



UM Touch

**PANDUAN PENGISIAN
BORANG PENGISYTIHARAN KESIHATAN
DAN IMBASAN KOD QR UNTUK PELAWAT DAN KONTRAKTOR**
*GUIDE TO FILL IN HEALTH DECLARATION FORM AND QR CODE SCANNING
FOR VISITORS AND CONTRACTORS*

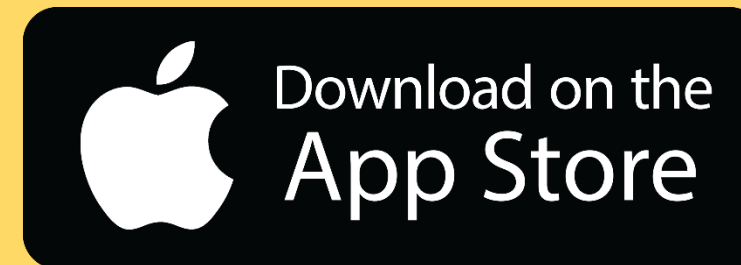
disediakan oleh
prepared by:

Bahagian Keselamatan & Kesihatan Pekerjaan dan Alam Sekitar (OSHE)
Occupational Safety & Health and Environment Division



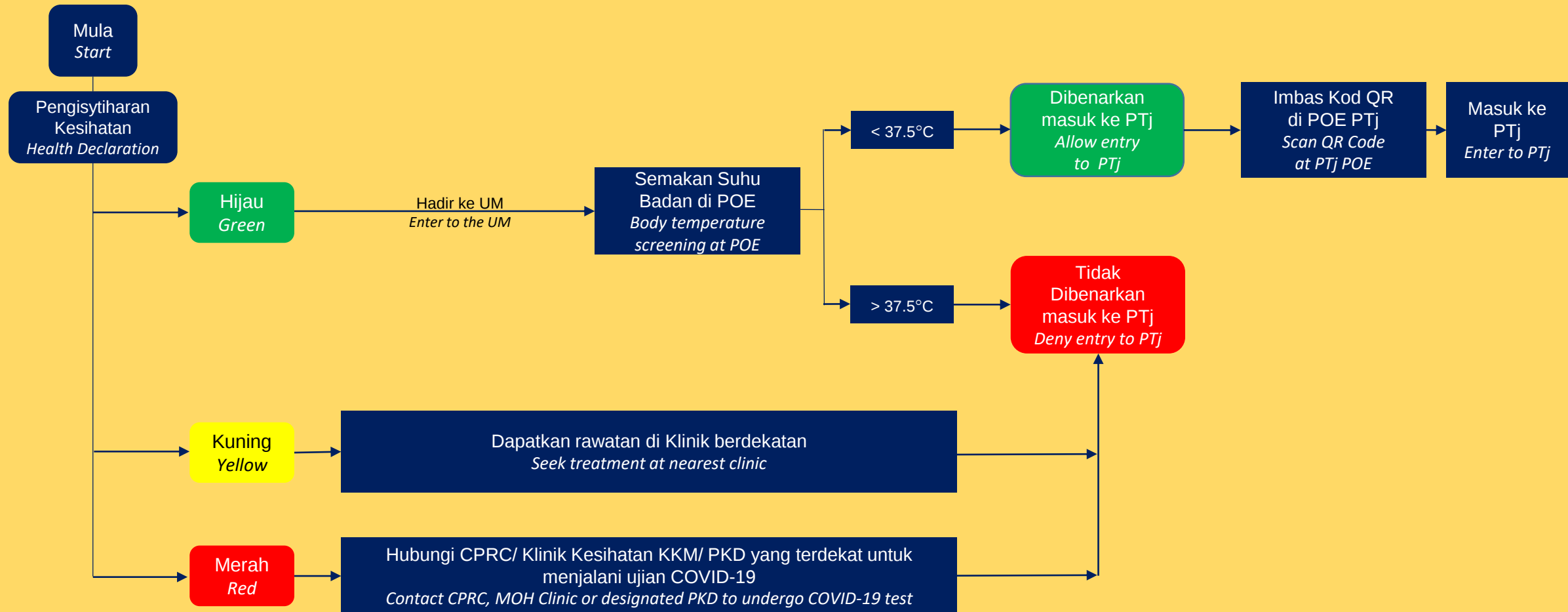
UM Touch

Sila muat turun aplikasi UM Touch
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*Please download the latest version
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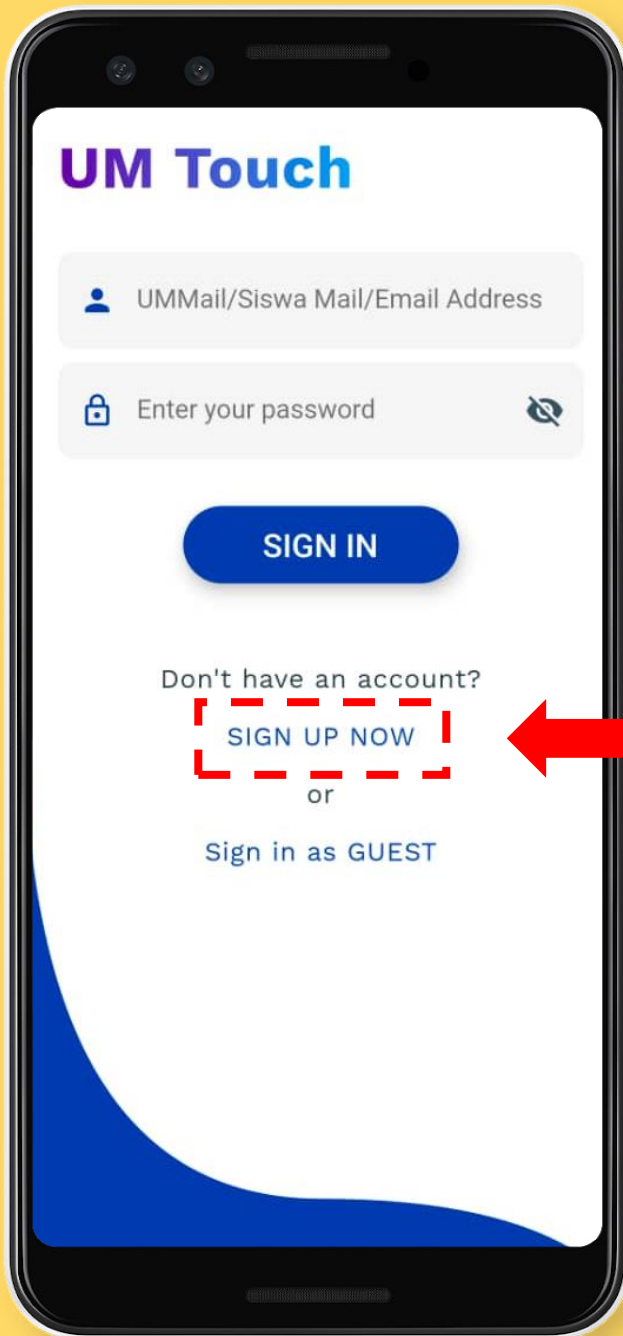


Carta Alir Pengisytiharan Kesihatan dan Imbasan Kod QR

Health Declaration and QR Code Scanning Process Flow

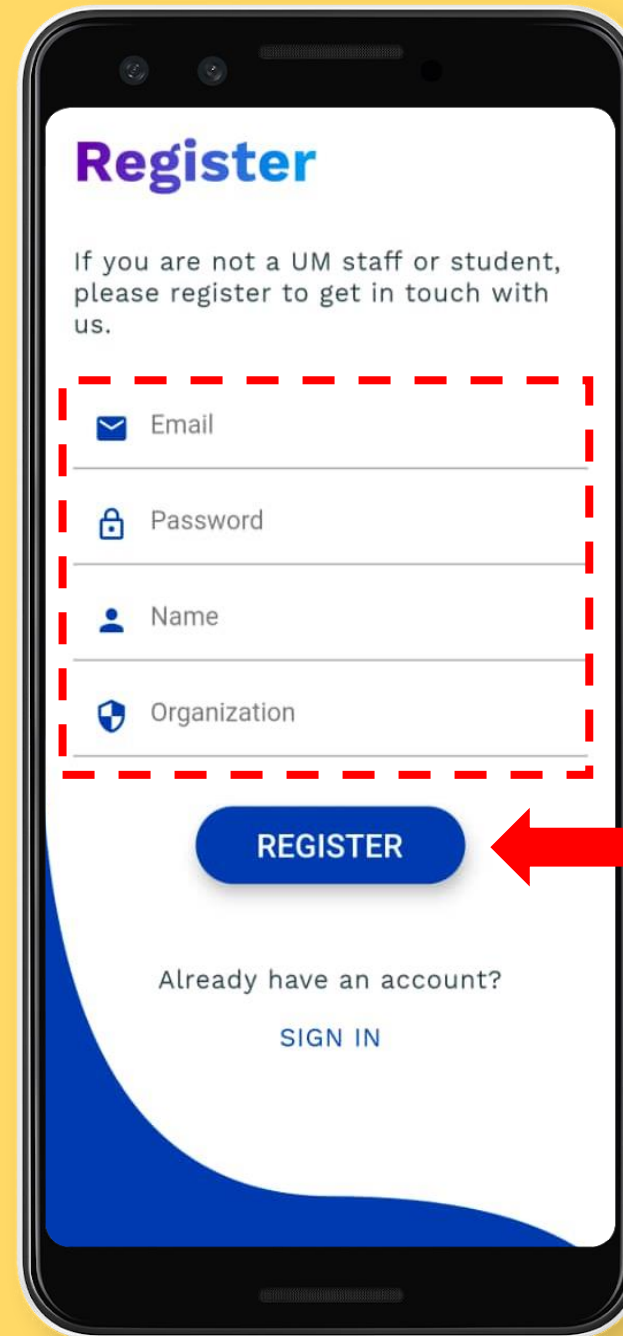


POE = Point of Entry
Lokasi Pengambilan Suhu Badan
Location for body temperature
scanning



1

Klik butang
SIGN UP NOW
Click **SIGN IN**
NOW button



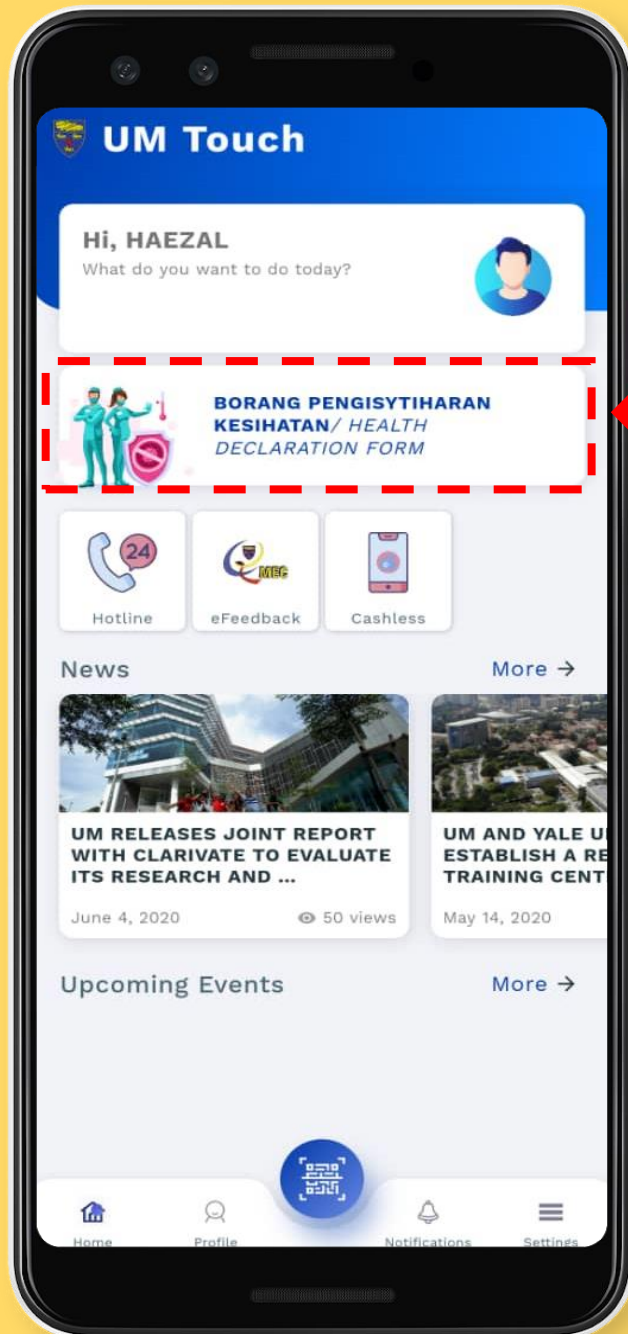
2

Isi maklumat
untuk
pendaftaran dan
klik butang
REGISTER
Fill in information for
registration and click
REGISTER button

Nota:
Pengguna hanya perlu
daftar sekali sahaja
User is required to
register once only

3

Klik
BORANG PENGISYTIHARAN
KESIHATAN
Click
HEALTH DECLARATION FORM



← Health Declaration

1. Adakah anda mempunyai sebarang symptoms seperti demam, batuk, sakit tekak ATAU sesak nafas?
Do you have any symptoms such as fever, cough, sore throat OR difficulty in breathing?

☐ Ya/Yes ☐ Tidak/No

2. Adakah anda telah ke luar negara dalam tempoh 14 hari yang lepas?
Have you been travelling outside of Malaysia in the past 14 days?

☐ Ya/Yes ☐ Tidak/No

3. Dalam tempoh 14 hari yang lepas, adakah anda tinggal serumah dengan pesakit COVID-19?
Have you been living with someone who was diagnosed with COVID-19 in the past 14 days?

☐ Ya/Yes ☐ Tidak/No

4. Dalam tempoh 14 hari yang lepas, adakah anda bersemuka dengan pesakit COVID-19 lebih dari 15 minit dalam jarak kurang satu meter di ruang tertutup?
Have you been in close contact (face to face, more than 15 minutes in a confined space with a distance less than one meter) with someone who was diagnosed with COVID-19 in the past 14 days?

☐ Ya/Yes ☐ Tidak/No

5. Dari pengetahuan anda, adakah anda berada bersama dengan pesakit COVID-19 di ruang tertutup melebihi dua jam (contohnya kenderaan awam) dalam tempoh 14 hari yang

4

Jawab SEMUA
6 soalan
Answer ALL
6 questions

← Health Declaration

To the best of your knowledge, have you been in a confined space with someone diagnosed with COVID-19 for more than two hours (for example, public transport) in the past 14 days?

☐ Ya/Yes ☒ Tidak/No

6. Adakah anda telah menghadiri mana-mana perhimpunan yang dikaitkan dengan kluster COVID-19 dalam tempoh 14 hari yang lepas?
Have you been to any gathering which is related to COVID-19 cluster in the past 14 days?

☐ Ya/Yes ☒ Tidak/No

Saya mengesahkan bahawa semua maklumat yang diberikan adalah betul dan tepat. Tindakan boleh dikenakan jika maklumat yang diberikan adalah palsu.
I hereby declare that all the information given in this form is true and correct. Action can be taken if the information provided is false.

Nama/Name :
No Staf/Staff No :

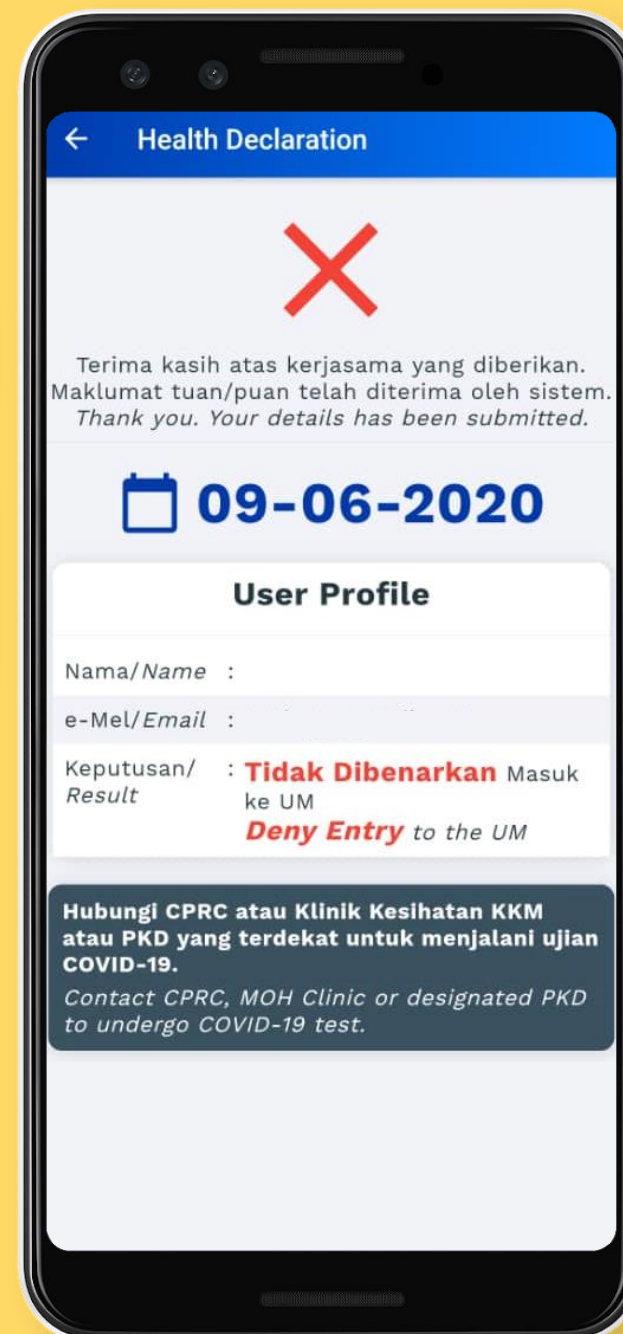
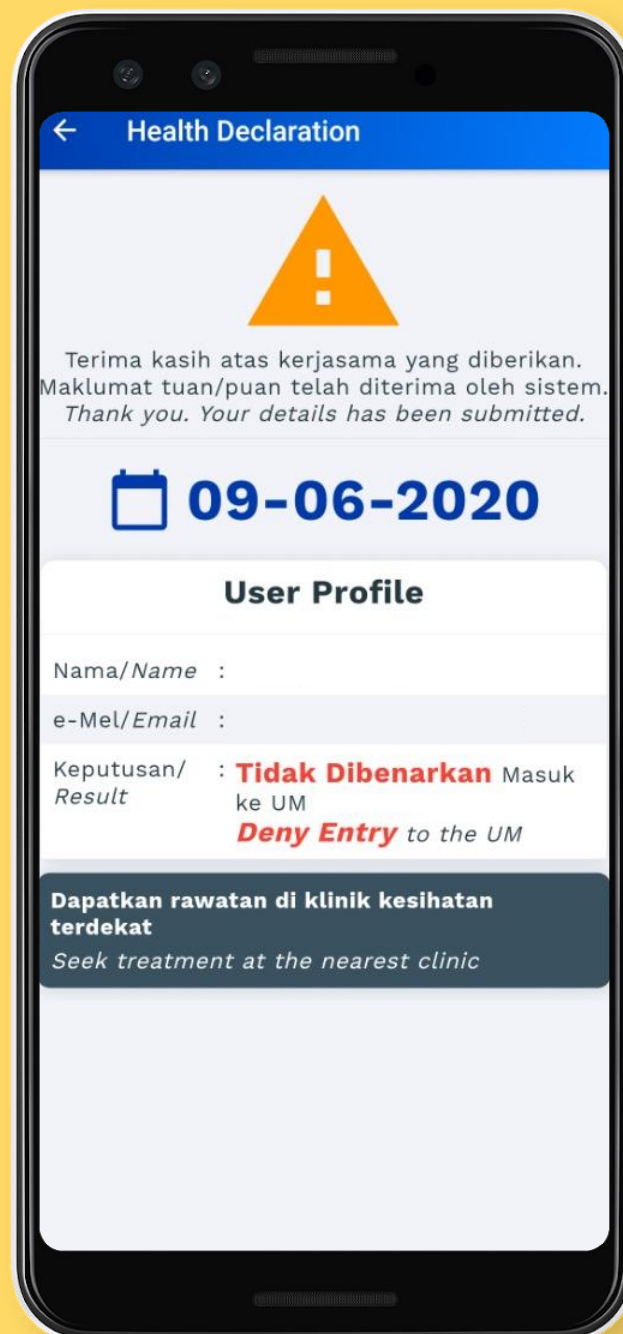
Hantar / Submit

5

Klik HANTAR
Click SUBMIT

11 Jun 2020

6



Keputusan akan dipaparkan di sini
Result will be shown here

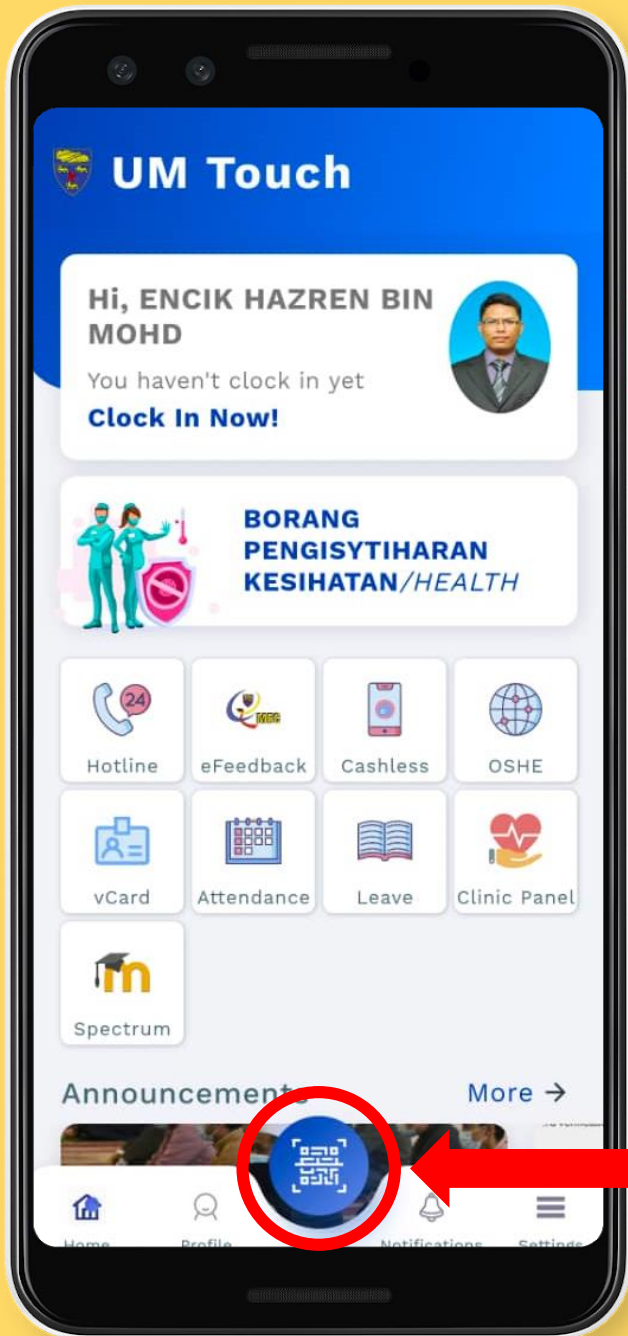
Tunjukkan keputusan kepada POE PTj
Please show your result to PTj's POE

**GREEN****Dibenarkan Masuk ke UM***Allow Entry to the UM***YELLOW****Tidak Dibenarkan Masuk ke UM***Deny Entry to the UM*

Sila dapatkan rawatan di klinik kesihatan terdekat
Seek treatment at the nearest clinic

**RED****Tidak Dibenarkan Masuk ke UM***Deny Entry to the UM*

Hubungi CPRC atau Klinik Kesihatan KKM atau PKD yang terdekat untuk menjalani ujian COVID-19 dan maklumkan OSHE.
Contact CPRC, MOH Clinic or designated PKD to undergo COVID-19 test and notify OSHE.



7

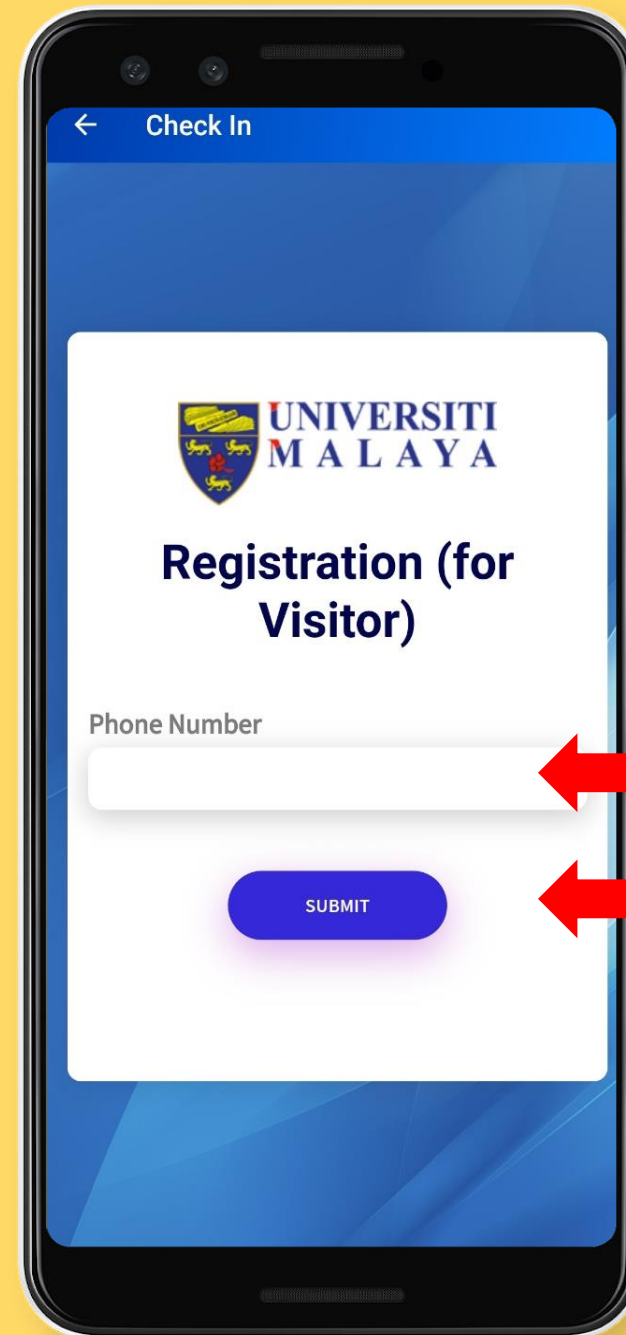
**Di POE PTj
At PTj POE**

Dapatkan bacaan suhu badan
Get your body temperature

8

Klik butang **Pengimbas Kod QR** untuk mengimbas kod QR
*Click **QR Code Scanner** to scan QR Code*

(Tersedia dalam/Available at **UM Touch Version 3.6.4**)

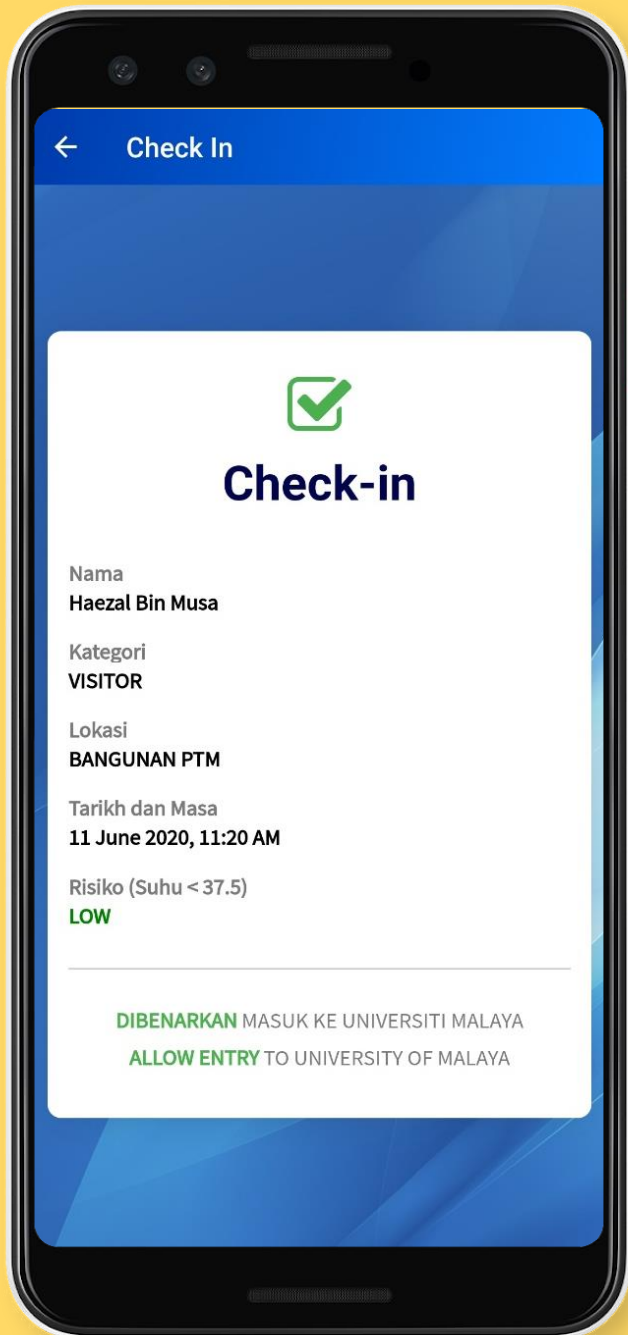


9

Masukkan Nombor Telefon
Fill in Phone Number

Klik **Submit** dan boleh memasuki bangunan/ PTj
*Click **Submit** and can enter the building/ PTj*

10



← Check In



Check-in

Nama
Haezal Bin Musa

Kategori
VISITOR

Lokasi
BANGUNAN PTM

Tarikh dan Masa
11 June 2020, 11:20 AM

Risiko (Suhu < 37.5)
LOW

DIBENARKAN MASUK KE UNIVERSITI MALAYA
ALLOW ENTRY TO UNIVERSITY OF MALAYA

Semua pelawat dan kontraktor perlu mengisi Borang Pengisytiharan Kesihatan sebelum memasuki UM. Sekiranya perlu memasuki UM setiap hari, pelawat dan kontraktor juga perlu mengisi borang ini setiap hari.

All visitors and contractors are required to fill the Health Declaration Form (HDF) before entering UM. If you are required to enter to UM everyday, you will need to fill in HDF on daily basis.

Contact OSHE:
03-7967 7925 / 3532
covid19_oshe@um.edu.my