c) Contact tracing; and
 - (d) Privacy restrictions.

7 FAM 334.4 Consular Responsibilities

7 FAM 334.4-1 General Actions

(CT:CON-120; 12-06-2005)

- a. **Identify Communicable Diseases:** Executive Order (E.O.) lists the official U.S.-designated quarantinable communicable diseases.
 - (1) Your host government may require special handling for quarantine of diseases not mentioned in pursuant to Executive Order 13295, as amended April 1, 2005 and Section 361(b) of the Public Health Service Act (42 U.S.C. 264(b)).

REVISED CDC LIST OF QUARANTINABLE COMMUNICABLE DISEASES

"(a) Cholera; Diphtheria; infectious Tuberculosis; Plague; Smallpox; Yellow Fever; and Viral Hemorrhagic Fevers (Lassa, Marburg, Ebola, Crimean-Congo, South American, and others not yet isolated or named).

"(b) Severe Acute Respiratory Syndrome (SARS), which is a disease associated with fever and signs and symptoms of pneumonia or other respiratory illness, is transmitted from person to person predominantly by the aerosolized or droplet route, and, if spread in the population, would have severe public health consequences.

"(c) Influenza caused by novel or reemergent influenza viruses that are causing, or have the potential to cause, a pandemic."

- (2) If available, obtain your host country's list of quarantinable

diseases. The CDC has information for some countries' protocols on the handling of such diseases.

- b. **Become familiar with local medical evacuation** resources and procedures, (see 7 FAM 360).
- c. **Establish working relationships with local health authorities**, your regional medical officer and your post's health unit
- d. **Ensure that post home pages** include links to the CDC Travelers' Health.

7 FAM 334.4-2 Handling Specific Cases

(CT:CON-120; 12-06-2005)

Upon learning of a U.S. citizen or national with a suspected or confirmed quarantinable communicable disease;

- (1) E-mail your CA/OCS/ACS country officer;
- (2) Copy the CA/OCS/ACS/EAP officer who holds the Regional Health Issues portfolio through the ACS Health Issues mailbox (Health-Issues@state.gov);
- (3) Provide all the information you have on the U.S. citizen's illness, situation, needs, etc;
- (4) Send daily e-mail reports on the U.S. citizen's situation to CA/OCS/ACS as indicated above; and
- (5) Follow up with cables as needed.
 - (a) Include CASC, CMGT, TBIO, and AMED tags;
 - (b) Route to:
 - CA/OCS/ACS/(your region)
 - The geographical country desk officer
 - OES/IHA
 - DASHO
 - CDC Atlanta
 - HHS Global Health

7 FAM 335 CONSULAR ASSISTANCE TO PERSONS WHO ARE HIV POSITIVE OR HAVE AIDS

(CT:CON-120; 12-06-2005)

Since the mid 1980's, the Department and posts have received an increasing number of inquiries regarding assistance to citizens who have been diagnosed as being HIV positive or suffering from AIDS.

- (1) Consular officers and local health authorities should provide a U.S. citizen who is HIV positive or is suffering from AIDS, like a U.S. citizen with any other medical condition, with all available and appropriate assistance.
- (2) They, their partners, friends, and family members should be treated with dignity and respect.
- (3) Handle cases with the utmost care, attention, sensitivity, and discretion.

NOTE: The CDC Revised List of Quarantinable Communicable Diseases, Executive Order 13295 DOES NOT include HIV or AIDS. It is not appropriate to routinely report cases of U.S. citizens who you learn are HIV positive or suffering from AIDS to local authorities.

7 FAM 336 PRIVACY AND QUARANTINABLE AND COMMUNICABLE DISEASES

(CT:CON-120; 12-06-2005)

a. The Privacy Act's "health or safety" condition of disclosure (see 7 FAM 066) is the one most relevant to cases concerning virulent, infectious diseases. Before a disclosure can be made without a Privacy Act Waiver (PAW) from the individual concerned, this exception requires a "showing of compelling circumstances affecting the health or safety of an individual". The Department considers serious contagious or quarantinable diseases, as defined and enumerated by the CDC to meet this standard in most cases. Therefore, information about a U.S. citizen/national infected with or exposed to such a disease generally may be released:

- (1) To a person (family members, doctors, hospital officials, local

- health authorities, etc.) who can reasonably be expected to care for or assist the U.S. citizen; and
- (2) To protect third parties. Infectious disease-related information may be given both to host country and U.S. authorities charged with safeguarding the "health or safety" of the public at large, and to airlines, cruise ship lines, etc. who have a responsibility for the safe travel of their passengers.
- b. Even if the U.S. citizen/national has recovered or is on his or her way to recovery, or has merely been exposed to a serious quarantinable disease, for example, without yet displaying symptoms, you may release information about the U.S. citizen's illness as provided in 7 FAM 335.1(a).
 - c. The Privacy Act requires us to notify individuals in writing whenever we invoke the "health or safety" condition of disclosure with respect to information about them that is otherwise safeguarded by the Act. Therefore, you must advise the Department (CA/OCS/PRI) (ASKPRI@state.gov):
 - (1) Whenever you use this condition of disclosure; and
 - (2) Of any information re the individual's last known address so that we may attempt to notify him or her.
 - f. Questions about the Privacy Act may be directed to CA/OCS/ACS or to CA/OCS/PRI at ASKPRI@state.gov, (see 7 FAM 060).

7 FAM 337 LISTS OF DOCTORS, HOSPITALS AND AIR AMBULANCE SERVICES

7 FAM 337.1 Consular Responsibilities

(CT:CON-120; 12-06-2005)

An important consular duty is the production and updating of the list of doctors, dentists and other medical professionals, hospitals, and air ambulance services for distribution to U.S. citizens seeking medical care in the host country. The list is particularly important in a country where medical resources are limited.

- (1) You must update this list at least every 3 years. You may update it more often as appropriate.

- (2) You must post copies on your post's Internet home pages, where U.S. citizens in need may find the information readily at any time, and provide written copies to CA/OCS/ACS.
- (3) You should keep track of new developments in physician and hospital referral services including electronic directories and telemedicine discussed in this section.

7 FAM 337.2 Developing Post Lists Of Medical Service Providers

(CT:CON-120; 12-06-2005)

- a. Post medical professionals are responsible for certain aspects of emergency preparedness reporting regarding local medical facilities. They may therefore have information that would be helpful to preparation of consular materials, (see 12 FAH-1 H-1210 and 3 FAM 1921.2). When preparing or updating a post's list of doctors, dentists, hospitals, etc., you should first consult with:
 - (1) Embassy nurse;
 - (2) Nurse practitioner;
 - (3) Regional Medical Officer (RMO);
 - (4) Panel physician; and
 - (5) Other medical experts.
- b. Contact local doctors, dentists and other medical professionals to ask if they want to be included on the list. See 7 FAM Exhibit 336.2-b, for a suggested outreach letter to physicians for gathering this data.
- c. Develop formatted questionnaires to ensure you obtain all required information, (see 7 FAM Exhibit 336.2-c).
- d. Try to include a wide variety of specialties such as internal medicine, pediatrics, psychiatry, etc. and incorporate a list of dentists, physical therapists, etc.
- e. Whenever possible, visit the foreign medical or psychiatric medical or detention facility so that you have some sense of its capabilities. In particular, investigate whether there is a substantial difference in the level of care available at public and private hospitals. Your list should explain the differences: for example, some public hospitals in developing

nations require patients to bring their own supplies, from pillows and bed sheets to surgical items and food.

- f. Include air ambulance firms capable of medical evacuations. Use a letter and questionnaire for air ambulance services similar to those you use for medical facilities

7 FAM 337.3 Verify Credentials

(CT:CON-120; 12-06-2005)

You must not include a name on the list unless the professional or facility has supplied proof of licensure (and satisfaction of any other permitting requirements) in the host country. You should:

- (1) Confirm that the individual, facility or service is licensed under local law and in good standing, that is, license not suspended or revoked; no successful malpractice claims publicized; and
- (2) If the host country does not have a system of licensure, contact CA/OCS/ACS for specific guidance.

7 FAM 337.4 Formatting and Publishing Your List Of Medical Resources

7 FAM 337.4-1 Identify Authorship

(CT:CON-120; 12-06-2005)

The list should clearly identify:

- (1) Your post (address, fax, telephone and email contact information);
- (2) The consular district that it covers (cities, islands, counties, etc.); and
- (3) The date it was prepared.

7 FAM 337.4-2 Disclaimer

(CT:CON-120; 12-06-2005)

Prominently display the following disclaimer on the first page of the list:

DISCLAIMER: The U.S. Embassy (Consulate) (City, Country)

assumes no responsibility or liability for the professional ability or reputation of, or the quality of services provided by, the medical professionals, medical facilities or air ambulance services whose names appear on the following lists. Names are listed alphabetically, and the order in which they appear has no other significance. Professional credentials and areas of expertise are provided directly by the medical professional, medical facility or air ambulance service.

7 FAM 337.4-3 Other Related Information

(CT:CON-120; 12-06-2005)

- a. List contact information for licensing, regulatory or other appropriate authorities in the host country.
- b. Include in the introduction of the list of doctors, dentists, air ambulance services and other medical resources the text of the medical/health paragraph of your current Consular Information Sheet (see 7 FAM 050).
- c. You should also provide hyperlinks to:
 - (1) Post's Internet home page;
 - (2) The CDC home page; and
 - (3) The CA Internet home page.
- d. As appropriate, list information on the availability of ambulance services, emergency "911" telephone numbers, etc. in the host country.

7 FAM 337.4-4 Format

(CT:CON-120; 12-06-2005)

- a. List names alphabetically.
- b. If the list is lengthy, or your consular district large, break the information down by city or other regional division.
- c. Include all the information you obtained through your outreach effort.
- d. List phone numbers to be called from within the host country and from the United States, including country codes, city codes and the international access codes.

FORMAT FOR MEDICAL SERVICE PROVIDERS

NAME

ADDRESS

TELEPHONE NUMBER

FAX NUMBER

E-MAIL ADDRESS

EDUCATION

YEARS MEDICAL DEGREES RECEIVED

LICENSURE

MEDICAL AREAS OF SPECIALIZATION

LANGUAGES

OFFICE HOURS

AFTER HOURS AVAILABILITY

EXPERIENCE TREATING ENGLISH SPEAKING or U.S. PATIENTS

e. See 7 FAM Exhibit 337 for a sample web page.

7 FAM 337.5 Reporting Requirement

(CT:CON-120; 12-06-2005)

There is currently a triennial reporting requirement for the list of medical resources. At least once every three years, send a cable, using CASC TAGS, to CA/OCS/ACS and CA/P providing the hyperlink address for your post website.

- (1) CA/P will link the CA Internet Home Page to post's list.
- (2) CA/OCS/ACS will ensure that the Consular Information Sheet includes a hyperlink to post's list.

7 FAM 337.6 Complaints

(CT:CON-120; 12-06-2005)

- a. On occasion, you may receive complaints from patients or family members regarding the quality of care, service, cost, or denial of service on the part of a person or facility on your list. You should:
 - (1) Get as much specific information as possible from the complainant;
 - (2) If appropriate, ask them to submit the complaint to you in writing;
 - (3) Consider directing complainants to the local medical association, Ministry of Health, or other licensing or oversight agency; and
 - (4) Advise CA/OCS about any complaints.
 - (a) Provide your opinion regarding removal of the name from your list.
 - (b) CA/OCS/ACS will work with CA/OCS/PRI, L and M/MED to address these concerns and provide guidance.
- b. If the U.S. Department of State Regional Medical Officer (RMO) or other U.S. official has advised Post personnel and dependents or other official Americans (including U.S. military) to avoid use of a professional or facility:
 - (1) Remove the professional or facility from the list;
 - (2) Notify the Department (CA/OCS/ACS and CA/P) immediately by cable;
 - (3) Update both your printed and virtual list immediately; and
 - (4) Share this information with the general U.S. community via the warden system.

NOTE: The Department considers medical information and resources to be included in the NO DOUBLE STANDARD policy. Negative information that potentially affects the health and welfare of U.S. citizens or nationals MUST be disseminated freely within the private community. (See 7 FAM 052.)

7 FAM 338 ELECTRONIC PHYSICIAN AND HOSPITAL DIRECTORIES

(CT:CON-120; 12-06-2005)

- a. Electronic medical directories published by professional organizations are common in the United States, and a number of foreign countries now have similar services available, including:
- (1) Physician referral services;
 - (2) Medical directories; and
 - (3) Hospital referral services;

**EXAMPLES OF ONLINE MEDICAL DIRECTORIES AND/OR
PHYSICIAN REFERRAL SERVICES**

United States

- **AMA Physician Select**
- **National Institutes of Health MEDLINE Directories**

Other Countries ...

- **NHS in England**
- **College of Physicians and Surgeons – Ontario, Canada – CPSOONCA Doctor Search**
- **U.S.A.I.D. Office of American Schools and Hospitals Abroad (ASHA)**

- b. Consider creating electronic hyperlinks to local medical association doctor referral services or hospital locator services on your post home page. See the U.S. Embassy Tokyo, American Citizens Services Medical Resources in Japan Internet page for an example of this use of electronic hyperlinks to local medical associations, (see 7 FAM 337 Exhibit).

NOTE: You must include the disclaimer at 7 FAM 336.4-2 with any electronic hyperlinks on your home page.

7 FAM 339 TELEMEDICINE

(CT:CON-120; 12-06-2005)

- a. Telemedicine electronically transports primary and specialty medical care into even the most remote areas. Persons who live hours from advanced medical care, or even from basic medical services, can directly access

high-quality medical expertise without leaving their community. Telemedicine also allows doctors at hospitals abroad to consult with doctors at hospitals in the United States via live video and audio communications. Telemedicine coverage can include:

- (1) Analysis of the patient's MRI, X-ray, CT scan, and other radiology studies;
- (2) Analysis of pathology slides;
- (3) Treatment plans recommended by top sub-specialists in the field,
- (4) Conference call, if needed, between the attending doctor and U.S. specialist; and
- (5) Bringing a physician located hundreds of miles away into the actual examination or operating room via a live interactive system.

NOTE: Telemedicine doctors in the United States do NOT communicate directly with patients who live overseas. The communication is doctor to doctor.

- b. A number of U.S.-based facilities offer this assistance to patients abroad, such as a consortium of Boston hospitals.
- c. If you find that the host country has similar arrangements with a hospital in the United States or a third country, you could also include this information in your lists of medical resources in the home country.

SAMPLE INTERNATIONAL TELEMEDICINE SITES

- **American Telemedicine Association**
- **Telemedicine Research Center and Information Exchange**
- **Telehealth Ontario**
- **The University of Queensland Centre for Online Health**
- **International Society for Telemedicine**
- **Yale Office of Telemedicine**

7 FAM EXHIBIT 336.2-B SAMPLE LETTER TO MEDICAL SERVICE PROVIDERS

(CT:CON-120; 12-06-2005)

Post Letterhead

Dear Dr. XXX:

The U.S. (**Embassy-Consulate General -Consulate**) maintains a list of doctors, dentists and medical facilities that are available to treat U.S. citizens traveling in (**name of country**) or those resident here.

In preparing the list, we try to provide U.S. citizens with some basic information about the professional background of the physician, dentist or other medical professional and medical facilities.

If you would like to be included on our list, please return the attached form by (**date**). Information is updated every three years and is given to anyone inquiring at the (**embassy-consulate**) about medical care.

We are prohibited from recommending any particular doctor, dentist or facility and simply make this information available without recommendation. Please understand that return of the questionnaire merely indicates your interest in being included on the list. We cannot guarantee that you will be included.

Thank you for your time and interest.

Sincerely yours,

Signature of Consular Officer

Typed Name of Consular Officer

Title of Consular Officer

Enclosure: Questionnaire

7 FAM EXHIBIT 336.2-C SAMPLE QUESTIONNAIRE FOR MEDICAL SERVICE PROVIDERS

(CT:CON-120; 12-06-2005)

**U.S. Embassy
(City, Country)**

**PLEASE COMPLETE THE INFORMATION
REQUESTED IN THE SPACE PROVIDED. IF
YOU NEED ADDITIONAL SPACE, PLEASE
ATTACH ADDITIONAL DOCUMENT/PAGES.**

Name:

Address:

Telephone:

Fax:

Email Address:

Medical Specialty:

Education (including years of graduation):

Medical License (Specify Authority That Issued License and Attach Copy)

Professional Association Membership; Board Membership

Languages Spoken:

English Language Spoken (Extensive, Limited, None)

Office Hours:

After Hours Availability:

7 FAM EXHIBIT 337 SAMPLE WEB PAGE – U.S. EMBASSY TOKYO

(CT:CON-120; 12-06-2005)

Medical Resources in Japan

AMBULANCE: 119

Aichi	Kagoshima	Nara
Akita	Kanagawa	Niigata
Aomori	Kobe	Oita
Chiba	Kumamoto	Okinawa
Fukuoka	Kyoto	Osaka
Fukushima	Miyagi (Sendai)	Saga
Gunma	Miyazaki	Saitama
Hiroshima	Nagano	Sapporo
Hokkaido	Nagasaki	Shizuoka
Hyogo	Nagoya	Tochigi
Ibaraki	Naha	
Iwate		

Tokyo

General Hospitals (English speaking staff available)

Dental

Dermatology

Internal Medicine

Obstetrics & Gynecology

Ophthalmology

Opticians

Orthopedics

Pediatrics

Psychiatry / Psychology

Psychiatric Hospitals

Pharmacies

Other Hospitals

Yamagata

Yamaguchi

Yamanashi

The US Government assumes no responsibility for the professional ability or reputation of the persons or medical facilities whose name appear on this list.

Follow this link for information on Importing or Bringing Medication into Japan for Personal Use

We also have specific information available on Severe Acute Respiratory Syndrome (SARS)

An alternate source of medical referrals is provided by the AMDA International Medical Information Center of Japan on their website. They also provide telephone help in English Monday through Friday between 9:00 AM and 5:00 PM.

Call 03-5285-8088 in Tokyo, or 06-4395-0555 in Osaka.

Assistance in Chinese, Spanish, Korean and other languages is also available.

AMDA can also help you with questions about the Japanese health insurance system.

For more information, including our phone and FAX number, please contact the office serving your part of Japan.

The U.S. Embassy and our Consulates are closed on both U.S. and Japanese holidays.

This is an official source of U.S. Government information on the Web. Inclusion of Non-US Government links or information does NOT imply endorsement of contents.