

Contact Registration

Dear Sir or Madame,

due to the current pandemic situation, we are obligated to collect the personal data of all visitors and retain the data sheets for a legal period of four weeks.

In order to register, please complete the Contact Form and hand it to the staff at the ComCenter.

The completed Contact Form will not be picked up by you after you finished your visit, you will be required to complete another one each time you will visit again!

Please follow the current hygiene guidelines (**FFP2-mask**, hand disinfection, social distance of 1,5m)!

If you notice to have symptoms typical for a cold/possibly a Corona infection – please **DO NOT VISIT!** We are asking you to understand that person(s) with a confirmed or suspected Corona infection are prohibited from visiting patients!

You confirm with your signature that you currently do not suffer from any cold symptoms and that you did not return within the last 10 days from any of the regions assessed by CDC/ German RKI to be COVID-19 risk areas.

Name: _____

Telephone number: _____

Name patient: _____

Date of visit/time: _____

Signature: _____

In case of an entrance test, pleas add the following information:

Reason: outpatient appointment | department: _____

other: _____

birth date of the tested person: _____

Vom Empfangspersonal auszufüllen:

- negativer Testnachweis (Antigentest < 24 Std. | PCR-Test < 48 Std.)
- vollständige Covid-Impfung (vor mind. 14 Tagen)
- 1-fache Covid-Impfung + genesen
- Genesene/r (Erstnachweis vor mind. 4 Wochen/max. 6 Monate)

Handzeichen