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| **Ф.И.О.** | | **{patient.fullname}** | | | | | |  | | | | | | | | | |
| **Возраст:** | | **{patient.age}** | | | | | | | | |  |  |  |  |  |  | |
| **И/б №** | | **{patient.historycard}** | | | | | | | | |  |  |  |  |  |  | |
| **Отделение:** | | **Кардиореанимация** | | | | | | | | |  | | | | | | |
| **Дата поступления:** | | | **{admission.date}** | | | | | | | |  | | | | | | |
|  | |  |  | | | | | | | |  |  |  |  |  |  | |
|  | | **ОБОСНОВАНИЕ НАЗНАЧЕНИЯ ДОРОГОСТОЯЩИХ** | | | | | | | | | | | | | | | |
|  | | **АНТИБАКТЕРИАЛЬНЫХ ПРЕПАРАТОВ** | | | | | | | | | | | | | | | |
|  | |  | | | | | | |  | |  |  |  |  |  | |  |
| **1. Диагноз:** | | **{patient.diagnosis}** | | | | | | | | | | | | | | | |
| **2. Показания к назначению препарата:** | | | | | | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **3. Ранее проводимое лечение (указать препарат, дозу, длительность приема)** | | | | | | | | | | | | | | | | | |
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| **4. Результаты посева:** | | | |  | | | | | | | | | | | | | |
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| **5. Требуемый препарат:** | | | | |  | | | | | | |  |  |  |  | |  |
|  | | **1.Название** | | |  | | | | | | | | | | | | |
|  | | **2.Доза** |  |  | | | | | | | | | | | | | |
|  | | **3.Длительность применения** | | | | |  | | | | | | | | | | |
|  | | **4.Способ введения** | | | |  | | | | | | | | | | | |
|  | |  | | | | | | |  |  | |  |  |  |  | |  |
| **6. Заключение клинического фармаколога** | | | | | | | | | | | | |  |  |  | |  |
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| Лечащий врач: | | | | | {doctor.who.short} | | | | | | | | | | | | |
| Зав.отделением: | | | | |  | | | | | | | | | | | | |
| Зам.главного врача: | | | | |  | | | | | | | | | | | | |
| Клинический фармаколог: | | | | |  | | | | | |  | | | | | | |
|  |  | | | |  | | | | | |  |  |  |  |  | |  |
| Дата: | {date} | | | | | | | | | | | | | | | | |
|  |  | | | | | | | |  | |  |  |  |  |  | |  |