約診提醒
Appointment Reminder

您的約診：Your Appointment:

病人名字 - Patient name _____________________________________________

您的下一次約診是在 - Your next appointment is on:

月 - Month _______________ 日 - Day ____________ 時間- Time ____________

地點/大樓 - Location / Building _______________________________________

地址 - Address _______________________________________________________

診所/醫生 - Clinic / Doctor _____________________________________________

電話 - Telephone _____________________________________________________

請於約診前 ____ 分鐘登記。
Please check in ____ minutes before your appointment.

如您不能按時赴診，請打電話 ________________________________。
If you are not able to keep this appointment, please call.

我們提供免費口譯服務。
Language Interpretation is provided at no cost to you.

赴診時請攜帶：Please bring with you:

☐ 本約診單 - This appointment sheet

☐ 醫療保險卡或財政資助表 - Health insurance card or financial assistance form

☐ 您的保險計劃所需要的共同付款 - Co-pay if needed by your insurance plan

☐ 您服用的藥物、維生素類和草藥列單 - A list of the medicines, vitamins and herbs you take

☐ 攜帶以下副本 - Copies of:

☐ X 光片 - X-rays

☐ 化驗結果 - Lab tests

☐ 病歷 - Medical records

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