Приложение № 1
к Приказу Министерства
здравоохранения и социального
развития Российской Федерации
от 26.01.2009 № 18

Учетная документация

**Форма № 58-ДТП-1/у**

|  |  |  |
| --- | --- | --- |
|  |  | Утверждена ПриказомМинздравсоцразвития Россииот 26.01.2009 № 18 |
| (наименование медицинской организации) |  |
|  |  |
| (адрес, телефон) |  |

Представляется в орган внутренних дел Российской Федерации
по месту нахождения медицинской организации

**Извещение
о раненом, скончавшемся в течение 30 суток после дорожно-транспортного происшествия**

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| 1. | Ф.И.О. скончавшегося: |  |

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| 2. | Пол: М 1 |  | , Ж 2 |  |

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| 3. | Дата рождения: |  |  |  | **.** |  |  |  | **.** |  |  |  |  |  |  |  |

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| 4. | Дата дорожно-транспортного происшествия: |  |  |  | **.** |  |  |  | **.** |  |  |  |  |  |  |  |

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| 5. | Дата поступления в стационар: |  |  |  | **.** |  |  |  | **.** |  |  |  |  |  |  |  |

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| 6. | Диагноз при поступлении в стационар: |  |

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|  |  | , код по МКБ-10 |  |  |  |  |  |  |  |  |  |

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| 7. | Дата смерти: |  |  |  | **.** |  |  |  | **.** |  |  |  |  |  |  |  |

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| 8. | Непосредственная причина смерти: |  |

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|  |  | , код по МКБ-10 |  |  |  |  |  |  |  |  |  |

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| 9. | Основная причина смерти: |  |

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|  |  | , код по МКБ-10 |  |  |  |  |  |  |  |  |  |

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| 10. | Внешняя причина смерти: |  |

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|  |  | , код внешней причины смерти по МКБ-10 |  |  |  |  |  |  |  |  |  |

11. Смерть наступила:

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|  | в машине скорой помощи 1 |  | ; |

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|  | в стационаре: в течение 30 суток после дорожно-транспортного происшествия 2 |  | , |

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|  | из них: в течение первых 7 суток после дорожно-транспортного происшествия 3 |  | ; |

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|  | на дому: в течение 30 суток после дорожно-транспортного происшествия 4 |  | , |

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|  | из них: в течение первых 7 суток после дорожно-транспортного происшествия 5 |  | . |

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| “ |  | ” |  | 200 |  | г. |  |  |  |  |
| (дата заполнения извещения) |  | (подпись) |  | (фамилия, должность медицинского работника, составившего извещение) |