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| **Fiche Pansement Chir pour M ………………………… Date Intervention:**   **Localisation:** |

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|  | **Date** | **J op** | **S/C**  **HBPM** | **PS**  **plaq** | **pst** | **Observations** | **IDE** |
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| **Prescription**  **Medicale:** | **Pansement:**  **Durée : Fréquence:** | **S/C Hbpm :**  **Durée:** | **Plaquettes:**  **Durée : Fréquence:** |

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| **PROTOCOLE:**  **si changement :**  **préciser date:** | **1)**  **2)** |

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| **Contention** | **oui non** |
| **Diabète ID** | **oui non** |