**Wakayma Medical University**

One department training period is basically planned for two weeks. Two departments of student’s choice make four weeks in total.

First students have to be nominated by their home / sending university. After their acceptance is approved by the departments in Wakayma, students will need to submit application form with immunization sheet 1 month prior to the program starts.

**Period in 2023**:

Basically the clerkship is open anytime except between the end of July to the end of August.  Unfortunately, there are no space for international students in April, 2023. See the sheet of the schedule next page.

**Application Procedure**:

1. Students have to state their three departments of choice in priority order. The third department is just for the back-up in case the either of the first two is not approved.
2. The approval from the department will have to received. Please, note that the acceptance is official only upon the approval of the department. The student will be informed by Prague exchange coordinator.
3. Nominated and officially accepted students will have to prepare the application form and immunization sheet, then submit them 1 month prior to the program starts.
4. The accommodation will be booked by the International Department of Wakayma Medical University. The dormitory fee is 1,230JPY/day. <https://www.wakayama-med.ac.jp/med/kokusai/e/house.html>

**Covid rules:**

Currently all foreigners visiting Japan are required to have either three time vaccinations or negative result of Covid-19 within 72 hours prior to the departure.  Besides, there is own school policy for the international students for clinical clerkship at the hospital which is either take negative result of Covid-19 test after arriving Japan or three days self-isolation before the program starts.  Thus students are asked to arrive on Thursday or Friday of the previous week before the program starts. These measurements and policy are subject to change depending on the social circumstances.  Students must have the health insurance covers Covid-19 treatment in Japan.

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| **Clinical Training Schedule - Wakayama 2023** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | January |  | February |  | March |
|  |  |  |  |  |  |
|  | S | M | T | W | T | F | S |  | S | M | T | W | T | F | S |  | S | M | T | W | T | F | S |
|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  |   |   |   | 1 | 2 | 3 | 4 |  |   |   |   | 1 | 2 | 3 | 4 |
|  | 8 | 9 | 10 | 11 | 12 | 13 | 14 | ●1 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | ●3 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
|  | 15 | 16 | 17 | 18 | 19 | 20 | 21 |  | 12 | 13 | 14 | 15 | 16 | 17 | 18 |  | 12 | 13 | 14 | 15 | 16 | 17 | 18 |
|  | 22 | 23 | 24 | 25 | 26 | 27 | 28 | ●2 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | ●4 | 19 | 20 | 21 | 22 | 23 | 24 | 25 |
|  | 29 | 30 | 31 |   |   |   |   |  | 26 | 27 | 28 |   |   |   |   |  | 26 | 27 | 28 | 29 | 30 | 31 |   |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | April |  | May |  | June |
|  | S | M | T | W | T | F | S |  | S | M | T | W | T | F | S |  | S | M | T | W | T | F | S |
|  |   |   |   |   |   |   | 1 |  |   | 1 | 2 | 3 | 4 | 5 | 6 |  |   |   |   |   | 1 | 2 | 3 |
| ●5 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | ●7 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | ●9 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|  | 9 | 10 | 11 | 12 | 13 | 14 | 15 |  | 14 | 15 | 16 | 17 | 18 | 19 | 20 |  | 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| ●6 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | ●8 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | ●10 | 18 | 19 | 20 | 21 | 22 | 23 | 24 |
|  | 23 | 24 | 25 | 26 | 27 | 28 | 29 |  | 28 | 29 | 30 | 31 |   |   |   |  | 25 | 26 | 27 | 28 | 29 | 30 |   |
|  | 30 |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | July |  | August |  | September |
|  | S | M | T | W | T | F | S |  | S | M | T | W | T | F | S |  | S | M | T | W | T | F | S |
|  |   |   |   |   |   |   | 1 |  |   |   | 1 | 2 | 3 | 4 | 5 |  |   |   |   |   |   | 1 | 2 |
| ●11 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |  | 6 | 7 | 8 | 9 | 10 | 11 | 12 |  | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|  | 9 | 10 | 11 | 12 | 13 | 14 | 15 |  | 13 | 14 | 15 | 16 | 17 | 18 | 19 | ●14 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| ●12 | 16 | 17 | 18 | 19 | 20 | 21 | 22 |  | 20 | 21 | 22 | 23 | 24 | 25 | 26 |  | 17 | 18 | 19 | 20 | 21 | 22 | 23 |
|  | 23 | 24 | 25 | 26 | 27 | 28 | 29 | ●13 | 27 | 28 | 29 | 30 | 31 |   |   | ●15 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
|  | 30 | 31 |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | October |  | November |  | December |
|  | S | M | T | W | T | F | S |  | S | M | T | W | T | F | S |  | S | M | T | W | T | F | S |
|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |  |   |   |   | 1 | 2 | 3 | 4 |  |   |   |   |   |   | 1 | 2 |
| ●16 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | ●18 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | ●20 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|  | 15 | 16 | 17 | 18 | 19 | 20 | 21 |  | 12 | 13 | 14 | 15 | 16 | 17 | 18 |  | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| ●17 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | ●19 | 19 | 20 | 21 | 22 | 23 | 24 | 25 |  | 17 | 18 | 19 | 20 | 21 | 22 | 23 |
|  | 29 | 30 | 31 |   |   |   |   |  | 26 | 27 | 28 | 29 | 30 |   |   |  | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 31 |   |   |   |   |   |   |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |
|  | ●number is the first week of the clinical training |  |  |  |  |   |  |  |  |  |  |  |
|  |   | no clinical training due to holidays |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Immunization**

All visiting medical students who submit an application for clinical clerkship at the Wakayama Medical University and its affiliated hospitals are required to show proof of health insurance and each of the immunizations below. This mus be certifiied by by school official from their home univeristy.

1. MMR (Measles, Mumps, Rubella – two doses of vaccine given at least one month apart): Date #1 Date #2 ***and*** Date of (+) Rubella titer:

***or***

Measles immunization date: Date #1 Date #2 ***or*** Date of (+) titer

Mumps immunization date: ***or*** Date of (+) titer:

Rubella date of (+) titer:

2. Chickenpox (Varicella):

Immunization Date #1 Date#2 ***or*** Date of (+) titer ***or*** History of disease □Yes □No

3. Hepatitis B (Series of three ***or*** positive titer):

Immunization Date #1 Date #2 Date #3

***and/or*** Date of (+) titer

4. Personal Health Insurance: Does your insurance cover the activities of your assigned elective program in Japan? □Yes □No