# Magzatmozgás és NST vizsgálatok (dr. Bata Barnabás Magánrendelője) Tel: 84/322-522 és 20/346-7424

Név: ………………………………………………………………………………… Szül. dátum: …………………………... TAJ: ………………………….…….. UM: ……………..………….. Szvi: …..…………………………….

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| Terhességi hetek/ Vizsg.időszak | 35 | | | | | | | 36 | | | | | | | 37 | | | | | | | 38 | | | | | | | 39 | | | | | | | | 40 | | | | | | |
| 16.00 |  |  |  |  |  |  |  |  |  | címer_bmp_gomb.bmp |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 16.30 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 17.00 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 18.00 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 19.00 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 20.00 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 20.30 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 21.00 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NST vizsgálatok: | Dátum: ……………………….  BV:……………………………….  NST: …………………………….  Flow: …………………………..  MRT: …………………………..  RR: ……………………..Hgmm  Vizelet: ……………………….  Kontroll: ……………………..  Terápia: ……………………… | | | | | | | …………………………………  …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | | | | | | | ……………………………………  ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | | | | | | | …………………………………  …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | | | | | | | | ……………………………………  …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………… | | | | | | | ……………………………………  ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | | | | | | |

1 kocka 15 percnek felel meg. Naponta 1x kell megszámolni a magzatmozgásokat és a 10. mozgást kell jelölni X-vel. Több, mint 2 órás várakozás esetén jelentkezni kell a kezelőorvosnál illetve a szülészeten !