

Prohlášení ošetřujícího lékaře */ Atestatio Medici / Doctor Statement*

Nomen aegroti / Name of the patient

Natus / Date of birth	Prima therapia / Date of the first treatment	Hospitalisatio a die / Hospitalisation from	usque ad diem / to
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Diagnosis

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Therapia / Way of the treatment

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Praescriptum medicamentum / Prescription of medicines

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Nomen et adres medici / Name and address of the doctor (write in capitals)

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Die / Date

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Sigillum et signum medici / Stamp and signature of the doctor