



At the bottom of this page are reminders for some preventive services based on Kaiser Permanente's current electronic records. If you have on-going health problems or are at high risk for certain diseases, you may need more frequent preventive services and should consult your physician. If an appointment is necessary, please schedule it.

CHECK-IN RECEIPT
KAISER PERMANENTE®

MRN: 110007897966 Name: ANDERSON, AMANDA E

Visit Coverage: KP CLASSIC

Appt Date/Time: 5/6/07 3:00 PM
Appt With: TAFIA, MARTHA FABIOLA (D.O.)

Dept: STKPED

Check-In Date/Time: 05/06/07 3:01 PM

Amount Due: \$ 10.00
Amount Paid: \$ 10.00

Source: Cash

Ref: 011

Encounter: 3202408324

Acct: 32070238

Receipt: 1614811

PRIMARY CARE PROVIDERS

GENERAL: CORDOVA, VIDA B. (M.*OB/GYN PHYSI; POIRIER-BRODE, KAREN Y. (OB/GYN OTHER: GRISMORE, LYNN SOARES (N.P.))

PREVENTIVE SERVICES	COUNT	LAST	NEXT DUE
INCOMPLETE VARICELLA			* 6/06/07
INCOMPLETE HEPATITIS A			*11/06/07
Review WELL CARE CHECK UP		8/17/04	8/17/06
CURRENT DIPHTHERIA-TETANU	6	8/17/04	11/13/40
CURRENT HEPATITIS B	3	9/20/01	
CURRENT POLIO	4	3/02/95	
CURRENT M-M-R	2	3/02/95	

(* = IF INCOMPLETE DOSE IS GIVEN TODAY)

Return appointment: _____ days _____ weeks _____ months

This is only an estimate of today's charges. There may be additional fees as a result of the care you received today. If you would like information about your benefits, limitations and exclusions call Member Services at 800-464-4000.

* Services will be rendered in Emergency Department regardless of ability to pay.