

**After Visit Summary - PATIENT  
CONFIDENTIAL - COPY**

Tiffany K Anderson (MRN 110007897964)

This document contains confidential information about your health and care at Kaiser Permanente.

**Visit Information****Appointment Information**

	Provider	Department	Dept Phone
10/24/2011 11:10 AM	HYMAVATHY JASTI MD	Stk-Medf >West Lane	

**Your Primary Care Providers**

Provider	PCP Type
ESTHER OLUWAKEMI OGUNJIMI MD	OB/GYN Physician
KATHRYN GAIL WALKER NP	OB/GYN Other
HYMAVATHY JASTI MD	General

**Personal Care Information****Patient Instructions**

None

Please visit my home page at [kp.org/mydoctor](http://kp.org/mydoctor). You can check your test results, refill prescriptions, e-mail me, schedule routine appointments, and view preventive service reminders and past visit information. You can also find valuable health information and links to classes, videos, podcasts and other online health tools. If you also coordinate care for your children, parents, spouse or partner, sign up for Act for a Family Member at [kp.org/actforfamily](http://kp.org/actforfamily).

**Visit Summary****Vital Signs - Last Recorded**

Blood Pressure	Pulse	Temperature(Src)	Height	Weight	Oxygen
122/85	110	96.6 °F (35.9 °C) (Tympanic)	5' 5"	160 lb (72.576 kg)	97%

Body Mass Index  
26.63

**Exercise Minutes Per Week**

0

As your doctor, I advise you to increase your level of physical activity until you are getting at least 150 minutes a week, or 30 minutes 5 days a week. Every minute counts to help you feel better as well as significantly reduce your risk for heart disease, stroke, diabetes, falls and certain cancers. Consider taking a few stairs, walking for 5-10 minutes and parking farther away or chair exercises. A healthy weight target is a Body Mass Index (BMI) of less than 25 (except for pregnant women). If you want to include healthier eating, start by adding more fruits and vegetables to your diet, eating smaller portions or drinking fewer sodas and sweetened beverages. To get

**Visit Summary (continued)**

support for fitness, weight, stress, or quitting tobacco, call 1-866-251-4514 to schedule a telephone appointment with a personal wellness coach.

**Tobacco Use (More Information at [kp.org/quitsmoking](http://kp.org/quitsmoking))**

Smoking Status                      Amount  
**Former Smoker (Quit Date: 0 packs/day for 0 years  
1/1/1989)**

Smokeless Tobacco Status  
**Unknown**

**Allergies**

**Allergies as of 10/24/2011**

**Date Reviewed: 10/3/2011**

	Noted	Type	Reactions
<b>No Known Allergies</b>			

**Medication Ordered This Visit****Prescriptions**

<b>HYDROMorphone (DILAUDID) 2 mg/mL Inj Soln</b>	<b>INJECT 4 MG INTRAMUSCULARLY FOR 1 DOSE NOW</b>
<b>Promethazine (PHENERGAN) 25 mg/mL Inj Soln</b>	<b>INJECT 25MG INTRAMUSCULARLY AS DIRECTED--FOR BACK OFFICE</b>

**Pharmacy Information****PHARMACY PICK UP**

To start your medication order, please go to any Kaiser Permanente Pharmacy "check-in" line. When your medication is ready for pick-up, your name will appear on the lighted display board. Most prescriptions are ready within 15 minutes after you check in.

Have your refills mailed to you and get free shipping. Go to [kp.org/rxrefill](http://kp.org/rxrefill), or call (888) 218-6245. Also use the [kp.org](http://kp.org) My Health Manager - Pharmacy Center to check the status of a refill, set up email refill reminders and review your list of medications.

**Pharmacy**

Pharmacy Name  
**STK PHARMACY 1 1ST FL**

**Pharmacy Address and Hours**

Address	Hours
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**Pharmacy Information (continued)****Pharmacy Address and Hours (continued)**

Address	Hours
7373 West Lane	0800-2200
STOCKTON CA 95210	

**Orders****Orders Placed During This Visit**

Normal	Class	
<b>INTRAMUSCULAR INJECTION</b>	Back Office	
<b>INTRAMUSCULAR INJECTION</b>	Back Office	
Future	Class	Expires
<b>HYDROMORPHONE HYDROCHLORIDE 2 MG PER ML</b>	Back Office	11/24/11
<b>INJ</b>		
<b>PROMETHAZINE HYDROCHLORIDE 25 MG INJ</b>	Back Office	11/24/11

**Preventive Services**

Please see your visit registration slip or View Your Preventive Services on your doctor's home page <http://kp.org/mydoctor> to see if you are due for screening tests or immunizations.

**Reason For Today's Visit**

MIGRAINE - Primary

**Future Appointments**

Date	Time	Visit Type	Department	Provider	Length
None.					

**KAISER PERMANENTE.**

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.

**CHECK-IN RECEIPT**

MRN: 110007897964

Name: ANDERSON, TIFFANY K

Visit Coverage: KFHP 1000

Appt Date/Time: 10/24/11 11:10 AM

Appt With: JASTI, HYMAVATHY (M.D.)

Check-In Date/Time: 10/24/11 10:58 AM

Dept: STKMED

Amount Due: \$ 15.00

Amount Paid: \$ 15.00

Source: Cash

Ref:

Receipt: 8706049

Encounter: 32013667806

Acct: 32070238

Visit your doctor's home page at [kp.org/mydoctor](http://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 (N.P.)

PREVENTIVE	SERVICES	LAST	DUE
DUE	ADULT TDAP		8/22/81
DUE	MAMMOGRAPHY		8/22/10
DUE	CERVICAL SCREEN	9/26/01	9/26/11
DUE	INFLUENZA VACCINE		10/01/11
Current	CHOLESTEROL SCREEN	10/17/11	10/17/15
Current	PNEUMO VACCINE		8/22/35
Current	COLON CANCER SCREENING		

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.