

Clinic Correspondence – Treatment Summary

Date: 2025-08-09

Provider: Dr. Kim, DDS

Patient: Daniel Walker

DOB: 11/23/1982

SSN: 222-32-2022

MRN: MRN-445566

Subscriber/Member ID: PLN-4433

Phone: (312)555-2211

Email: jane.smith[at]example[dot]com

Address: 822 Market Rd, Springfield, IL 62704

Date of Service: 04/05/2025

This letter summarizes the dental procedures performed. CDT D2740 was completed.

Please see the remarks below.

Please reach us at jane.smith[at]example[dot]com for follow-up.