



**PERJANJIAN BAGI KEMASUKAN SEMENTARA KE PROGRAM HEMODIALISIS
YAYASAN BUAH PINGGANG KEBANGSAAN MALAYSIA (NKF)**

**AGREEMENT FOR TEMPORARY ADMISSION TO THE HAEMODIALYSIS PROGRAMME
OF THE NATIONAL KIDNEY FOUNDATION OF MALAYSIA (NKF)**

Adalah saya _____ No K.P: _____
mewakili diri saya / pesakit bernama _____

No K.P: _____, bersetuju dirawat sebagai pesakit sementara di
Pusat Dialisis _____ untuk suatu tempoh
masa tertentu atau sehingga permohonan kemasukan tetap saya / pesakit diluluskan oleh
Yayasan Buah Pinggang Kebangsaan Malaysia, dan akan mematuhi syarat - syarat berikut:-

I _____ No KP: _____
representing myself / patient named _____ No
KP: _____, hereby agree that I/he/she will be treated as a temporary
patient at Dialysis Centre _____ for a certain
period of time until my / patient's application for permanent admission is approved by the National
Kidney Foundation of Malaysia, and will comply with the following requirements:

[tandaikan yang berkaitan]/ [tick where relevant]

- Bersetuju membayar kos rawatan sebanyak RM 200 [tunai] bagi setiap rawatan hemodialisis dengan mengemukakan wang pendahuluan [RM 600] setiap awal minggu sehingga permohonan kemasukan tetap diluluskan oleh Yayasan Buah Pinggang Kebangsaan Malaysia;
Agree to pay RM200 [cash] for each haemodialysis treatment by submitting advance payment of RM 600 at the beginning of each week until the application for permanent admission is approved by the National Kidney Foundation of Malaysia;
- Mengemukakan laporan perubatan / submit medical report;
- Laporan ujian makmal yang lengkap dan terkini bagi ujian Hepatitis B, Hepatitis C dan HIV /
Complete and most recent laboratory test reports for Hepatitis B, Hepatitis C and HIV;
- Borang Maklumat Keluarga / *Family Information form;*
- Salinan slip gaji dan borang Cukai Pendapatan terkini bagi pemohon dan semua ahli keluarga yang bekerja / *A copy of the latest pay slip and income tax returns of applicant and all family members who are working;*
- Salinan penyata KWSP terkini pemohon dan semua ahli keluarga yang bekerja / *A copy of the latest EPF statement of applicant and all family members who are working;*
- Salinan slip bayaran terkini dari Jabatan Pencen / PERKESO (jika ada) bagi pemohon / *A copy of the latest payment slip from the Pensions Department / Social Security Organisation (SOCSSO) (if any) for applicant;*
- Salinan penyata akaun tetap atau simpanan (jika ada) bagi pemohon dan semua ahli keluarga yang bekerja / *Copies of fixed deposits or savings accounts (if any) of applicant and all family members who are working;*
- Bil elektrik, air, telefon & Astro / *electricity, water, telephone and Astro bills;*
- Gambar rumah pesakit / *photos of patient's house;*
- Surat jaminan daripada majikan [tertakluk kepada terma dan syarat] / *Letter of guarantee from the employer [subject to terms and conditions].*

Saya faham bahawa semua dokumen yang tersebut di atas diperlukan untuk pemprosesan kemasukan tetap ke Program Hemodialisis NKF dan permohonan subsidi Kementerian Kesihatan Malaysia. Jika saya gagal mematuhi syarat - syarat di atas atau gagal mengemukakan dokumen yang berkaitan dalam tempoh **[4] empat minggu** dari tarikh perjanjian ini, NKF berhak memberhentikan rawatan kepada saya / pesakit tanpa sebarang notis.

I understand that all the above-mentioned documents are required for the processing of my/patient's application for admission to the NKF Haemodialysis Program and the Ministry of Health subsidy for dialysis treatment. If I fail to comply with the conditions above or fail to submit the relevant documents within [4] four weeks of the date of this agreement, NKF reserves the right to discontinue treatment to me / patient without prior notice.

Ditandatangani oleh Pesakit/wakil*

Signed by Patient / Representative

Nama / Name: _____

Tarikh / date: _____

Ditandatangani oleh Saksi

*Signed by Witness**

Nama / Name : _____

Tarikh / date: _____

Hubungan [*tanda yg berkaitan] /
*Relationship [*tick where relevant]:*

- Suami / husband
- Isteri / wife
- Anak / son/daughter
- Ibu / mother
- Bapa / father
- Adik beradik / sister/brother
- Others/Lain-lain (nyatakan) _____

Ditandatangani & cop untuk dan bagi pihak NKF

Signed and stamped for and on behalf of NKF

Tarikh / Date: _____