

# Software Hospital

## Lenguajes y programas



Postgresql

Visual Basic

## Transporte

Orden de movilización



Ambulancia

|   |                      |   |    |   |                           |
|---|----------------------|---|----|---|---------------------------|
|  |                      |  |    | MINISTERIO DE SALUD PUBLICA                   |                           |
|   |                      |   |    | HOSPITAL SAN VICENTE DE PAUL                  |                           |
|   |                      |   |    | GESTION ADMINISTRATIVA - UNIDAD DE TRANSPORTE |                           |
|   |                      | ORDEN DE MOVILIZACION N°  |    | <input type="text"/>                          |                           |
|   |                      | FECHA:  |    | <input type="text"/>                          |                           |
| NOMBRES DEL SOLICITANTE:  |                      | <input type="text"/>  |    |   |                           |
| CARGO:  |                      | <input type="text"/>  |    |   |                           |
| UNIDAD ADMINISTRATIVA   |                      | <input type="text"/>  |    |   |                           |
| MOTIVO:   |                      | <input type="text"/>  |    |   |                           |
|   |                      | <input type="text"/>  |    |   |                           |
|   |                      | <input type="text"/>  |    |   |                           |
| NOMBRE PACIENTE:  |                      | <input type="text"/>  |    | EDAD  | <input type="text"/>      |
| SERVICIO:   | <input type="text"/> | NACIONALIDAD  | EC | CO  | VE                        |
|   |                      |   |    |   | C.I. <input type="text"/> |
| DIAGNÓSTICO:  | <input type="text"/> |   |    | CIE:  | <input type="text"/>      |
|   |                      | <input type="text"/>  |    |   |                           |
| TRASLADADO A:   |                      | <input type="text"/>  |    |   |                           |
| SALIDA:   |                      |   |    | ENTRADA :                                     |                           |
| HORA SALIDA BASE  | <input type="text"/> |   |    | HORA LLEGADA DESTINO                          | <input type="text"/>      |
| HORA SALIDA DESTINO   | <input type="text"/> |   |    | HORA LLEGADA A BASE                           | <input type="text"/>      |
| FECHA   | <input type="text"/> |   |    | FECHA   | <input type="text"/>      |
|   |                      |   |    | VISTO BUENO DEL LIDER                         |                           |
|   |                      |   |    |   |                           |
|   |                      |   |    |   |                           |
|   |                      |   |    |   |                           |
|   |                      |   |    |   |                           |
| SOLICITANTE   |                      |   |    | FIRMA LIDER SERVICIO                          |                           |
|   |                      |   |    |   |                           |

## Camioneta

| INFORMACION DE GESTION ADMINISTRATIVA               |                          |        |  |
|---|--------------------------|--------|--|
| SOLICITUD: APROBADA                                 | <input type="checkbox"/> | NEGADA | <input type="checkbox"/>                           |
| VEHICULO ASIGNADO                                   | <input type="text"/>     | Nº     | <input type="text"/> PLACA nº <input type="text"/> |
| CONDUCTOR:  | <input type="text"/>     |        |  |
| PARAMEDICO:   | <input type="text"/>     |        |  |
| OBSERVACIONES:                                      | <input type="text"/>     |        |  |
| <input type="text"/>                                |                          |        |  |
| <input type="text"/>                                |                          |        |  |
| NOTA: ADJUNTAR HOJA DE REFERENCIA OBLIGATORIAMENTE. |                          |        |  |
| FECHA   | <input type="text"/>     |        |  |
| AUTORIZADO RESPONSABLE UNIDAD DE TRANSPORTE         |                          |        |  |

## Autorización de salida


| HOSPITAL SAN VICENTE DE PAUL  |                      |   |                      |
|---|----------------------|---|----------------------|
| GESTION ADMINISTRATIVA  |                      |   |                      |
|  |                      |  |                      |
| UNIDAD DE TRANSPORTE ORDEN DE MOVILIZACION  |                      |   |                      |
| AUTORIZACION PARA SALIDA DE VEHICULOS   |                      |   |                      |
|   |                      | Nº  | <input type="text"/> |
| HORA SALIDA   | <input type="text"/> | HORA ENTRADA  | <input type="text"/> |
| KM SALIDA   | <input type="text"/> | KM. ENTRADA   | <input type="text"/> |
| FECHA:  | <input type="text"/> |   |                      |
| Sr. Guardia facilite salir el Vehículo Nº   | <input type="text"/> |   |                      |
| A cargo del Sr. Conductor :   | <input type="text"/> |   |                      |
| Para trabajo de la institución  | <input type="text"/> |   |                      |
| Para mantenimiento mecánico   | <input type="text"/> |   |                      |
| Solicitado por:   | <input type="text"/> |   |                      |
| Asunto:   | <input type="text"/> |   |                      |
| <input type="text"/>  |                      |   |                      |
| <input type="text"/>  |                      |   |                      |
| AUTORIZADO POR EL RESPONSABLE DE TRANSPORTE   |                      |   |                      |

# Informe de Movilización

[illegible]



# Hoja de vida de los equipos

|    |                          | <b>HOJA DE VIDA</b><br>Dirección Nacional de Equipamiento Sanitario  |          | MANTENIMIENTO DE EQUIPOS BIOMÉDICOS   |  | CÓDIGO: 000                              |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|---|--------------------------|--|----------|---|--|--|----|---------------------|--------------------------|-----------------------|----------|--------------------|----------|------------------|-------|-----------------|-------|-------------------------------|----------|-------|-------|------------|-------|-------|----------|-----------|-------|----------|-------|-----------------|-------|-----|--|-------|-------|-----|--|-----|-------|-----|--|-------------------|-------|-----|-------|-----------------|-------|-----|-------|-----------|-------|-----|-------|---------------|-------|-----|-------|---------------------|-------|-----|-------|------|-------|-----|--|---|--|-----|----|---------------------|-------|------|----|----|-------|-------------|----|------|-------|-----|----|-----|-------|------|----|-----|-------|----|----|-----|-------|----|----|-----|-------|-------|----|------|-------|-------------|----|------|-------|-------------|----|-----|-------|-----------------|----|-----|-------|------------------|----|-----|-------|----------|----|------|-------|--|--|------|-------|
| <b>DESCRIPCIÓN DEL BIEN</b>   |                          |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| TIPO DE BIEN:   |                          | Equipo Biomédico   |          | MARCA:  |  | TRUE                                     |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| NOMBRE DEL EQUIPO:  |                          |  |          | MODELO:   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| # INVENTARIO:   |                          |  |          | SERIE:  |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| OTRA REFERENCIA:  |                          |  |          | AÑO DE FABRICACIÓN:   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| <b>DATOS TÉCNICOS (llenar donde aplique)</b>  |                          | <b>REQUERIMIENTOS DE FUNCIONAMIENTO</b>  |          |   |  | <b>PARÁMETROS MEDIDOS / TRANSMITIDOS</b> |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   |                          | <table border="1"> <thead> <tr> <th></th> <th>si</th> <th>no</th> <th>Medición</th> </tr> </thead> <tbody> <tr><td>Eléctrico</td><td>FALSE</td><td>###</td><td></td></tr> <tr><td>Mecánico</td><td>FALSE</td><td>###</td><td></td></tr> <tr><td>Electrónico</td><td>FALSE</td><td>###</td><td></td></tr> <tr><td>Hidráulico</td><td>FALSE</td><td>###</td><td></td></tr> <tr><td>Neumático</td><td>FALSE</td><td>###</td><td></td></tr> <tr><td>Electromecánico</td><td>FALSE</td><td>###</td><td></td></tr> <tr><td>Vapor</td><td>FALSE</td><td>###</td><td></td></tr> <tr><td>GLP</td><td>FALSE</td><td>###</td><td></td></tr> <tr><td>Gases Medicinales</td><td>FALSE</td><td>###</td><td>(PSI)</td></tr> <tr><td>Aire Comprimido</td><td>FALSE</td><td>###</td><td>(PSI)</td></tr> <tr><td>Agua fría</td><td>FALSE</td><td>###</td><td>(PSI)</td></tr> <tr><td>Agua caliente</td><td>FALSE</td><td>###</td><td>(PSI)</td></tr> <tr><td>Agua descalcificada</td><td>FALSE</td><td>###</td><td>(PSI)</td></tr> <tr><td>Otro</td><td>FALSE</td><td>###</td><td></td></tr> </tbody> </table> |          |   |  |  | si | no                  | Medición                 | Eléctrico             | FALSE    | ###                |          | Mecánico         | FALSE | ###             |       | Electrónico                   | FALSE    | ###   |       | Hidráulico | FALSE | ###   |          | Neumático | FALSE | ###      |       | Electromecánico | FALSE | ### |  | Vapor | FALSE | ### |  | GLP | FALSE | ### |  | Gases Medicinales | FALSE | ### | (PSI) | Aire Comprimido | FALSE | ### | (PSI) | Agua fría | FALSE | ### | (PSI) | Agua caliente | FALSE | ### | (PSI) | Agua descalcificada | FALSE | ### | (PSI) | Otro | FALSE | ### |  | <table border="1"> <tbody> <tr><td>ECG</td><td>##</td><td>PRESION NO INVASIVA</td><td>FALSE</td></tr> <tr><td>SPO2</td><td>##</td><td>PH</td><td>FALSE</td></tr> <tr><td>F. CARDIACA</td><td>##</td><td>MASA</td><td>FALSE</td></tr> <tr><td>EEG</td><td>##</td><td>PIC</td><td>FALSE</td></tr> <tr><td>SPCO</td><td>##</td><td>BIS</td><td>FALSE</td></tr> <tr><td>CO</td><td>##</td><td>VCV</td><td>FALSE</td></tr> <tr><td>O2</td><td>##</td><td>PCV</td><td>FALSE</td></tr> <tr><td>APNEA</td><td>##</td><td>SIMV</td><td>FALSE</td></tr> <tr><td>TEMPERATURA</td><td>##</td><td>PEEP</td><td>FALSE</td></tr> <tr><td>F. CEREBRAL</td><td>##</td><td>PSV</td><td>FALSE</td></tr> <tr><td>F. RESPIRATORIA</td><td>##</td><td>MAC</td><td>FALSE</td></tr> <tr><td>PRESION INVASIVA</td><td>##</td><td>NO2</td><td>FALSE</td></tr> <tr><td>ARRITMIA</td><td>##</td><td>PIO2</td><td>FALSE</td></tr> <tr><td></td><td></td><td>OTRO</td><td>FALSE</td></tr> </tbody> </table> |  | ECG | ## | PRESION NO INVASIVA | FALSE | SPO2 | ## | PH | FALSE | F. CARDIACA | ## | MASA | FALSE | EEG | ## | PIC | FALSE | SPCO | ## | BIS | FALSE | CO | ## | VCV | FALSE | O2 | ## | PCV | FALSE | APNEA | ## | SIMV | FALSE | TEMPERATURA | ## | PEEP | FALSE | F. CEREBRAL | ## | PSV | FALSE | F. RESPIRATORIA | ## | MAC | FALSE | PRESION INVASIVA | ## | NO2 | FALSE | ARRITMIA | ## | PIO2 | FALSE |  |  | OTRO | FALSE |
|   | si                       | no   | Medición |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Eléctrico   | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Mecánico  | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Electrónico   | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Hidráulico  | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Neumático   | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Electromecánico   | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Vapor   | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| GLP   | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Gases Medicinales   | FALSE                    | ###  | (PSI)    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Aire Comprimido   | FALSE                    | ###  | (PSI)    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Agua fría   | FALSE                    | ###  | (PSI)    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Agua caliente   | FALSE                    | ###  | (PSI)    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Agua descalcificada   | FALSE                    | ###  | (PSI)    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Otro  | FALSE                    | ###  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| ECG   | ##                       | PRESION NO INVASIVA  | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| SPO2  | ##                       | PH   | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| F. CARDIACA   | ##                       | MASA   | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| EEG   | ##                       | PIC  | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| SPCO  | ##                       | BIS  | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| CO  | ##                       | VCV  | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| O2  | ##                       | PCV  | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| APNEA   | ##                       | SIMV   | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| TEMPERATURA   | ##                       | PEEP   | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| F. CEREBRAL   | ##                       | PSV  | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| F. RESPIRATORIA   | ##                       | MAC  | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| PRESION INVASIVA  | ##                       | NO2  | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| ARRITMIA  | ##                       | PIO2   | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   |                          | OTRO   | FALSE    |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| OBSERVACIONES:  |                          |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| <b>DATOS ECONÓMICOS</b>   |                          |  |          | <b>DATOS DE UBICACIÓN DEL EQUIPO</b>  |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| VALOR DE ADQUISICIÓN: _____ N° FACTURA: _____<br>FORMA DE ADQUISICIÓN: Compra FALSE Fecha: _____<br>Traspaso FALSE Fecha: _____<br>Redistribución FALSE Fecha: _____<br>Donación FALSE Fecha: _____<br>VIDA ÚTIL ESTIMADA: _____ (AÑOS)<br>OBSERVACIONES: _____   |                          |  |          | UNIDAD OPERATIVA: Hospital General San Vicente de Paul<br>SERVICIO: Emergencia<br>SUB SERVICIO/AMBIENTE: Gineo Obstetricia<br>NOMBRE DE CUSTODIO: Dr. Miguel Angel Crespo<br>ZONA / DISTRITO: Zona 1 / 10D01<br>PROVINCIA / CIUDAD: Imbabura / Ibarra   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| <b>DATOS DE PROVEEDOR</b>   |                          |  |          | <b>EXISTENCIA DE INFORMACION TECNICA</b>  |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| FABRICANTE: _____<br>DIRECCION: _____<br>TEL/FAX: N/A Email: N/A<br>PROVEEDOR CONSUMIBLES: _____<br>DIRECCION: _____<br>TEL/FAX: _____ Email: _____<br>NOMBRE DEL CONTACTO: _____<br>REPRESENTANTE EN EL PAIS: _____<br>DIRECCION: _____<br>TEL/FAX: _____ Email: _____<br>NOMBRE DEL CONTACTO: N/A<br>PROVEEDOR MANTENIMIENTO: _____<br>DIRECCION: _____<br>TEL/FAX: _____ Email: _____<br>NOMBRE DEL CONTACTO: _____<br>PROVEEDOR CALIBRACIÓN: _____<br>DIRECCION: _____<br>TEL/FAX: _____ Email: _____<br>NOMBRE DEL CONTACTO: _____ |                          |  |          | <table border="1"> <tbody> <tr><td>Manual de operación</td><td>##</td></tr> <tr><td>Manual de instalación</td><td>##</td></tr> <tr><td>Manual de servicio</td><td>##</td></tr> <tr><td>Manual de partes</td><td>##</td></tr> <tr><td>Otra literatura</td><td>##</td></tr> <tr><td>No existe información técnica</td><td>##</td></tr> </tbody> </table>  |  |  |    | Manual de operación | ##                       | Manual de instalación | ##       | Manual de servicio | ##       | Manual de partes | ##    | Otra literatura | ##    | No existe información técnica | ##       |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Manual de operación   | ##                       |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Manual de instalación   | ##                       |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Manual de servicio  | ##                       |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Manual de partes  | ##                       |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| Otra literatura   | ##                       |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| No existe información técnica   | ##                       |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   |                          |  |          | <b>ESTADO DEL BIEN</b>  |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   |                          |  |          | OPERATIVO FALSE<br>NO OPERATIVO<br>- MANTENIMIENTO FALSE<br>- BAJA FALSE  |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   |                          |  |          | OBSERVACIONES:  |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   |                          |  |          | <table border="1"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">ESTADO DE LOS ACCESORIOS</th> </tr> <tr> <th>Operativ</th> <th>No Operativo</th> </tr> </thead> <tbody> <tr><td>1. _____</td><td>FALSE</td><td>FALSE</td></tr> <tr><td>2. _____</td><td>FALSE</td><td>FALSE</td></tr> <tr><td>3. _____</td><td>FALSE</td><td>FALSE</td></tr> <tr><td>4. _____</td><td>FALSE</td><td>FALSE</td></tr> <tr><td>5. _____</td><td>FALSE</td><td>FALSE</td></tr> <tr><td>6. _____</td><td>FALSE</td><td>FALSE</td></tr> </tbody> </table> |  |  |    |                     | ESTADO DE LOS ACCESORIOS |                       | Operativ | No Operativo       | 1. _____ | FALSE            | FALSE | 2. _____        | FALSE | FALSE                         | 3. _____ | FALSE | FALSE | 4. _____   | FALSE | FALSE | 5. _____ | FALSE     | FALSE | 6. _____ | FALSE | FALSE           |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   | ESTADO DE LOS ACCESORIOS |  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   | Operativ                 | No Operativo   |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| 1. _____  | FALSE                    | FALSE  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| 2. _____  | FALSE                    | FALSE  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| 3. _____  | FALSE                    | FALSE  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| 4. _____  | FALSE                    | FALSE  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| 5. _____  | FALSE                    | FALSE  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
| 6. _____  | FALSE                    | FALSE  |          |   |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |
|   |                          |  |          | OBSERVACIONES:  |  |  |    |                     |                          |                       |          |                    |          |                  |       |                 |       |                               |          |       |       |            |       |       |          |           |       |          |       |                 |       |     |  |       |       |     |  |     |       |     |  |                   |       |     |       |                 |       |     |       |           |       |     |       |               |       |     |       |                     |       |     |       |      |       |     |  |   |  |     |    |                     |       |      |    |    |       |             |    |      |       |     |    |     |       |      |    |     |       |    |    |     |       |    |    |     |       |       |    |      |       |             |    |      |       |             |    |     |       |                 |    |     |       |                  |    |     |       |          |    |      |       |  |  |      |       |

| OTROS DATOS  |                             |                             |                     |                            |   |   |   |   |
|--|-----------------------------|-----------------------------|---------------------|----------------------------|---|---|---|---|
|  | <input type="checkbox"/> SI | <input type="checkbox"/> NO |                     |                            |   |   |   |   |
| GARANTÍA   | ###                         | ###                         | MTTO.<br>PREVENTIVO | 1                          | 2 | 3 | 4 | 5 |
| CONTRATO MTTO  | ###                         | ###                         | FECHA               |                            |   |   |   |   |
| FRECUENCIA MTTO: Cuatrimestral   |                             |                             |                     |                            |   |   |   |   |
| RESPONSABLE MTTO: _____  |                             |                             |                     |                            |   |   |   |   |
|  |                             |                             |                     |                            |   |   |   |   |
| <b>OBSERVACIONES:</b>  |                             |                             |                     |                            |   |   |   |   |
| _____  |                             |                             |                     |                            |   |   |   |   |
| _____  |                             |                             |                     |                            |   |   |   |   |
| _____  |                             |                             |                     |                            |   |   |   |   |
| <b>REGISTRO DE ELABORACIÓN Y ACTUALIZACIÓN</b>   |                             |                             |                     | <b>FOTOGRAFÍA DEL BIEN</b> |   |   |   |   |
| Nombre del Responsable: Edison Montesdeoca<br>Cargo: Jefe de mantenimiento<br>Email: edison.montesdeoca@hsvp.gob.ec<br>Teléfono: 0979455418<br>Firma: _____<br>Fecha: 10-01-2021 |                             |                             |                     |                            |   |   |   |   |