



KAISER PERMANENTE RECEIPT

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

MRN: 110007897964

Name: ANDERSON, TIFFANY K

Visit Coverage: KFHP 1000

Appt Date/Time: 8/9/11 3:30 PM

Appt With: MAGNETIC RESONANCE IMAGING TWO

Dept: STKRAD

Check-In Date/Time: 08/09/11 2:59 PM

Amount Due: \$ 0.00

Amount Paid: \$ 0.00

Source:

Ref:

Encounter: 32013125120

Acct: 32070238

Receipt:

Visit your doctor's home page at kp.org/mydoctor to view your Preventive Service reminders, check lab results, request refills, use online tools.

PERSONAL PHYSICIAN(S)

GENERAL: JASTI, HYMAVATHY (M.*OB/GYN PHYSI: OGUNJIMI, ESTHER OLUWAKEM

OB/GYN OTHER: WALKER, KATHRYN GAIL (M.F.)

Applications

SERVICES	LAST	DUE
DUE ADULT TDAP		8/22/81
DUE MAMMOGRAPHY		8/22/10
Current CERVICAL SCREEN	9/26/08	9/26/11
Current CHOLESTEROL SCREEN	10/17/10	10/17/15
Current PNEUMO VACCINE		8/22/35
Current COLON CANCER SCREENING		
Current INFLUENZA VACCINE		NA

Policies

For questions or information on our Medical Financial Assistance and Discount Payment Policies, please contact the Medical Financial Assistance Central Unit at 1-866-399-7696 Monday through Friday, 8 a.m. to 5 p.m.

Return appointment: _____ days _____ weeks _____ months

You have paid the above amount toward your total charges for services you will receive today or during this hospital admission. If this does not cover your full financial liability, you will receive a bill for additional charges based on the specifics of your health coverage plan, your included benefits, and the actual services you receive. If you have questions or want more information about your benefits, limitations, exclusions, and charges, please call the telephone number on your identification card.