

Relevant procedure	Preparing facility/institution	Name of record	Matters contained in each record							Legal basis	Securement of updates	Securement of supervision	Remarks		
			17a Specified matters	17b Deprivation date, time, location and authority	17c Authority that ordered deprivation and reason	17d Deprivation supervisory authority	17e Location of detention facility, date and time of detention, and authority responsible for facility	17f Health condition of deprived person	17g Cause of death/denatation of deprived individual					17h Date and time of release/transfer, destination of transfer, authority responsible for transfer	
Criminal procedure	Detention facility	Detainee Registry/Detainee Medical Examination	<ul style="list-style-type: none"> Permanent domicile Address Occupation Name Gender Date of birth 	<ul style="list-style-type: none"> Date and time of arrest Name and affiliation of the arrested person 	<ul style="list-style-type: none"> Affiliation and name of arrested person Name of continuing detention warrant Summary of facts of crime 		<ul style="list-style-type: none"> Date and time of detention (no mention of location of detention facility and authority with responsibility over the said detention facility, but the Detainee Registry is found at the facility detaining the detainee and clearly states the location of detention facility and authority (detention service manager) with responsibility.) 	<ul style="list-style-type: none"> Physical trauma Illness Pre-existing medical conditions Treatment Date and time of medical exam Type of medical exam Symptoms Results of medical treatment Hospital Physician 	<ul style="list-style-type: none"> Condition of death Cause of death Destination of remains 	<ul style="list-style-type: none"> Date and time of release Date and time of transfer Destination of returning home Destination of transfer 	<ul style="list-style-type: none"> Article 5, Regulations Concerning Detention of Detainees 	<ul style="list-style-type: none"> Updated completely and promptly, including mention in records at time of physical problem health or death, etc. 	<ul style="list-style-type: none"> Inspection by NPA Field inspections by prefectural police headquarters 	<ul style="list-style-type: none"> For 17h, the location of arrest is specified on the arrest proceeding by the judicial authority and stored For 17h, the authority responsible for the transfer specifies on the transfer directive and stored by the institution receiving the transfer 	
	Penal institution	Inmate Identification Record / Health Exam Registry / Record of Death	<ul style="list-style-type: none"> Permanent domicile Address Occupation Name Gender Date of birth 	<ul style="list-style-type: none"> Date and time of admission Court handing down finalized sentence 	<ul style="list-style-type: none"> Court handing down finalized sentence Name of crime 	<ul style="list-style-type: none"> Facility/institution name 	<ul style="list-style-type: none"> Facility/institution name Date and time of admission 	<ul style="list-style-type: none"> Records of health condition 	<ul style="list-style-type: none"> Cause of death and date of death, etc. 	<ul style="list-style-type: none"> Date and time of release 	<ul style="list-style-type: none"> Form: Detainee Identification Record and Administrative Records Implementation of Directive on Protection, Health and Medical Treatment of Penal Institution Inmates 	<ul style="list-style-type: none"> Records recorded without delay when matters occur that must be recorded, and senior management of the facility/institution regularly check records. 	<ul style="list-style-type: none"> On-the-spot inspections by regional correction headquarters or correction bureau 		
	Juvenile Training School / Juvenile Classification Home	Juvenile Registry / Health Exam Registry / Record of Death	<ul style="list-style-type: none"> Permanent domicile Address Occupation Name Gender Date of birth 	<ul style="list-style-type: none"> Date and time of admission Facility/institution name 	<ul style="list-style-type: none"> Court determining punishment Reason for admission Name of incident 	<ul style="list-style-type: none"> Facility/institution name 	<ul style="list-style-type: none"> Facility/institution name Date and time of admission 	<ul style="list-style-type: none"> Records of health condition 	<ul style="list-style-type: none"> Cause of death and date of death, etc. 	<ul style="list-style-type: none"> Reason for release Date and time of release 	<ul style="list-style-type: none"> Directive on Juvenile Registry and Detention Administrative Records Implementation of Directive on Protection, Health and Medical Treatment of Juvenile Training School Inmates Implementation of Directive on Protection, Health and Medical Treatment of Juvenile Classification Home Inmates 	<ul style="list-style-type: none"> Records recorded without delay when matters occur that must be recorded, and senior management of the facility/institution regularly check records. 	<ul style="list-style-type: none"> On-the-spot inspections by regional correction headquarters or correction bureau 		
	Women's Guidance Home	Women's Registry / Health Exam Registry	<ul style="list-style-type: none"> Permanent domicile Address Name Gender Date of birth 	<ul style="list-style-type: none"> Date and time of admission Facility/institution name 	<ul style="list-style-type: none"> Court determining disposition Reason for admission Name of crime 	<ul style="list-style-type: none"> Facility/institution name 	<ul style="list-style-type: none"> Date and time of admission Facility/institution name 	<ul style="list-style-type: none"> Records of health condition 	<ul style="list-style-type: none"> Although no particular format is prescribed, in case of a inmate's death, records will be prepared for cause of death and date and time of death, etc. 	<ul style="list-style-type: none"> Date and time of release Reason for release 	<ul style="list-style-type: none"> Guidelines on the Format and Handling of Women's Registry 	<ul style="list-style-type: none"> Records recorded without delay when matters occur that must be recorded, and senior management of the facility/institution regularly check records. 	<ul style="list-style-type: none"> Field inspections by jurisdiction of correction bureau 		
Deportation procedure	Immigration Detention Center	Detainee Registry / Death Report	<ul style="list-style-type: none"> Name Gender Date of birth Nationality / region Occupation Characteristics 	<ul style="list-style-type: none"> Date and time of arrest Date and time of detention 	<ul style="list-style-type: none"> Execution officer Applicability/violability 	<ul style="list-style-type: none"> Facility/institution name 	<ul style="list-style-type: none"> Date and time of arrest Date and time of detention 	<ul style="list-style-type: none"> Presence of disease 	<ul style="list-style-type: none"> Cause of death Notification of date and time of death, etc., to relatives, etc. 	<ul style="list-style-type: none"> Date and time of release Date and time of provisional discharge 	<ul style="list-style-type: none"> Article 4, Regulations on Treatment of Detainees Article 42 (1) and (2), Regulations on Treatment of Detainees 				
Hospitalization associated with mental disorder	Medical institution, designated medical institution, etc.	Medical records	<ul style="list-style-type: none"> Name Gender Date of birth Address 	<ul style="list-style-type: none"> Date and time ongoing hospitalization measures imposed for voluntary hospitalization Date and time of emergency hospitalization 	<ul style="list-style-type: none"> Contains information related to determination of whether voluntary hospitalization or involuntary hospitalization must be confirmed Contains information related to determination whether medical care and protection or emergency hospitalization is required and whether the condition is not suitable for voluntary hospitalization 	<ul style="list-style-type: none"> Notifications in case of determination of involuntary hospitalization, etc., or continued hospitalization must clearly state the ability to request improved treatment from the prefectural governor and the content information of the prefecture 	<ul style="list-style-type: none"> Name and location of psychiatric hospital Date of hospitalization 	<ul style="list-style-type: none"> Regular condition reports of involuntarily hospitalized person and person hospitalized for medical care and protection (history of symptoms or condition, social history, history of present illness, future treatment plan) 		<ul style="list-style-type: none"> Date and time continued hospitalization of voluntarily hospitalized persons rescinded Date and time emergency hospitalization rescinded 	<ul style="list-style-type: none"> Article 19-4.2, Mental Health and Welfare Act 	<ul style="list-style-type: none"> Obligation of records without delay 			
		Notification of Symptom Resolution of Involuntarily Hospitalized Person (in case of involuntary hospitalization)	<ul style="list-style-type: none"> Name Gender Date of birth Address 	<ul style="list-style-type: none"> Date of hospitalization 	<ul style="list-style-type: none"> Illness Name of designated physician administering exam 	<ul style="list-style-type: none"> Prefectural governor 	<ul style="list-style-type: none"> Name and location of psychiatric hospital Date of hospitalization 	<ul style="list-style-type: none"> Summary of history of symptoms or condition after hospitalization 		<ul style="list-style-type: none"> Notification date Place of residence and address after leaving 	<ul style="list-style-type: none"> Article 29-5, Mental Health and Welfare Act 	<ul style="list-style-type: none"> Immediately after symptoms resolved 			
		Notification of Hospitalization for Medical Care and Protection (in case of hospitalization for medical care and protection)	<ul style="list-style-type: none"> Name Gender Date of birth Address 	<ul style="list-style-type: none"> Date of hospitalization 	<ul style="list-style-type: none"> Illness Reason for determining condition for voluntary hospitalization Address, name, gender, date of birth and relationship with patient of family member consenting to the hospitalization 	<ul style="list-style-type: none"> Prefectural governor 	<ul style="list-style-type: none"> Name and location of psychiatric hospital Date of hospitalization 	<ul style="list-style-type: none"> Social history and history of present illness 			<ul style="list-style-type: none"> Less than 10 days from imposing of measures 	<ul style="list-style-type: none"> Article 33 (7), Mental Health and Welfare Act 	<ul style="list-style-type: none"> Inspections by the Minister of MHLW or prefectural governor Screening of Mental Health Commission 		
		Notification of Leaving of Person Hospitalized for Medical Care and Protection (in case of hospitalization for medical care and protection)	<ul style="list-style-type: none"> Name Gender Date of birth Address 	<ul style="list-style-type: none"> Date of hospitalization 	<ul style="list-style-type: none"> Illness 	<ul style="list-style-type: none"> Prefectural governor 	<ul style="list-style-type: none"> Name and location of psychiatric hospital 	<ul style="list-style-type: none"> Matters concerning treatment after leaving 		<ul style="list-style-type: none"> Date of leaving Place of residence and address after release 	<ul style="list-style-type: none"> Article 33-2, Mental Health and Welfare Act 	<ul style="list-style-type: none"> Less than 10 days from leaving 			
	Medical records (in case of by medical observation method)	<ul style="list-style-type: none"> Name Gender Date of birth Address Occupation Relationship with the insured 		<ul style="list-style-type: none"> Contains information related to determination of whether hospitalization will be continued and medical treatment per law is required 			<ul style="list-style-type: none"> Summary of history of symptoms or condition after hospitalization 				<ul style="list-style-type: none"> Article 88, Medical Care and Treatment Act 	<ul style="list-style-type: none"> Obligation of records without delay 			
Notification of Selection of Designated Medical Institution for Hospitalization (in case of by medical observation method)	<ul style="list-style-type: none"> Name Gender Date of birth Address Age 				<ul style="list-style-type: none"> Name and location of designated medical institution for hospitalization 					<ul style="list-style-type: none"> Article 43 (3), Medical Care and Treatment Act 	<ul style="list-style-type: none"> When hospitalization is determined 				

[MHLW comments]
A court order is required for determining hospitalization, etc. and granting permission for leaving or continuation of continued hospitalization (Article 42 and Article 51, Medical Treatment and Supervision Act)