Access <u>https://i-wellness-p.com/j00/j00201.jsf</u> from your PC or smartphone!

*If you have already registered, please log in and proceed to the reservation without registering. *If you forget your password, please re-register.

*Please be sure to check the "Regular Health Checkup Information".



1) This is the top screen after logging in. Select "Make a reservation for health checkup".

Select the contents and medical	of the examination institution.	Select the desired date.	Entry of the contact information and other wishes	Confirmation	Comple
*To go back Top,	Press the Back	button on the scre	en.		
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②Please select your desired course from the dropdown. * Please check the periodic health checkup information for course content.

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STEP1 : Course an Selection	STEP2 : Search for medical institutions STEP3 : List of search (Select criteria)
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Your <mark>Required</mark> Health Checkup Course	Advanced checkup AgeSlover (f)
Required Pregnancy and preastfeeding	Some of checkup tests are not allowed for pregnant women so it needs to be confirmed. If the situation changes from the time of appointment by the day of health checkup, places contact at the medical clinic institution directly in advance.
	In pregnancy May be pregnant Not pregnant If you are breastfeeding, you may not be able to have some tests depending on the
	medical institution.
Required Mandatory tests	If Please select one of the stomach cancer screenings. If you do not wish to have a stomach cancer screening, please consider standard checkup.
	Stomach test
	If there is no vacancy for a stomach endoscopy, I want to undergo a stomach x-ray.
	Please note that the copayment may be different between stomach endoscopy and stomach x-ray.
Optional tests	
	Cervice cycology
	ABC checkup @
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③Please check the desired selection item and select "Select medical institution/consultation date".



5 Select "Select this medical clinic".

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s): unspecified / Area(Transportation) Detail - unspecified	on): unspecified How to make an	appointment - unspecified	make direct
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④Please enter your search criteria and select"Search".



6 Select "Select date of consultation".



<Instant reservation>

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For instant reservations, select one desired date from the calendar, select reception time, and select "Next".



⑧Enter your daytime contact information and sending destination, and mark ☑ in the home address confirmation field.

Point

(Request for bringing children) The condition is that you can wait alone.

[Request for same-day consultation]

Please enter if you would like to be seen on the same day.

*Customer numbers cannot be provided at the reservation center. After logging in to i-Wellness, there will be a notice at the top of the screen, so please check it if you will be receiving treatment on the same day.

*If you would like to be examined on the same day, please also apply.

[Other requests]

Please enter any other requests.

- * People who need physical support
 * People who need female doctors
- and female engineers etc

<Request reservation >

			2024/0	4	20	24/05>	Date	s				
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O For request reservations, select 5 desired dates from the calendar and select "Next".

Point

[Other desired consultation dates and times]

• If you would like to add a consultation date, please enter the "desired period & dates you would like to avoid within the desired period (up to 3)".

• If you have a start time for the health checkup you would like to reserve, please enter it. For example, this is a convenient feature for those who have to drop off and pick up their children.

	Want to come with your child(ren)	To be capable of	f waiting alone is the condition	on.					
		○ No ● Yes							
		The 1st person	🗸 years old						
sending	1	+ Addition ,	Want to undergo the examination on the same day	If you want to und please let us know ▲ Only the persons can undergo the number after ch A You can find you postcard, letter, ▲ It is necessary fo to submit an app ● No ● Yes Customer ID	ergo the exa the person's s who are cus examination ecking with th mit an applic mr customer n and e-mail. or the person plication.	mination wi : customer r tomers of ou on the same e person. Al ation. umber at the who underg	ith someone or number, name, ur company's he day. Please ent lso, let the perso a header of i-We oes the examina (Eight-digit on alphanumeric	the same and date o alth checkup are the custo so hnow that liness or in t tion on the e-byte characters]	day, f birth.) program (mer t it is the same day
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	Other requests that you have	If there is anyth than the above, Chatbot or see f Please direct medications I If you need s communication No • Year	ing that you need to report please enter it. If you have the FAQ page. Iy report your disease history i to the medical institution. support or prior information, st ng in writing, or accompanying s	to the medical institution or any questions, please ask and information on current uch as using a wheelchair, g a helper.	other the				
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*This screen will not appear if you apply for a direct reservation. If you are making a direct reservation, please inform the medical institution directly of your request.

First choice Cro Center(501001:	ew Insurance Hokkaido Health Management						
- An	〒0600002 Maruto Sapporo Building 4th and 5th floor, Kita 2-jo Nishi 1- chome, Chuo-ku, Sapporo-shi, Hokkaido [Map]						
	Access 5 minutes walk from Odori subway station						
	Preferred appointment date						
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Optional tests							
Flow of health che	ckup						
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2 Final confirmation of your checkup The final confirmation letter will be sent two weeks before your health checkup.							
4 Day of Have your We will ser Please ans	your checkup checkup at the medical clinic you made an appointment with. d you a satisfaction survey by email the day after your health checkup, so wer the satisfaction survey.						
[1] 5 Health It will take Your result	checkup results about a few weeks for you to receive your results, is will be sent to you from the medical clinic.						
< Back	Register appointment >						

⑦Confirm the reservation details and select "Reservation Registration".

- *Please check to see if you can receive an email saying "Your reservation request for [Health Checkup] has been accepted" to your registered email address.
- *If you make a reservation at a medical institution that offers immediate reservations, you will receive an email stating that your reservation has been confirmed for [Health Checkup].

<cancel reservation>



After logging in, select "Reservation" on the top page, select "Cancel reservation", and then select "Cancel reservation" on the confirmation screen. *Reservations made through i-Wellness can be canceled up to 8 days before the reservation date. After the 7th, please contact the Health Checkup Reservation Center.

<Reservation change>



After logging in, select "Reservation" on the top page and select "Change reservation."