



NOTIFIKASI PENYAKIT , KEMALANGAN DAN KERACUNAN PEKERJAAN MENGGUNAKAN SISTEM **eKPAS**

Unit Kesihatan Pekerjaan dan Alam Sekitar
Bahagian Kesihatan Awam
Jabatan Kesihatan Negeri Johor

WHAT IS NADOPOD ?

**Notification of Accident, Dangerous
Occurrence, Occupational Poisoning and
Occupational Disease Regulations 2004**

**(PEMBERITAHUAN MENGENAI KEMALANGAN,
KEJADIAN BERBAHAYA, KERACUNAN PEKERJAAN DAN
PENYAKIT PEKERJAAN)**

JENIS BORANG NOTIFIKASI KEMALANGAN, KEJADIAN BERBAHAYA, PENYAKIT PEKERJAAN DAN KERACUNAN (WEHU)

BIL	BORANG NOTIFIKASI
1	WEHU A1, A2 (JKKP 6)* Notification of Occupational Accident And Dangerous Occurrence (kemalangan & kecederaan di kalangan pekerja)
2	 WEHU D1, D2 (JKKP 7)* Notification of Occupational Poisoning Disease (penyakit pekerjaan & keracunan pesticid & kimia)
3	WEHU E1, E2 (JKKP 7)* Notification of Occupational Noise Induced Hearing Loss (penyakit pendengaran akibat bunyi bising) 
4	 WEHU L1, L2 (JKKP 7)* Notification of Occupational Lung Disease (penyakit paru-paru pekerjaan)
5	WEHU S1, S2 (JKKP 7)* Notification of Occupational Skin Disease (penyakit kulit pekerjaan) 

PERATURAN DI BAWAH OSHA (NADOPD 2004)

Bilakah kes perlu dilaporkan?

- dengan **serta-merta** bagi kemalangan maut, kemalangan teruk & kejadian berbahaya
- dalam tempoh **7 hari** bagi kemalangan yang menyebabkan tidak berkerja lebih 4 hari,

Apakah tindakan undang-undang sekiranya anda tidak melapor?

- denda tidak melebihi **RM 10,000** atau
- penjara tidak melebihi **satu tahun** atau
- **kedua-duanya** sekali



CARTA ALIR PROSES NOTIFIKASI DAN SIASATAN

PROSES	INDIVIDU BERTANGGUNGJAWAB	TEMPOH MASA
Kejadian kes kemalangan/penyakit pekerjaan/keracunan		
Notifikasi ke PKD dengan menggunakan Borang WEHU A1 & A2, D1 & D2, E1 & E2, L1 & L2, S1 & S2	Peg. Penyelia/Mana-mana pegawai yang dilantik	Dalam masa 24 jam selepas kejadian dengan menggunakan telefon dan diikuti oleh borang notifikasi dalam masa 3 hari
Aktiviti siasatan dijalankan dengan menggunakan borang OHU/BS-01	PPKP KPAS/Kes. Am	Dalam masa 48 jam setelah notifikasi diterima
Laporan lengkap dihantar ke JKN	PPKP KPAS/Kes. Am	Dalam masa 14 hari setelah notifikasi diterima
Penghantaran laporan ke KKM	Unit KPAS J KN	Dalam masa 14 hari setelah laporan lengkap diterima

LATAR BELAKANG EKPAS

- Mula - pada tahun 2019, eKPAS diperkenalkan dan diperluas kan penggunaannya ke JKNJ dan juga ke Daerah.
- Objektif awal eKPAS adalah untuk mengurangkan kelewatan notifikasi daripada pelbagai PTJ tanpa melibatkan kos yang tinggi.
- Merangkumi 5 modul iaitu WEHU A, WEHU S, WEHU D, WEHU E, WEHU L dan Sharp Injured Surveillance(SIS).
- Terdapat 3 komuniti login iaitu Admin Utama, Admin PTJ dan Pengguna
- Dapat mengurangkan kelewatan notifikasi.

WEHU Forms

Kementerian Kesihatan Malaysia

COPY FOR MINISTRY WEHU-A1 (JKKP6)

NOTIFICATION OF OCCUPATIONAL ACCIDENT AND DANGEROUS OCCURRENCE

Location of accident / incident : Unit Suruhan Negeri, Kuala Lumpur
 Date of accident / incident : 26/02/2016 Time of accident / incident occur : 10:50 AM

Send to: Pengarah Kesihatan Negeri, Jabatan Kesihatan Negeri Johor

Part B - Affected person (If more than one person please list the name in Part C)
 Name : MOHAMMAD BINI AHMAD AHMAD
 Date of birth : 12 04 1975
 New IC / Passport no. : 950913-07-0994

Part A - Details of Notifier
 Name : MOHAMMAD BINI AHMAD AHMAD
 Designation : Medical Officer
 Name and address of organization : Hospital Kuala Lumpur, Jalan Tun Hussein, 50450 Kuala Lumpur
 Contact no. : 011-7131452

WEHU A
Notification of Occupational Accident and Dangerous Occurrence

COPY FOR MINISTRY WEHU-D1 (JKKP7)

NOTIFICATION OF OCCUPATIONAL POISONING/DISEASE

Send to: Pengarah Kesihatan Negeri, Jabatan Kesihatan Negeri Johor

Part B - Affected person
 Name : ANITA RAHMAN
 Date of Birth : 25/01/80 New IC / Passport no. : 84125 01 6416
 DOB : 25 01 80

Part A - Notifier (Regulation 7(2) Registered Medical Practitioner)
 Name : DR. MOHAMMAD ALI SAIFUDDIN
 Designation : General Practitioner
 Address of clinic / hospital : 10, Jalan Sultan, 80000, Johor Bahru, Johor
 Contact no. : 07-3363460

WEHU D
Notification of Occupational Poisoning Disease

COPY FOR MINISTRY WEHU-E1 (JKKP7)

NOTIFICATION OF OCCUPATIONAL NOISE INDUCED HEARING LOSS

Send to: Pengarah Kesihatan Negeri, Jabatan Kesihatan Negeri Johor

Part B - Affected person
 Name : MOHAMMAD BINI AHMAD AHMAD
 Date of Birth : 16/08/1968 New IC / Passport no. : 680816-01-0000
 DOB : 16 08 1968

Part A - Notifier (Regulation 7(2) Registered Medical Practitioner)
 Name : DR. MOHAMMAD ALI SAIFUDDIN
 Designation : Medical Officer
 Address of clinic / hospital : Hospital Sultanah Nur Zahirah, Jalan Sultan, 80000, Johor Bahru, Johor
 Contact no. : 60329051727

WEHU E
Notification of Occupational Noise Induced Hearing Loss

COPY FOR MINISTRY WEHU-L1 (JKKP7)

NOTIFICATION OF OCCUPATIONAL LUNG DISEASE

Send to: Pengarah Kesihatan Negeri, Jabatan Kesihatan Negeri Johor

Part B - Affected person
 Name : MOHAMMAD BINI AHMAD AHMAD
 Date of Birth : 09/09/1968 New IC / Passport no. : 680816-01-0000
 DOB : 09 09 1968

Part A - Notifier (Regulation 7(2) Registered Medical Practitioner)
 Name : MOHAMMAD ALI SAIFUDDIN
 Designation : Medical Officer
 Address of clinic / hospital : Hospital Sultanah Nur Zahirah, Jalan Sultan, 80000, Johor Bahru, Johor
 Contact no. : 07-3363460

WEHU L
Notification of Occupational Lung Disease

WEHU Forms

Kementerian Kesihatan Malaysia

5/5/16/09/002

NOTIFICATION OF OCCUPATIONAL SKIN DISEASE WEHU-SI (JKKP?)

Send to:
Pengarah Kesihatan Negeri
Jabatan Kesihatan Negeri

23 AUG 2016

Part A - Notifier
(Regulation 7(2) Registered Medical Practitioner)

Name: Dr. Firdaus Jahan

Designation: Regist. Perubatan Up 44

Address of clinic / hospital: Hospital Sultan Ismail

Contact no.: 03-565200 ext 222

Part B - Affected person

Name: Siti Noor Amirah Ainul Ab. Rahim

Date of Birth: 04/08/1992 New IC/Passport no.: 920804-04-5262

DD MM YY

Nationality: Malaysia Gender: ☐ Male ☒ Female

Ethnic Group: Malay Occupation: Surrounding

Name and address of organization: Hospital Sultan Ismail /
Baitan Perubatan Matrika Baru Waja
Jalan Medan Austin, 80000

District: Bukit Baru State: JOHOR BARU

Location of incident: Hospital Sultan Ismail

WEHU S
Notification of
Occupational Skin
Disease

5/5/16/09/001

SHARPS INJURY SURVEILLANCE
OCCUPATIONAL HEALTH UNIT
MINISTRY OF HEALTH
"Berkes Aman Menggubakan Kesihatan Rakyat"
"Your Partner In Enhancing Workers Health"

31 JAN 2016

EPIDEMIOLOGY SECTION
(OHU/SIS-1)

EPIDEMIOLOGY SECTION
(To be filled by staff from Infection Control Team / Occupational Health Unit / Occupational Safety and Health Committee Secretary)

PARTICULARS OF AFFECTED PERSON

(Please tick (✓) where applicable)

1. Name: Dr. Firdaus Jahan

2. Gender: ☒ Male ☐ Female

3. Nationality: Malaysia

4. Age on the 1st of January: 23 years

5. Occupational Priority attached to: 5.0

6. Contact number: 011-1111111

SIS
Sharp Injury
Surveillance

KELEWATAN NOTIFIKASI DAN SIASATAN JAN -JUN 2022 (PKD)

SENARAI PTJ	SIS		WEHU A		WEHU D		WEHU L		WEHU S	
	NOTIFIKASI > 7 HARI	SIASATAN > 14 HARI	NOTIFIKASI > 7 HARI	SIASATAN > 14 HARI	NOTIFIKASI > 7 HARI	SIASATAN > 14 HARI	NOTIFIKASI > 7 HARI	SIASATAN > 14 HARI	NOTIFIKASI > 7 HARI	SIASATAN > 14 HARI
PKD JB	1	3	0	16	0	0	1	114	0	0
PKD BP	0	0	0	1	0	0	0	8	0	0
PKD MUAR	0	0	0	0	0	0	0	0	0	0
PKD KLUANG	0	0	0	4	0	0	1	5	0	0
PKD SEGAMAT	0	0	0	0	0	0	0	5	0	0
PKD PONTIAN	0	0	0	0	0	0	0	22	0	0
PKD TANGKAK	0	0	0	1	0	0	0	0	0	0
PKD MERSING	0	0	0	0	0	0	0	0	0	0
PKD KOTA TINGGI	3	0	1	1	0	0	8	9	0	0
PKD KULAI	0	0	0	1	0	0	0	8	0	0
JUMLAH LEWAT	4	3	1	24	0	0	10	171	0	0
JUMLAH SEMUA KES	79		100		5		676		8	
% LEWAT	5.1	3.8	1.0	24.0	0.0	0.0	1.5	25.3	0.0	0

KOMUNITI LOGIN EKPAS

01	Admin Utama (JKNJ)
02	Admin PTJ (Pejabat Kesehatan Daerah & Pejabat Kesehatan Pergigian Daerah
03	Pengguna (KK/KD)

MODUL ADMIN UTAMA

1	DAFTAR	PENDAFTARAN WEHU A,D,E L S DAN SIS
2	KEMASKINI /CETAK	Kemaskini dan cetak WEHU A,S,D,E,L dan SIS
3	LAPORAN	Boleh melihat laporan bagi WEHU A,S,D,E,L dan SIS.
4	KAWALAN	Boleh mendaftar penyelaras dan melihat senarai penyelaras seluruh daerah
5	KELUAR	Keluar daripada sistem ekpas

MODUL ADMIN PTJ

1	DAFTAR	PENDAFTARAN WEHU A,D,E L S DAN SIS
2	KEMASKINI /CETAK	Kemaskini dan cetak WEHU A,S,D,E,L dan SIS
3	LAPORAN	Boleh melihat laporan bagi WEHU A,S,D,E,L dan SIS.
4	KAWALAN	Boleh mendaftar penyelarasan dan melihat senarai penyelarasan Daerah sendiri
5	KELUAR	Keluar daripada sistem ekpas

MODUL ADMIN PENGGUNA

1	DAFTAR	PENDAFTARAN WEHU A,D,E L,S DAN SIS
2	KEMASKINI /CETAK	Kemaskini dan cetak WEHU A,D,E,L,S dan SIS
5	KELUAR	Keluar daripada sistem ekpas

Welcome!!

E-KPAS

KPAS, BAHAGIAN KESIHATAN AWAM
JABATAN KESIHATAN NEGERI JOHOR



eKPAS

Jabatan Kesihatan Negeri Johor



[LAMAN UTAMA](#)

[PENTADBIR eKPAS]

Kata Masuk :

Kata Laluan :

Jabatan/Bahagian :

JKNJ - PENGURUSAN



MASUK



MENU (PENTADBIR)

Laman Utama

Permohonan Baru ▼

Pendaftaran WEHU ▲

BORANG A

BORANG S

BORANG D

BORANG E

BORANG L

Paparan/Kemaskini ▼

Surat/Laporan ▼

Kawalan ▼

Log Keluar

TARIKH : Ahad , 10/02/2019 | NAMA PEGAWAI : NORLIZA BINTI ABDUL SALAM

JOHOR

Pengumuman		Pengumuman
Sebarang masalah atau pertanyaan, sila hubungi Unit KPAS Jabatan Kesihatan Negeri Johor.	SELAMAT DATANG KE SISTEM eKPAS (eKPAS) JABATAN KESIHATAN NEGERI JOHOR 	 <i>Terdapat Permohonan Baru untuk diambil tindakan.</i> 2 - untuk WEHU A 3 - untuk WEHU S 1 - untuk WEHU D 1 - untuk WEHU E 0 - untuk WEHU L



**MENU (PENTADBIR
UTAMA)**

**NAMA PEGAWAI :NORMAH
BT KASSIM
PTJ : JKNJ - KESIHATAN
AWAM**

Laman Utama

Pendaftaran WEHU ^

BORANG A

BORANG S

BORANG D

BORANG E

BORANG L

**SHARPS INJURY
SURVEILLANCE(SIS)**

Kemaskini/Cetakan v

TARIKH : Isnin , 25/07/2022 | NAMA PEGAWAI :NORMAH BT KASSIM

AT DATANG KE SISTEM eKPAS JABATAN KESIHATAN NEG

WEHU A1

WEHU A2

NOTIFICATION OF OCCUPATIONAL ACCIDENT AND DANGEROUS OCCURRENCE

Location of accident / incident :

Date of accident/ incident :

Time of accident/incident occur :

Part A - Detail of Notifier

Name :

Designation :

Name and address of organization :

Contact no :

No. Pendaftaran Profesional :

Part B - Affected person (If more than one person please list the name in Part C)



MENU (PENTADBIR UTAMA)

NAMA PEGAWAI :NORMAH BT
KASSIM
PTJ : JKNJ - KESIHATAN
AWAM

Laman Utama

Pendaftaran WEHU

BORANG A

BORANG S

BORANG D

BORANG E

BORANG L

SHARPS INJURY
SURVEILLANCE(SIS)

Kemaskini/Cetakan

Laporan

Kawalan

TARIKH : Isnin , 25/07/2022| NAMA PEGAWAI :NORMAH BT KASSIM

ISTEM eKPAS JABATAN KESIHATAN NEGERI JOHOR

No. Pendaftaran Profesional

Part B - Affected person (If more than one person please list the name in Part C)

Name

New IC

(IC without '-')

Date Of Birth

Age

years (Sistem akan membuat pengiraan secara automatik)

Passport No

Nationality

Gender

Occupation

Ethnic group

Name and address of organization

District

State

Duration of current job

Date of first informing DOSH

2019-01-01

(tttt-hh-bb) (Sila masukkan tarikh mengikut format yg dinyatakan)

Part C - Description of accident or dangerous occurrence



MENU (PENTADBIR UTAMA)

**NAMA PEGAWAI :NORMAH BT
KASSIM**

**PTJ : JKNJ - KESIHATAN
AWAM**

Laman Utama

Pendaftaran WEHU

BORANG A

BORANG S

BORANG D

BORANG E

BORANG L

**SHARPS INJURY
SURVEILLANCE(SIS)**

Kemaskini/Cetakan

Laporan

Kawalan

TARIKH : Isnin , 25/07/2022||NAMA PEGAWAI :NORMAH BT KASSIM

SELAMAT DATANG KE SISTEM eKPAS JABATAN KESIHATAN

Part C - Description of accident or dangerous occurrence

a) What were the activities involved prior to the accident

b) What actually happened during the accident (agent involved and effect to the person involved) ?

c) Why did the accident happen?

d) What were the actions taken following the accident?

Signature of Notifier

:

Name

:

Date*

:

Address

:

No. Pendaftaran
Profesional

:

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MENU (PENTADBIR UTAMA)

NAMA PEGAWAI :NORMAH BT
KASSIM
PTJ : JKNJ - KESIHATAN
AWAM

Laman Utama

Pendaftaran WEHU

BORANG A

BORANG S

BORANG D

BORANG E

BORANG L

SHARPS INJURY
SURVEILLANCE(SIS)

Kemaskini/Cetakan

Laporan

Kawalan

TARIKH : Isnin , 25/07/2022|NAMA PEGAWAI :NORMAH BT KASSIM

ABATAN KESIHATAN NEGERI JOHOR

WEHU A1

WEHU A2

Date of notification

Part 1 : Particulars of reporting unit

Name of facility

Unit / Department / Ward

Part II : Particulars of affected person

Date seen / treated / admitted

Medical certificate (MC) given

- ☐ No
☐ Yes

Duration of MC

 days

Part III : Classification of accident (Tick ☒ more than one if relevant)

1. Nature of injury

- | | |
|---|--|
| ☐ Abrasions | ☐ Radiation |
| ☐ Amputation | ☐ Fracture |
| ☐ Asphyxia | ☐ Drown |
| ☐ Burns | ☐ Laceration |
| ☐ Bruises and contusions | ☐ Punctured wound/prick |
| ☐ Concussions | ☐ Sprain & strain |
| ☐ Cuts | ☐ Internal injuries |



MENU (PENTADBIR UTAMA)

NAMA PEGAWAI :NORMAH BT
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PTJ : JKNJ - KESIHATAN
AWAM

Laman Utama

Pendaftaran WEHU

BORANG A

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BORANG E

BORANG L

SHARPS INJURY
SURVEILLANCE(SIS)

Kemaskini/Cetakan

Laporan

Kawalan

TARIKH : Isnin , 25/07/2022|NAMA PEGAWAI :NORMAH BT KASSIM

.TAN KESIHATAN NEGERI JOHOR

☐ Electrocution

2. Part of Body Injured

Head and Neck

☐ Scalp

☐ Skull

☐ Eyes

☐ Right

☐ Left

☐ Ears

☐ Right

☐ Left

☐ Nose

☐ Mouth

☐ Teeth

☐ Face

☐ Neck

Upper Limbs

☐ Upper arms

☐ Right

☐ Left

☐ Elbow

☐ Right

☐ Left

☐ Forearm

☐ Right

☐ Left

☐ Wrist

☐ Right

☐ Left

☐ Hand

☐ Right

☐ Left

☐ Palm

☐ Right

☐ Left

☐ Fingers

☐ Right

☐ Left

☐ Other specify:

Torso

☐ Back

☐ Chest

☐ Abdomen

☐ Pelvis

☐ Groin

Lower Limbs

☐ Hip

☐ Right

☐ Left

☐ Thigh

☐ Right

☐ Left

☐ Leg

☐ Right

☐ Left

☐ Knee

☐ Right

☐ Left

☐ Ankle

☐ Right

☐ Left

☐ Feet

☐ Right

☐ Left

☐ Toes

☐ Right

☐ Left

3. Mechanism of accident



MENU (PENTADBIR UTAMA)

NAMA PEGAWAI :NORMAH BT KASSIM

PTJ : JKNJ - KESIHATAN AWAM

Laman Utama

Pendaftaran WEHU

BORANG A

BORANG S

BORANG D

BORANG E

BORANG L

**SHARPS INJURY
SURVEILLANCE(SIS)**

Kemaskini/Cetakan

Laporan

Kawalan

3. Mechanism of accident

- | | |
|--|---|
| ☐ Struck against object | ☐ Splash of blood / body fluid |
| ☐ Struck by sliding, falling, flying or other moving object | ☐ Splash of chemicals |
| ☐ Motor vehicle accident | ☐ Exposure to / or contact with harmful substances / radiation |
| ☐ Caught in / or between object | ☐ Exposure to / or contact with electric currents |
| ☐ Fall or slip on same level | ☐ Exposure to explosion |
| ☐ Fall from height | ☐ Drowning |
| ☐ Injured while handling, lifting or carrying | ☐ Crush by moving /sliding object |
| ☐ Contact with extreme temperature | ☐ Needle stick / Needle prick |
| ☐ Others (please specify): | ☐ Physical assault |

4. Agent involved in accident

- | | |
|--|---|
| ☐ Machine/ electrical equipment | ☐ Chemicals / Gases |
| ☐ Lifting equipment | ☐ Floors/ Levels |
| ☐ Transport equipment / Vehicle | ☐ Ladders |
| ☐ Needles: ☐ Hollowbore ☐ Solid | ☐ Stairs/ steps |
| ☐ Lab instruments | Medical/ Surgical / Dental Instruments (other than needles):
☐ please specify) : |



MENU (PENTADBIR UTAMA)

**NAMA PEGAWAI :NORMAH BT
KASSIM**
**PTJ : JKNJ - KESIHATAN
AWAM**

Laman Utama

Pendaftaran WEHU ▲

BORANG A

BORANG S

BORANG D

BORANG E

BORANG L

**SHARPS INJURY
SURVEILLANCE(SIS)**

Kemaskini/Cetakan ▼

Laporan ▼

Kawalan ▼

4. Agent involved in accident

☐ Machine/ electrical equipment

☐ Lifting equipment

☐ Transport equipment / Vehicle

☐ Needles: ☐ Hollowbore ☐ Solid

☐ Lab instruments

☐ Pressure Vessels

☐ Blood/ Body fluids

☐ Chemicals / Gases

☐ Floors/ Levels

☐ Ladders

☐ Stairs/ steps

Medical/ Surgical / Dental Instruments (other than needles):
☐ please specify :

☐ Others (please specify):

5. Existing control measure at workplace

☐ Engineering Control

☐ Standard Operating Procedure (SOP)

☐ Training / Education / Work Schedule/ Rotation

☐ Personal Protective Equipment (PPE)

☐ Other (please specify):

SAVE / DAFTAR

SISTEM eKPAS

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MENU (PENTADBIR UTAMA)
NAMA PEGAWAI :NORMAH BT KASSIM
PTJ : JKNJ - KESIHATAN AWAM

Laman Utama

Pendaftaran WEHU ^

BORANG A
BORANG S
BORANG D
BORANG E
BORANG L
SHARPS INJURY SURVEILLANCE(SIS)

Kemaskini/Cetakan ^

BORANG A
BORANG S
BORANG D
BORANG E
BORANG L
SHARPS INJURY SURVEILLANCE

TARIKH : Khamis , 11/06/2020 | NAMA PEGAWAI :NORMAH BT KASSIM

SELAMAT DATANG KE SISTEM eKPAS JABATAN KESIHATAN NEGARA

WEHU S1WEHU S2

NOTIFICATION OF OCCUPATIONAL SKIN DISEASE

Part A - Detail of Notifier (Regulation 7(2) Registered Medical Practitioner)

Name

:

Designation

:

-Please Select-

Name and address of organization

:

Contact no

:

No. Pendaftaran Profesional

:

Part B - Affected person

Name

:

New IC

:

(IC without '-')

Date Of Birth

:

Age

:

years

(Sistem akan membuat pengiraan secara automatik)

Passport No

:

Nationality

:

-Please Select-

Gender

:

-Please Select-



7:39 AM
11/6/2020

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MENU (PENTADBIR UTAMA)
NAMA PEGAWAI :NORMAH BT KASSIM
PTJ : JKNJ - KESIHATAN AWAM

Laman Utama

Pendaftaran WEHU

- BORANG A
- BORANG S
- BORANG D
- BORANG E
- BORANG L
- SHARPS INJURY SURVEILLANCE(SIS)

Kemaskini/Cetakan

- BORANG A
- BORANG S
- BORANG D
- BORANG E
- BORANG L
- SHARPS INJURY SURVEILLANCE

TARIKH : Khamis , 11/06/2020 | NAMA PEGAWAI :NORMAH BT KASSIM

DATANG KE SISTEM eKPAS JABATAN KESIHATAN NEGERI KPAS

WEHU E1WEHU E2

NOTIFICATION OF OCCUPATIONAL POISING/DISEASE

Part A - Detail of Notifier (Regulation 7(2) Registered Medical Practitioner)

Name

:

Designation

:

-Please Select-

Name and address of organization

:

Contact no

:

No.Pendaftaran Profesional

:

Part B - Affected person

Name

:

New IC

:

(IC without '-')

Date Of Birth

:

Age

:

years

(Sistem akan membuat pengiraan secara automatik)

Passport No

:

Nationality

:

-Please Select-

Gender

:

-Please Select-





MENU (PENTADBIR UTAMA)

NAMA PEGAWAI :NORMAH BT KASSIM
PTJ : JKNJ - KESIHATAN AWAM

Laman Utama

Pendaftaran WEHU

BORANG A
BORANG S
BORANG D
BORANG E
BORANG L
SHARPS INJURY
SURVEILLANCE(SIS)

Kemaskini/Cetakan

BORANG A
BORANG S
BORANG D
BORANG E
BORANG L
SHARPS INJURY
SURVEILLANCE

TARIKH : Khamis , 11/06/2020 || NAMA PEGAWAI :NORMAH BT KASSIM

JR

SIS-PARTICULARS

SIS-1

SIS-2

SIS-3

SIS-4

SIS-5

EPIDEMIOLOGY SECTION

(to be filled by staff from Infection Control / Occupational Health Unit / Occupational Safety and Health Committee Secretary)

PARTICULARS OF AFFECTED PERSON

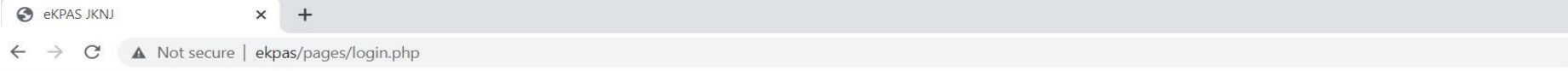
(Please tick (☒) where applicable)1.State : 2.District :

3.Name of hospital / health clinic :

*Tarikh Notifikasi:

1. Name : 2. Gender : 3. NRIC : (IC without '-')4. Date of birth: : 5. Age on the 1st of January : years (Sistem akan membuat pengiraan secara automatik)6. Nationality : 7. Department Presently attached to : 8. Contact number : 9. Date of injury : Time : [cth :08:00 AM]Date of first reporting to Medical / ID Team : Time : [cth :08:00 AM]11. Duration of employment in Ministry of Health : 

VERSI 2.0



LOG MASUK

Hak cipta terpelihara Unit Kesihatan Pekerjaan Dan Alam Sekitar, Bahagian Kesihatan Awam, JKNJ dengan Unit Pengurusan Maklumat JKNJ.

Sebarang masalah sila berhubung ke email : kpasjknj@moh.gov.my

🏠 Menu Utama (Admin Utama)

📊 Pendaftaran WEHU <

📊 Kemaskini/Cetak <

📊 Laporan <

📊 Kawalan <

📊 Keluar Sistem <

WEHU L1

WEHU L2

TUBERKULOSIS

APPENDIX4

NOTIFICATION OF OCCUPATIONAL LUNG DISEASE

Part A - Detail of Notifier (Regulation 7(2) Registered Medical Practitioner)

Name : MOHD ZAIDAN BIN MOHD ZAWAWI

Designation : Assistant Medical Officer ▾

Name and address of organization : HOSPITAL TEMENGGONG SERI MAHARAJA TUN
IBRAHIM KULAI JOHOR

Contact no : 0129051015

MMC No * : 8474

Part B - Affected person

Name : NURUL NABILAH BT NGATINAN

New IC : 920220015514

Date Of Birth : 20-02-1992

Age : 29

Passport No :

Nationality : Malaysian ▾

Gender : Female ▾

Occupation : JURURAWAT TERLATIH

Ethnic group : MELAYU ▾

TERIMA KASIH

