

Baadhitaanada Cunugga iyo Dhallinyarada Da'da 0-14 bilood

Waxaad heli kartaa \$75 kaarka hadiyadda ah haddii:

- Ilmahaagu waa xubin ka tirsan Hennepin Health waqtiga booqashada / kormeerka cunugiisa / ilmaheeda; Iyo
- Ilmahaagu wuxuu aadayaa dhakhtarka lix booqasho oo kormeer cunug ah ka hor intaanay iyada/ isagu gaarin 15 bilood da'da 0-1, 2, 4, 6, 9 iyo 12 bilood.

Raac tilmaamahan si aad u hesho kaarkaaga hadiyadda:

1. Buuxi qaybta waalidka / wakiilka ee foomka hoose oo weydii bixiyahaaga daryeelka caafimaadka inuu buuxiyo qaybta adeeg bixiyaha.
2. Ku soo celi foomka oo dhameystiran Hennepin Health 90 maalmood gudahood booqashadaada lixaad ee ilmahaaga.
3. Waxaad heli dontaa kaarkaada hadiyada 4-6 toddobaad gudahood

Fiiro gaar ah: Kama badali karno kaararka hadiyadaha lumay ama la xaday.

Haddii aadan sameyn xulashada kaarka hadiyadda, mid waan kuu sameyn doonnaa.

- Calaamee sanduuqan haddii aad jeceshahay inaad kaarkaaga hadiyadda ah ka qaadatid xarunteena adeegga socodka. Waan ku soo wici doonnaa markay diyaar noqoto.

Su'aalo?

Wac Adeegyada katirsan Hennepin Health

Gudaha: 612-596-1036

TTY: 1-800-627-3529

Booqo *Healthwise Knowledgebase*® si aad wax badan uga barato muhiimadda ay leedahay baaritaanka ilmaha iyo dhallinta iyo ilaha dheeriga ah: www.healthwise.net/hennepin

*Ku buuxi
foomkan adeeg
bixiyahaaga*



| Waxaa buuxinaya xubinta | | | | | |
|---|--------------------|--|---|--|---------------|
| Magaca ilmaha ama ilmaha magaciisa | | Magaca Dhexe ee hore | | Magaca dambe | |
| Taariikhada dhalashada | | Lambarka Aqoonsiga ee Hennepin Health | | Lambarka telefoonka | |
| Cinwaanka wadada | | | | Guryaha # | |
| Magaalada | Gobolka | Lambarka boostada | Doorashada kaarka hadiyadda <input type="checkbox"/> Target <input type="checkbox"/> Walmart | | |
| Waalidka/mas'uulka magaciisa hore | | Magaca Dhexe ee hore | | Magaca dambe | |
| To be completed by health care provider | | | | | |
| 1 | 0-1 month checkup | | 4 | 6 month checkup | |
| | Provider signature | Date of visit | | Provider Signature | Date of visit |
| 2 | 2 month checkup | | 5 | 9 month checkup | |
| | Provider signature | Date of visit | | Provider signature | Date of visit |
| 3 | 4 month checkup | | 6 | 12 month checkup | |
| | Provider signature | Date of visit | | Provider signature | Date of visit |
| Clinic name/clinic stamp | | Hennepin Health use only Approved by: | | Is the child up-to-date on blood lead testing? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Barnaamijkan abaalmarinta wuu is beddeli karaa ogeysiis la'aan. Wac Adeegyada Xubnaha si aad u hesho macluumaadka ugu dambeeyay.

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HALKAAN

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DHS approved 2/7/2020
HC-1062-MC SOM

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612-596-1036

hennepinhealth@hennepin.us

Atencion. Si desea recibir asistencia gratuita para interpretar este documento, llame al numero indicado arriba.
Dignin. Haddii aad u baahantahay caawimaad lacag-la' aan ah ee tarjumaadda qoraalkan, lambarka kore wac.
Attention. If you need free help interpreting this document, call the above number.

Hennepin Health 612-596-1036
Monday-Friday, 8 a.m.-4:30 p.m.

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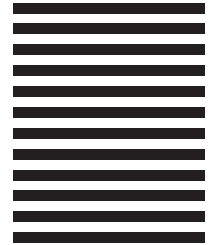
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**Hubinta Cunugga iyo
Dhalinta (0 illaa 14 bilood)
foojarka – \$75 kaar hadiyad ah**

