Приложение 60

к приказу Министерства

здравоохранения Донецкой

Народной Республики

06.06.2016 № 555

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| Наименование министерства, другого органа исполнительной власти, предприятия, учреждения, организации, к сфере управления которого относится учреждение здравоохранения | | | | | | | | | | | |  | **МЕДИЦИНСКАЯ ДОКУМЕНТАЦИЯ** | | | | | | | | | | |
| ФОРМА ПЕРВИЧНОЙ УЧЕТНОЙ ДОКУМЕНТАЦИИ | | | | | | | | | | |
|  |  | | | | | | | | | | | **№ 250-1/у** | | | | | | | | | | |
| Наименование и местонахождение (полный почтовый адрес) учреждения здравоохранения, в котором заполняется форма \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | **УТВЕРЖДЕНО** | | | | | | | | | | |
| Лаборатория (название) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | |  | Приказ Министерства здравоохранения  Донецкой Народной Республики | | | | | | | | | | |
| Идентификационный код | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | **№** |  |  |
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| **ЖУРНАЛ**  **РЕГИСТРАЦИИ РЕЗУЛЬТАТОВ**  **БИОХИМИЧЕСКОГО СКРИНИНГА I и II ТРИМЕСТРА**  **Начат «\_\_\_\_\_» \_\_\_\_\_\_\_\_\_\_20\_\_\_\_г.**  **Окончен «\_\_\_\_\_» \_\_\_\_\_\_\_\_\_\_20\_\_\_\_г.** | | | | | | | | | | | | | | | | | | | | | | | |

2

Продолжение приложения 60

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| № п/п | Ф.И.О. | Возраст | Вес | Анамнез | Кость носа | Срок беремен. | АФП |
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Продолжение приложения 60

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| ХГ | РАРР-А | Индивидуальный риск | Домашний адрес | Примечание |
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