PLANNING FOR A DOCTOR'S VISIT

DATE:	TIME:	PROVIDER:

Update to share with the medical provider:

1. Current Medications: (name, dose, times given)

2. Current diet/any concerns:

3. Has the child had any recent illnesses or changes in their medical status?

4. Are there any questions or concerns you have today?

PLANNING FOR A DOCTOR'S VISIT

DATE:	TIME:	PROVIDER:

Information/recommendations from this appointment:

1. Changes in mediactions:

2. Changesin diet:

3. Important information shared:

4. Follow-up needs (what is to be done, when and by whom)

5. When is the next appointment scheduled?