
Siangngakchia Min (Zaangfahnak in Catlap in Chuah) Siangngakchia i Chuah Nithla: _____ / _____ / _____
Thla Ni Kum

Sianginn kai ni chun ah siangngakchia pakhat nih si din a herh asilole thlop a herh ahcun, hringtu nulepa asilole zohkhenhtu nih hi halmi fawm (form) cu tlamtlung tein a phih hrimhrim lai i sianginn i siisayama zung ah file chiah hrimhrim a si lai. Sii dinmi asilole thlopnak kha siibawi nih tuahtermi a si ahcun, hringtu nulepa asilole zohkhenhtu nih ngakchia i siibawi sinin ca in tialmi tuahternak asilole halnak he atu lio siizuarnak lei hmatthahnak an pek hrimhrim lai. Siangngakchia sin ah pek a si kho menmi cawktermi pungsan pawl caah, asilole ngakchia kum hleihnih tang caah duhpiak lomi dawr ah mah tein cawk khawhmi sii paohpaoh caah siibawi nih nawlpeknak kha a herh fawn.

Dawr i mah tein cawk khawhmi sii dihlak cu amah sanhnak bawm bak ah siangngakchia min le chuah nithla he hmatthahnak tuah hrimhrim ding a si lai. Siibawi pakhat nih cawktermi a si dah ti lo ahcun dawr ah mah tein cawk khawhmi sii dihlak caah a bawm i hman ningcang tialmi pawl kha zulh an si lai.

Hringtu nulepa asilole Zohkhenhtu i Nawlpeknak

A tang i sii din dingin langhtermi cu sianginn kai ni chun ah caankhiahmi caan pawl ah ka fa/a khaan ah sii dinhpiak dingah bawmh ka hal. Siisayama kha sii din dingmi i amah sanhnak bawm bak he asilole atu lio cawktermi thawl he ka pek lai.

Sii din dingmi dihlak kha hringtu nulepa asilole zohkhenhtu nih sianginn ah a rak rat lai i sianginn in a tinpi than lai kha ka hngalh. Sii dinmi pawl cu a hnubik sianginn kai ni ah laak hrimhrim ding an si lai, asilole sii pawl cu hlonh an si lai.

Ka fa nih sii din dingmi pasarih (7) nak in tamdeuh a ngeih ahcun hi sii dinmi pawl caah tuah chapmi fawm kha tlamtlung tein ka phih ding hrimhrim a si kha ka hngalh.

Ka fa sii (pawl) dinhnak cu nawlpekmi riantuantu chungtel pawl lawng nih an tuah lai i sianginn siisayama seekhan chung i a himnak hmun ah chiah a si lai kha ka hngalh.

Sii dinmi kha tikhalkuang ah chiah a herh caah, ka siangngakchia i sii dinmi sianginn seekhan i chiah a si lio ah a kihlum nih a thlenternak nih a chuahpi khawhmi thilri sunghnak caah sianginn lei riantuantu buu le Community Health Network nih aamahkhan ca tuanvo an lak lo kha ka hngalh i ka cohlan. Hringtu nulepa/zohkhenhtu cu thilri ai-rolhnak caah tuanvo ngei a si lai. Tikhak kuang a kihlum pawl cu sianginn kai ni pawl ah nifatin zohfel an si.

Sianginn kai kum chungah le aa rem caan thal sianginn kai lio ah siisayama nih sii dinh dingin nawlgeihnak na pekmi sii dinmi dihlak caah adang cahmai i table kha zaangfahnakin tlamtlung tein phih.

Siangngakchia i Chuah Nithla: _____ / _____ / _____

Siangngakchia Min (Zaangfahnak in Catlap in Chuah)

Thla

Ni

Kum

Sii dinmi Min Medication Name	Cawktermi sii asilole Dawr ah mah tein cawk khawhmi sii Prescription or Over the Counter	Chun pawl ah Pek dingin Sii dinmi Days Medication is to be Given	Sii Din Caan (pawl) Time(s) to Administer Medication	Sii Pek Dingmi Siidin mi Zat Amount of Medication to be Given	Sii dinnak (pawl) caah aruang pawl le a hlei in lamhmuhsaknak pawl Reason for Medication(s) and Special instructions	Start Date End Date
	<input type="checkbox"/> Cawktermi sii (Rx) <input type="checkbox"/> Dawr ah mah tein cawk khawhmi (OTC)		AM PM			
	<input type="checkbox"/> Cawktermi sii <input type="checkbox"/> Dawr ah mah tein cawk khawhmi		AM PM			
	<input type="checkbox"/> Cawktermi sii <input type="checkbox"/> Dawr ah mah tein cawk khawhmi		AM PM			
	<input type="checkbox"/> Cawktermi sii <input type="checkbox"/> Dawr ah mah tein cawk khawhmi		AM PM			
	<input type="checkbox"/> Cawktermi sii <input type="checkbox"/> Dawr ah mah tein cawk khawhmi		AM PM			
	<input type="checkbox"/> Cawktermi sii <input type="checkbox"/> Dawr ah mah tein cawk khawhmi		AM PM			
	<input type="checkbox"/> Cawktermi sii <input type="checkbox"/> Dawr ah mah tein cawk khawhmi		AM PM			

Hringtu nulepa asilole Zohkhenhtu i Minthut

Nithla

Min

A bikin hmanmi Fon# / Hman deuh lomi Fon#