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|---|--|--|----------------------------------|--|--|
|  | | SISTEM PENGURUSAN PESAKIT HOSPITAL TAIPING ISSUE LOG | | NO.LOG: | |
| Requester Name: | | | | | |
| Date: | | | | | |
| Department /Unit: | | | | No. Contact/ Ext: | |
| Issue / Problem /Request: | | | | | |
| REQUESTER | | | HOD / SUPERVISOR / SISTER | | |
| Signature: | | | | Signature: | |
| Name: | | | | Name: | |
| Designation: | | | | Designation: | |
| Date: | | | | Date: | |
| FOR OFFICE USE | | | | | |
| Received By : | | | | | |
| Date Received : | | | | | |
| Category : | | Hardware | | Software | |
| | | <input type="checkbox"/> Computer <input type="checkbox"/> Barcode printer <input type="checkbox"/> Barcode scanner <input type="checkbox"/> My Card Reader <input type="checkbox"/> Others(.....) | | <input type="checkbox"/> Operating mistake <input type="checkbox"/> Data <input type="checkbox"/> Bugs <input type="checkbox"/> New request <input type="checkbox"/> Others(.....) | |
| | | | | Module | |
| | | | | <input type="checkbox"/> Billing&Payment <input type="checkbox"/> Medical Report <input type="checkbox"/> Patient Management <input type="checkbox"/> Ward Management | |
| Close To : | | | | | |
| Close Date : | | | | | |
| Status: | | | | | |
| Remarks: | | | | | |