**Reactieformulier conceptrichtlijn richtlijn Diarree in de palliatieve fase**

Wij verzoeken u dit reactieformulier **vrijdag 22 maart 2024** te sturen naar Mathilde Roelofsen ([richtlijnen@pznl.nl](mailto:richtlijnen@pznl.nl)).

Reactie van: [naam]

Voor: [naam patiëntenorganisatie / beroepsvereniging / wetenschappelijke vereniging / andere organisatie]

Datum: [datum]

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| **Algemene opmerkingen over de conceptrichtlijn** |
| Graag horen wij hier in hoofdlijnen wat u van de richtlijn vindt. Kunt u zich vinden in de inhoud en de aanbevelingen? |

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| **Opmerkingen over de implementatie van deze richtlijn** |
| Voorziet u problemen bij de implementatie van deze richtlijn? Zo ja, welke? |

Graag ontvangen wij hieronder uw commentaar per regelnummer.

| **Inleiding** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Signalering en anamnese** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Lichamelijk onderzoek** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Aanvullend onderzoek** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Voorlichting** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Preventie** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Ondersteunende zorg** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Niet-medicamenteuze behandeling** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Medicamenteuze behandeling** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Organisatie van zorg** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Tenesmi** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Signalering en anamnese** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Lichamelijk onderzoek** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module Aanvullend onderzoek** | | | | |
| --- | --- | --- | --- | --- |
| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Module (Niet-) medicamenteuze behandeling** | | | | |
| --- | --- | --- | --- | --- |
| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |

| **Bijlagen** | | | | |
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| **Regel-**  **nummer** | **Soort commentaar1** | **Voorstel2** | **Nieuwe tekst** | **Argumentatie/referenties3**  **(verplicht)** |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |
|  | Inh/Te | A/T/V |  |  |