Name	Name	Name	Name
Address	Address	Address	Address
	_		
Phone	Phone	Phone	Phone
Name	Name	Name	Name
Address	Address	Address	Address
Phone	Phone	Phone	Phone
Name	Nama	Nama	Nama
Name			
Address			
Phone	Phone	Phone	Phone
Name	Name	Name	Name
Address			
	_		
Phone	Phone	Phone	Phone
Name	Name	Name	Name
Address	Address	Address	Address

Phone

Phone

Phone





Your Health Care Record Keeper



Agency for Healthcare Research and Quality Centers for Disease Control and Prevention U.S. Department of Health and Human Services



14-450R

Instructions

You may use this record keeper to help prepare for your MEPS interviews. Each time you or a family member receives health care, record the following information:

- household member's name
- date of the visit or phone call
- name of health care provider
- reason for the visit or phone call
- charge and payment information
- any medications prescribed

On the back of the record keeper there is space to record your health care providers' contact information.

Name	Name	Name	Name	Name
Date of Visit				
Provider Name				
Reason for Visit				
Total Charge				
Payment by Family				
Payment by Other			Payment by Other	Payment by Other
Prescriptions	Prescriptions	Prescriptions	Prescriptions	Prescriptions
Name	Name	Name	Name	Name
Date of Visit			Date of Visit	Date of Visit
Provider Name				
Reason for Visit				
Total Charge				Total Charge
Payment by Family				
Payment by Other				
Prescriptions	Prescriptions	Prescriptions	Prescriptions	Prescriptions
Name	Name	Name	Name	Name
Date of Visit				
Provider Name				
Reason for Visit				
Total Charge			Total Charge	Total Charge
Payment by Family				
Payment by Other				
Prescriptions	Prescriptions	Prescriptions	Prescriptions	Prescriptions
Name	Name	Name	Name	Name
Date of Visit				
Provider Name	B 11 N	D. LL M.		
Reason for Visit				
Total Charge				
Payment by Family				
Payment by Other				
Prescriptions	Prescriptions	Prescriptions	Prescriptions	Prescriptions