

We address to the attending physician who treated the personal accident described overleaf to fill in this page according to the found out extent and type of bodily injuries and medical harm.

When was the first medical treatment carried out?	Date at : o'clock.
Proper injury diagnosis	
Detailed description of bodily injury due to accident, including extent thereof	
Way and kind of treatment (detailed description)	
X-ray findings including description	
By the found out diagnosis of bodily injury and regardless personal health anomalies of the injured (e.g. physical condition or impact of previous illnesses, etc), please determine the expected time of necessary treatment. The expected time of necessary treatment of the proper injury due to the accident is weeks.	

Warning: The next part of the report should be filled out only if the time of necessary treatment exceeds two weeks!

Does the treated bodily injury correspond (including the extent) to the accident experience as stated on the first page of the Notification?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	- Why?
Did the accident happen under the influence of alcohol or other intoxicating or toxic substances?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	- What were the symptoms? Content of alcohol found in blood
Were any of the injured parts of the body affected functionally before the accident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	- Which one and how?
If the average time of necessary treatment was extended do to complications please give the reason and type of complication.			
The actual time of necessary treatment of the bodily injury including complications was	From To		
Where was the Injured hospitalized?.....	From To		
Is there an assumption that the injury shall induce permanent consequences?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	- What type and extent
Other medical notifications of attending physician			
Overall disability for work	From To		

At	Date Stamp and signature of Attending Physician
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Records of loss adjustor and disability medical assessor of the Insurer

Injury diagnosis code	Indemnity %	
Other findings		
..... Loss adjustor Medical assessor Reviewer (Technical Supervisor)