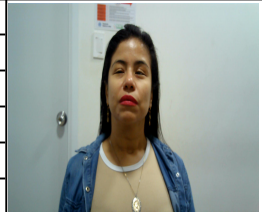


INFORMACION GENERAL

|  |                          |   |              |
|--|--------------------------|---|--------------|
| EMPRESA 0026356 ALCALDIA MUNICIPIO VILLA DEL ROSARIO |                          |  |              |
| NOMBRE SARA LILIANA SANJUAN JAIMES                   |                          |   |              |
| CC : 1030531116                                      | DE BOGOTA                |   | GENERO F     |
| EDAD 39  | F. NACIMIENTO 21/11/1986 |   | LUGAR CUCUTA |
| DIRECCION TORRE JAZMINES APTO 312 - NATURA           |                          |   |              |
| TELEFONO 3214049889                                  | CELULAR                  | CARGO TECNICO ADMINISTRATIVO  |              |

ANTECEDENTES LABORALES

| EMPRESA    | OCUPACION  | TIEMPO | EPP | TIPO |
|------------|------------|--------|-----|------|
| NO REFIERE | NO REFIERE | 0      | NO  | N/A  |
|            |            |        | NO  |      |

EXPOSICION AL RUIDO

|                   |                |         |             |         |              |             |             |            |
|-------------------|----------------|---------|-------------|---------|--------------|-------------|-------------|------------|
| Exp. Ruido NO     | Tiempo jornada | Tiempo  | años        | EPP NO  | Espuma NO    | Plastico NO | Silicona NO | Orejera NO |
| Exp. Extralaboral | Ruido NO       | Tejo NO | Audifono NO | Moto NO | Discoteca NO | Buceo NO    | Poligono NO | Otras      |

ANTECEDENTES

|                         |    |          |    |               |    |            |    |         |    |            |    |         |    |             |    |            |    |
|-------------------------|----|----------|----|---------------|----|------------|----|---------|----|------------|----|---------|----|-------------|----|------------|----|
| Antecedentes Familiares |    |          |    | NO            |    | Cuales     |    |         |    | NINGUNO    |    |         |    |             |    |            |    |
| HTA                     | NO | Diabetes | NO | Otitis        | NO | Meningitis | NO | Cirugia | NO | Exposición | NO | Trauma  | NO | TCE         | NO | Ototoxicos | NO |
| Otros                   |    | NO       |    | Cuales        |    | NINGUNO    |    |         |    |            |    |         |    |             |    |            |    |
| Tinnitus                | NO | Sordera  | NO | Reclutamiento | NO | Vertigo    | NO | Cefalea | NO | Otalgia    | NO | Otorrea | NO | Oido Tapado | NO |            |    |
| Otros                   |    | NO       |    | Sintomas      |    | NINGUNO    |    |         |    |            |    |         |    |             |    |            |    |

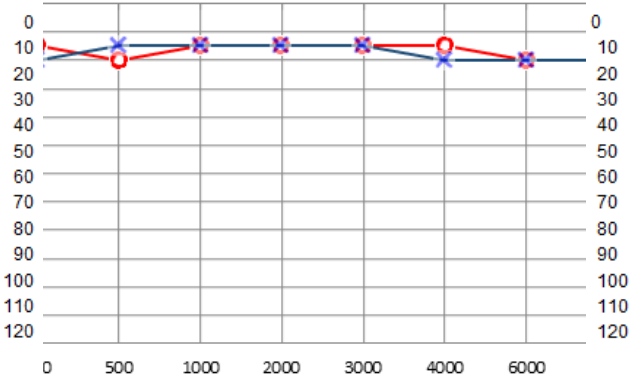
ASPECTOS GENERALES

|                  |              |                   |            |
|------------------|--------------|-------------------|------------|
| Audiometro marca | AMPLIVOX 170 | Fecha calibración | 07/11/2023 |
| Larsen:          | O.D. NORMAL  | O.I.              | NORMAL     |
| Otoscopia        | O.D. NORMAL  |                   |            |
|                  | O.I. NORMAL  |                   |            |

AUDIOGRAMA

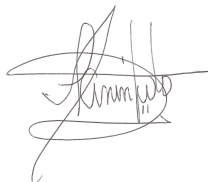
|           | 250 | 500 | 1000 | 2000 | 3000 | 4000 | 6000 | 8000 |
|-----------|-----|-----|------|------|------|------|------|------|
| V.A. O.D. | 15  | 20  | 15   | 15   | 15   | 15   | 20   | 20   |
| V.A. O.I. | 20  | 15  | 15   | 15   | 15   | 20   | 20   | 20   |
| V.O. O.D. |     |     |      |      |      |      |      |      |
| V.O. O.I. |     |     |      |      |      |      |      |      |

DIAGNOSTICO AUDICION NORMAL BILATERAL



OBSERVACIONES : NINGUNA

CONDUCTA SIN RESTRICCION AUDITIVA - USO DE PROTECTOR AUDITIVO - CONTROL EN 12 MESES



LUIS IGNACIO SANIN JURADO



SARA LILIANA SANJUAN JAIMES  
CC : 1030531116

REG. MÉDICO 394 - LICENCIA S.O.1913