Anexa 5

Denumire Furnizor

CMI DR.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | STRUCTURA DE PERSONAL | | | |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| MEDICI | |  |  |  |  |  |  |  |  |  |  |
| Nr. | Nume si prenume | | Contract de munca | | Certificat CMR\* | | | Asigurare malpraxis | | Specialitate | Cod parafa |
| Crt. |  |  | Nr. contract | Tip contract | Nr. | Data eliberarii | | Valabila pana la | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Total medici = | |  |  |  |  |  |  |  |  |  |  |
| \* aviz de practica temporara/ocazionala conform reglementarilor in vigoare pentru medicii straini | | | | | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| ASISTENTI MEDICALI | |  |  |  |  |  |  |  |  |  |  |
| Nr. | Nume si prenume | | Contract de munca | | Certificat membru OAMGMAMR | | | Asigurare malpraxis | | Specialitate |  |
| Crt. |  |  | Nr. contract | Tip contract | Nr. | Data eliberarii | | Valabila pana la | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Total asistenti medicali = | | |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| ALTE CATEGORII DE PERSONAL | | |  |  |  |  |  |  |  |  |  |
| Nr. | Nume si prenume | | Contract de munca | | Certificat OBBCSSR/CPR/Certificat BLS\* | | | Asigurare malpraxis | | Specialitate/ Calificare |  |
| Crt. |  |  | Nr. contract | Tip contract | Nr. | Data eliberarii | | Valabila pana la | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Total alte categorii de personal = | | |  |  |  |  |  |  |  |  |  |
| \*se va completa daca este cazul | | |  |  |  |  |  |  |  |  |  |

Raspundem de corectitudinea si exactitatea datelor

Reprezentant legal,

Nume si prenume, semnatura, stampila

Data intocmirii