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| **No.** |  | | | | | | | | | | | | **Atención: Centro** | | | | | | | | |  | | | | | | **Zonas Azules** | | | | | | | | | | | | | |  | | | | | | | | | | | | **Pejendino Reyes:** | | | | | | | | | | | | | | | | | |  |
| Nombre y apellido: | | | | | | | | | | | | | | | | | | | | | | Ocupación: | | | | | | | | | | | | | | | | | | | | Ingresos: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fecha: | | | | | | | | | | | | | Documento de identidad | | | | | | | | |  | | | | | | | | | | | | | | | | Tipo | | | | C.C | | | | | | | | | |  | | T.I | | | | | | |  | | | | R.C | | | | | | |  |
| Hora: | | | | | | | | | | | | |
| Dirección: | | | | | | | | | | | | | Teléfono: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | EPS: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Edad: | | Puntaje de Sisben: | | | | | | | | | | |  | | | | | | | | | Escolaridad: | | | | | | | | | | | | | | | | | | | | Género: Masculino | | | | | | | | | | | |  | | | | | | | | Femenino | | | | | | | | | |  |
| Discapacidad | | | | SI | | |  | | No | | | |  | | Desplazado: | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | | |  | | | | | | | | No | | | | | | | | | |  |
| Estado civil: | | | |  | | | | | | | | | Condición diferencial: SI | | | | | | | | | | | | | | | |  | | | | | | No | | | |  | | | Afro: | | | | | | | | |  | | Room | | | | | | |  | | Indígena | | | | | | | | | |  |
| **Motivo de consulta:** | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **COMPOSICION FAMILIAR** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| N° | Nombre | | | | | | | | | | | | | | | | Parentesco | | | | | | Edad | | | | | | | Estado civil | | | | | | | | | | | | | Escolaridad | | | | | | | | | | | | Ocupación | | | | | | | | | | | | Ingresos | | | | | |
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| 1. **ESTRUCTURA FAMILIAR** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tipo de familia: | | | | | | | Nuclear | | | | | | | | |  | | | | Monoparental | | | | | | | |  | | | | | Extensa | | | | | | | | | | | | | | | | | | | | |  | | | | Reconstituida | | | | | | | | | | | |  | | |
| Unipersonal | | | | | | |  | | | Otro: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nivel económico: | | | | | | | | | | | | | Bajo | | | | | | | | | | | |  | | | Medio | | | | | | | | | | | | | | | | | | | | | |  | | | | Alto | | | | | | | | | | | | | | | |  | | |
| 1. **DINAMICA FAMILIAR** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Comunicación: | | | | | | | Buena | | | | | | | | | | | | | |  | Regular | | | | | | | | | | | | | | | | | | | | | | |  | | | | Mala | | | | | | | | | |  | | | | | | | | | | |  | | |
| Manifestaciones afectivas: | | | | | | | | | | | | | SI | | |  | | | | | No |  | | Autoridad: Madre | | | | | | | | | | | | | | | | | |  | | | | Padre: | | | | | | | |  | | | | | | Otro: | | | | | | | | | |  | | |
| Religión: | | |  | | | | | | | | | | | | | | Tipo de adicción: | | | | | | | | | | | | | | | | | Si | | | | | |  | No | | | | | | |  | | | Cuál: | | | | | | | | | | | | | | | | | | | | | |
| 1. **DESCRIPCION DE VIVIENDA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tipo de vivienda: | | | | | Rancho | | | | | |  | | | | | | | Casa | | | |  | | | | Apto | | | | | | | | | |  | | | | | | Habitaciones | | | | | | | | | | | | | |  | | | | Cocina: | | | | | | | | | | | | |
| SI | | |  | | | No | | |  | | | |
| Tenencia de vivienda | | | | | Propia | | | | | |  | | | | | | | Arriendo | | | |  | | | | Familiar | | | | | | | | | |  | | | | | | Anticres | | | | | | | | | | | | | |  | | | | Valor: | | | | | | | | | | | | |
| Material predominante: | | | | | Ladrillo | | | | | |  | | | | | | | Madera | | | |  | | | | Plástico | | | | | | | | | |  | | | | | | Cartón | | | | | | | | | | | | | |  | | | | Otro: | | | | | | | | | | | | |
| Servicios: | | | | | | Acueducto | | | | | | | |  | | | | | Energía | | |  | | | | | | | | | Gas | | | | | | | | | | | | |  | | | Internet | | | | | | | | | | | | |  | | | | | | | | | | | | |
| Hacinamiento: | | | | | | SI | |  | | | | No | |  | | | | | Ubicación de la vivienda: | | | | | | | | | | | | | | | | | | Estado de la vivienda | | | | | | | | | | B | | | | | | | | | |  | | | R | | | |  | | | | M | | |  | |
| Urbana | | |  | | | | | Rural | | | | |  | | | | |
| 1. **DIAGNÓSTICO GENERAL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. **RECOMENDACIÓN O SUGERENCIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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**FIRMA PROFESIONAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FIRMA BENEFICIARIO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Nombre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nombre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Cargo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_ **Próxima cita: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_