| | CONSORCIO RENOVACION | | | |
|---|---|---|---|---|
| | NIT : 901.414.474-3 | | | |
| | Preoperacional Herramienta Menor | | | |
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## Preoperacional para Herramienta Menor

**Establecimiento:** Medicina legal

| Lista de chequeo preoperacional | Semana: Del: 31 Al: 06/09 | | | | | | | | | | | | | | | | | | | | | Observaciones |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Lunes | | | Martes | | | Miercoles | | | Jueves | | | Viernes | | | Sábado | | | Domingo | | | |
| | B | R | M | B | R | M | B | R | M | B | R | M | B | R | M | B | R | M | B | R | M | |
| METROS | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| PALAS | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| PICAS | | | | | | | | | | | | | | | | | | | | | | |
| BARRAS | | | | | | | | | | | | | | | | | | | | | | |
| ALICATES | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| PINZAS | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| MACETAS | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| PORRAS | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| MARTILLOS | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| CARRETILLA | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| PALUSTRES | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| JUEGO DE LLAVES | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| Atornillador Inalambrico | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | ✓ | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | Lunes | | | Martes | | | Miercoles | | | Jueves | | | Viernes | | | Sábado | | | Domingo | | | |
| **Inspeccionado Por:** | Dra | | | Dra | | | Dra | | | Dra | | | Dra | | | | | | | | | |

**NOTA:** Hago constar que he recibido la induccion necesaria para operar el equipo

| Residente SISOMA | Firma | |
|---|---|---|
| Anny Vidal olmos | | |