



KAISER PERMANENTE®

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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.

11244330 DEFARIA OLGA A
APPT TIME : 02:30 PM FAC/DEPT: STR/PSY
APPT WITH : D. ALMESTE LCSW
REG DATE : 10/10/02 02:12 PM STRNFB

PURCHASER : 000082297/0000
EXCEPTION :
REG FEE : \$5.00
AMT PAID : \$5.00

ADVANCE DIRECTIVE : PLEASE REVIEW
MED/FED PHY: TRANAP STR OTHER PCP:
*** NO APPOINTMENTS FOUND *** LAST DUE
PREVENTIVE SERVICES PAP TEST
Review PAP TEST
Current BREAST EXAM
Current TETANUS
Current PNEUMO VACCINE
Current CHOLESTEROL SCREEN
Current INFLUENZA VACCINE
Current MAMMOGRAPHY

2/09/02
2/09/02
NA
NA
NA



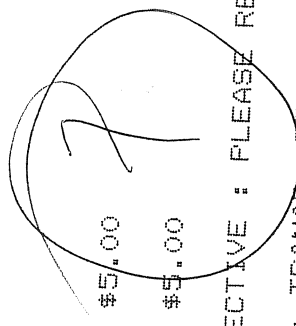
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11244330 DEFARIA OLGA A
APPT TIME : 08:45 AM FAC/DEPT: STR/MED
APPT WITH : P A TRAN M.D.
REG DATE : 10/03/02 08:18 AM STRLOS

PURCHASER : 000082297/0000
EXCEPTION :
REG FEE : \$5.00
AMT PAID : \$5.00

ADVANCE DIRECTIVE : PLEASE REVIEW
MED/FED PHY: TRANAP STR OTHER PCP:



10/03/02 08:45A TRANAP 1 MED STR CAN MOV
PREVENTIVE SERVICES LAST DUE
Review PAP TEST
Review BREAST EXAM
Current TETANUS
Current PNEUMO VACCINE
Current CHOLESTEROL SCREEN
Current INFLUENZA VACCINE
Current MAMMOGRAPHY

2/09/02
2/09/02
NA
NA
NA

Return appointment: _____ days _____ weeks _____ months

Return appointment: _____ days _____ weeks _____ months

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1244330 DEFARIA DLGA A

APPT TIME : 11:00 AM FAC/DEPT: STR/PSY
APPT WITH : ADULT CRISIS GROUP
REG DATE : 10/11/02 11:37 AM STRLIM

PURCHASER : 000082297/0000

EXCEPTION :

REG FEE : \$5.00

AMT PAID : \$5.00

ADVANCE DIRECTIVE : PLEASE REVIEW

MED/PED PHY: TRANAP STR OTHER PCP:

*** NO APPOINTMENTS FOUND ***

PREVENTIVE SERVICES

Review PAP TEST

Review BREAST EXAM

Current TETANUS

Current PNEUMO VACCINE

Current CHOLESTEROL SCREEN

Current INFLUENZA VACCINE

Current MAMMOGRAPHY

LAST

DUE

2/09/21

2/09/36

NA

NA

NA

Return appointment: _____ days _____ weeks _____ months

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11244330 DEFARIA DLGA A

APPT TIME : 09:00 AM FAC/DEPT: STR/PSY
APPT WITH : PSY-INTENSIVE OUTPAT PROG ADULT
REG DATE : 10/14/02 10:16 AM STRNPS

PURCHASER : 000082297/0000

EXCEPTION :

ADVANCE DIRECTIVE : PLEASE REVIEW

MED/PED PHY: TRANAP STR OTHER PCP:

*** NO APPOINTMENTS FOUND ***

PREVENTIVE SERVICES

Review PAP TEST

Review BREAST EXAM

Current TETANUS VACCINE

Current PNEUMO VACCINE

Current CHOLESTEROL SCREEN

Current INFLUENZA VACCINE

Current MAMMOGRAPHY

LAST

DUE

2/09/21

2/09/36

NA

NA

NA

Return appointment: _____ days _____ weeks _____ months



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11244330 DEFARIA DLGA A

APPT TIME : FAC/DEPT: STR/PSY
APPT WITH : PSY-INTENSIVE OUTPT PROG ADULT
REG DATE : 10/17/02 09:09 AM STRNFB

PURCHASER : 000082297/0000

EXCEPTION :

ADVANCE DIRECTIVE : PLEASE REVIEW

1 MED/PED PHY: TRANAP STR OTHER FCP: LAST DUE
*** NO APPOINTMENTS FOUND ***
PREVENTIVE SERVICES
Review PAP TEST
Review BREAST EXAM
Current TETANUS VACCINE 2/09/21
Current PNEUMO VACCINE 2/09/36
Current CHOLESTEROL SCREEN NA
Current INFLUENZA VACCINE NA
Current MAMMOGRAPHY NA

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11244330 DEFARIA DLGA A

APPT TIME : 09:00 AM FAC/DEPT: STR/PSY
APPT WITH : PSY-INTENSIVE OUTPT PROG ADULT
REG DATE : 10/15/02 09:20 AM STRYMB

PURCHASER : 000082297/0000

EXCEPTION :

ADVANCE DIRECTIVE : PLEASE REVIEW

1 MED/PED PHY: TRANAP STR OTHER FCP: LAST DUE
*** NO APPOINTMENTS FOUND ***
PREVENTIVE SERVICES
Review PAP TEST
Review BREAST EXAM
Current TETANUS VACCINE 2/09/21
Current PNEUMO VACCINE 2/09/36
Current CHOLESTEROL SCREEN NA
Current INFLUENZA VACCINE NA
Current MAMMOGRAPHY NA

Return appointment: _____ days _____ weeks _____ months

Return appointment: _____ days _____ weeks _____ months



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11244930

DEFARIA DLGA A

APPT TIME : 09:00 AM FAC/DEPT: STR/PSY
APPT WITH : PSY-INTENSIVE OUTPT PROG ADULT
RES DATE : 10/16/02 07:17 AM STRJAL

PURCHASER : 000052297/0000

EXCEPTION :

ADVANCE DIRECTIVE : PLEASE REVIEW

| | | | | | |
|------------|--------------------|--------------|-------|------------|---------|
| MED/PSY | PHYSICIAN | TRAMAR | STR | OTHER PCP: | |
| *** | NO | APPOINTMENTS | FOUND | *** | LAST |
| PREVENTIVE | SERVICES | | | | DUE |
| Review | PAP TEST | | | | |
| Review | BREAST EXAM | | | | |
| Current | TETANUS | | | | 2/09/31 |
| Current | PNEUMO VACCINE | | | | 2/09/32 |
| Current | CHOLESTEROL SCREEN | | | | NA |
| Current | INFLUENZA VACCINE | | | | NA |
| Current | MAMMOGRAPHY | | | | NA |

Return appointment: _____ days _____ weeks _____ months