**长期医嘱单**

**姓名:{{name}} 性别:{{sex}} 年龄: {{age}} 科别: 床号: 病案号:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **开始** | | | | **终止** | | | | |
| **日期** | **时间** | **医 嘱** | **医生签名** | **护士签名** | **日期** | **时间** | **医师签名** | **护士签名** |
| **{{date1}}** | **{{time1}}** | **{{orders1}}** | **{{doctor1}}** |  |  |  |  |  |
| **{{date2}}** | **{{time2}}** | **{{orders2}}** | **{{doctor2}}** |  |  |  |  |  |
| **{{date3}}** | **{{time3}}** | **{{orders3}}** | **{{doctor3}}** |  |  |  |  |  |
| **{{date4}}** | **{{time4}}** | **{{orders4}}** | **{{doctor4}}** |  |  |  |  |  |
| **{{date5}}** | **{{time5}}** | **{{orders5}}** | **{{doctor5}}** |  |  |  |  |  |
| **{{date6}}** | **{{time6}}** | **{{orders6}}** | **{{doctor6}}** |  |  |  |  |  |
| **{{date7}}** | **{{time7}}** | **{{orders7}}** | **{{doctor7}}** |  |  |  |  |  |
| **{{date8}}** | **{{time8}}** | **{{orders8}}** | **{{doctor8}}** |  |  |  |  |  |
| **{{date9}}** | **{{time9}}** | **{{orders9}}** | **{{doctor9}}** |  |  |  |  |  |
| **{{date10}}** | **{{time10}}** | **{{orders10}}** | **{{doctor10}}** |  |  |  |  |  |
| **{{date11}}** | **{{time11}}** | **{{orders11}}** | **{{doctor11}}** |  |  |  |  |  |
| **{{date12}}** | **{{time12}}** | **{{orders12}}** | **{{doctor12}}** |  |  |  |  |  |
| **{{date13}}** | **{{time13}}** | **{{orders13}}** | **{{doctor13}}** |  |  |  |  |  |
| **{{date14}}** | **{{time14}}** | **{{orders14}}** | **{{doctor14}}** |  |  |  |  |  |
| **{{date15}}** | **{{time15}}** | **{{orders15}}** | **{{doctor15}}** |  |  |  |  |  |

|  |  |
| --- | --- |
| 备注 | **{{remarks}}** |