

진료 예약

Appointment Reminder

예약 내용: Your Appointment:

환자명 - Patient name _____

귀하의 다음 약속은 입니다 - Your next appointment is on:

월 - Month _____ 일 - Day _____ 시간 - Time _____

위치 / 빌딩 - Location / Building _____

주소 - Address _____

클리닉 / 박사 - Clinic / Doctor _____

전화 - Telephone _____

예약 시간 ____ 분 전에 확인하십시오.

Please check in ____ minutes before your appointment.

만약 이 예약을 지킬 수 없는 경우, _____.

If you are not able to keep this appointment, please call.

언어 통역은 무료로 제공됩니다.

Language Interpretation is provided at no cost to you.

지참물: Please bring with you:

- 예약 용지 - This appointment sheet
- 건강 보험 카드 또는 재정 지원 양식 - Health insurance card or financial assistance form
- 보험 플랜에서 요구하는 경우 본인 부담금 - Co-pay if needed by your insurance plan
- 복용하는 의약품, 비타민 및 허브 목록 - A list of the medicines, vitamins and herbs you take
- 사본 - Copies of:
 - X-레이 - X-rays
 - 실험실 검사 - Lab tests
 - 의료 기록 - Medical records

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Appointment Reminder. Korean.