

Xusuusinta Ballanta

Appointment Reminder

Dokumentiga hoos ku tixan la Imow ballanta:

Please bring these to your appointment

- Xaashidaan ballanta
This appointment sheet
- Kaarka caymiska caafimaadka ama foomka kaalmada maaliyadeed
Health insurance card or financial assistance form
- Wax ka bixiyaha qorshahaaga caymiska haddii loo baahdo
Co-pay if needed by your insurance plan
- Taxanaha daawooyinka, fitamiinnada iyo daawo dhireedka aad qaadato
A list of the medicines, vitamins and herbs you take

Ballantaada:

Your Appointment

Magaca Bukaanka _____
Patient Name

Baaritaankaaga _____ wuxuu dhacayaa
Your _____ Ama Qalliinku/ Test or Surgery is on

Isniin Talaado Arbaco Khamiis Jimce Sabti Axad
Monday Tuesday Wednesday Thursday Friday Saturday Sunday

_____, 20 _____ markay tahay/at _____
Bisha Maalinta Sanadka Waqtiga
Month Day Year Time

Goobta/Dhismaha - Location/Building _____

Cinwaan - Address _____

Shaybaarka/Takhtarka _____ Telefoon _____
Clinic/Doctor _____ Telephone _____

Fadlan imow miiska is diiwaan gelinta _____ oo daqiiqo ballanta ka hor.

Please check in at the registration desk _____ minutes before your appointment.

Haddii aadan awoodin inaad ballanta ku timaaddo, fadlan soo wac _____

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

Appointment reminder. Somali.