

DOCTOR'S VISIT WORKSHEET

Write down your loved one's answers to the questions below.
Then, use the answers to talk to a doctor about any concerns.

Doctor Name: Date of Visit:

What is your main concern right now?

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Do you have any new symptoms, such as pain?

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What changes have you noticed since your last visit?

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If medication is taken for pain or any other symptom, how is it working?

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Have new medications been introduced? What are they? Do you have any side effects?

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Have other doctors been seen before this visit? Have diagnostic tests or other treatments been prescribed in the past?

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Use this page to write down what your loved one and the doctor discussed.

Test(s) ordered

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Test(s) results

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Recommendations

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New Prescriptions and Instructions

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Dietary Restrictions

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Next Steps

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Other Notes

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