

# Formulario de Examen Preventivos | 2023



Los exámenes preventivos deben completarse entre el 1 de Enero de 2023 y el 31 de Diciembre de 2023 y deben realizarse a más tardar el 31 de Diciembre de 2023 para que se aprueben para un incentivo de bienestar.

## Primera parte: PARA SER COMPLETADO ANTES DE SU CITA

Nombre: \_\_\_\_\_ Fecha de examen: \_\_\_\_\_

Dirección postal: \_\_\_\_\_ Fecha de nacimiento: \_\_\_\_\_

Género:  Hombre  Mujer

## Part Two: TO BE COMPLETED DURING APPOINTMENT WITH PHYSICIAN

The above mentioned patient was seen and has completed the following preventative exam(s) during the date of the exam listed above:

- Annual Physical
- Dental Checkup
- Vision Exam
- Colorectal Cancer Screening
- Well Woman Exam
- Mammogram
- Prostate Screening (PSA)
- Skin Cancer Screening (must be a full body scan done by a dermatologist)
- Flu Shot
- COVID-19 Vaccine

The patient received relevant information and recommendations concerning their personal health. Please have the office fax this form to the address below.

\_\_\_\_\_  
Name of physician (*please print*)

\_\_\_\_\_  
Physician's Signature

\_\_\_\_\_  
Date

Physician Address: \_\_\_\_\_

Physician Phone Number: \_\_\_\_\_

Tax I.D. Number: \_\_\_\_\_

**Please mail or fax this form once it has been completed to:**

Southeast Iowa Regional Medical Center  
Occupational Health, Corporate Wellness  
Attention: Tara Eaton  
1401 West Agency Rd  
West Burlington, IA 52655  
FAX: (319) 768-4223