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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **BOLESNIČKE SOBE** | | | | | | | | | | | | | | | | |
| DATUM  MJESEC \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  GODINA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| KLINIKA/ZAVOD/ODJEL | | | | | | | | | | | | | | |
| Stolić, stol za blagovanje |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Poslužavnik |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Krevet |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kontrole /okvir kreveta |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Telefon /interfon |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Stranice kreveta |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Trapez |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Noćni ormarići |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ručke na ormarićima |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lampe iznad kreveta |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Zvonce |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Stolovi |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Stolice |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Stalci za infuziju |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Prekidači |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Vrata |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kvake na vratima |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Klupice na prozorima |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ormari |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Radijatori |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Svjetlo nad ogledalom |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Polica nad umivaonikom |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Umivaonik |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kutija za ručnike |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Slavina |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Zidne pločice oko umivaonika |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ogledalo |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Podovi |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Prozori |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **POTPIS OSOBE KOJA JE OBAVILA POSLOVE ČIŠĆENJA** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **POTPIS KOORDINATORA** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **POTPIS MED. SESTRE** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **DAN** |  |
| **DATUM** |  |
| **KLINIKA/ZAVOD/ODJEL** |  |
| **PRIMJEDBE** |  |
| **POTPIS MEDICINSKE SESTRE** |  |