

Informace pro lékaře

INSTRUCTIONS FOR THE ATTENDING PHYSICIAN OR THE DENTIST

The holder of this insurance is insured with Česká pojišťovna a.s. in Czech Republic. This insurance company is hereby committed to pay you, through the mediation of the Assistance service, the costs incurred by medical treatment or hospitalization of the patient on the basis of General Insurance Conditions, Contractual Agreements and the insurance contract.

If you have any doubts as to the insurance coverage, please contact our **Assistance Service**:

ČP ASISTENCE s.r.o.

tel.: +420 221 586 675

Na Pankráci 1658/121

fax: +420 241 040 399

140 21 Praha 4

e-mail: asistence@cpasistence.cz

Czech Republic

ATESTATIO MEDICI / MEDICAL REPORT

Nomen aegroti

Patient's name

Natus

Date of birth

Diagnosis

Anamnesis

Past medical history

Causa traumatica

Cause of injury

Therapia

Treatment

Hospitalisatio in

Hospitalisation in

a die

from

usque ad diem

to

Medicamenta praescriba

Prescribed medication

Die

Date of service

Sigillium, nomen medici

Physician's name and signature