

Surveyor

REF: C/TP19020353/DC

ឱ្យដឹងប្រសិនបើមាន

ASSIGNMENT (Office)

Date/Time:

4/11/2019

From (Person):

Rally Pickup

B33 to:

Estimated Cost:

Estimated Cost: _____
 OD/TP+WS+TP RES / OD RES / EVA / INV / MV / CS
 1000 2000 1000 1000 1000

Insured:

To inspect Vehicle No: 12BAJB32080KW06-60

Tel:

at Workshop m/s

of

Policy No.

-Claim No.:

WBATB3208DWÖ6265

Excess:

Sum Insured:

D.O.A.

Make of Veh:

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

DateTime

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction () Estimate
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DateTime

Action/Instruction	
1. Review the patient's medical history and current medications.	
2. Perform a physical examination, focusing on the respiratory and cardiovascular systems.	
3. Obtain vital signs, including temperature, heart rate, blood pressure, and respiratory rate.	
4. Administer the prescribed medication, ensuring proper dosage and timing.	
5. Monitor the patient's response to treatment, including oxygen saturation and respiratory effort.	
6. Document all findings and interventions in the patient's medical record.	
7. Communicate with the healthcare team, including the physician and other nurses, regarding the patient's status.	
8. Provide patient education on the importance of medication adherence and recognizing signs of worsening symptoms.	
9. Reassess the patient's condition at regular intervals, adjusting care as needed.	
10. Ensure the patient is comfortable and safe throughout the entire process.	

1) Estimate

DateTime