**Attestation de traitement**

Nom/prénom du patient (de la patiente) :
Date de naissance :
No AVS :
 Dates de traitement:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **TOTAL** |
| **Position tarifaire**  | **TP** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3101 individuel  | 8.32 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3102 groupe | 8.32 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3103  | 8.32 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3104 | 8.32 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3105 | 8.32 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3106 | 4.16 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3121 2eme ET | 8.32 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3122 2eme ET | 8.32 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3131 Rapports | Fr. 30.- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3132 | Fr. 60.- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3141 Déplacem. | 1.66 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3201 Moyen aux. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3211 Attelles |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3212 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3213 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3231 Tape |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3241 Pansement | Fr.4.75 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3242 | Fr.4.85 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3243 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3244 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3261 Location | Fr. 2.- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3262 | Fr. 3.- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3263 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

 Temps x TP x Fr. 1.10

Remarques:

 Date, signature: