

Equipment			
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Procedure			
0	Introduce yourself, ask the patient's name, give reasons and ask permission.		
1	How long have you had jaundice, jaundice, and itching?		
2	Are you pale, weak, tired easily, or have you ever received blood? cause of blood		
	Fever, shivering, history of traveling, trampling, used to tattoo on the body Using drugs injected		
3	into the veins sex history		
4	family members have a history yellow-eyed jaundice or hepatitis, abdominal pain, pain area		
	lumps in the abdomen size/appearance/pain, enlarged abdomen/enlarged lymph nodes, color,		
5	urine/feces		
6	Drinking alcohol, how much smoking, congenital disease, cirrhosis, thalassemia, hepatitis		
7	Which medicine do you take regularly? Tell me only 2 types.		



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