SPECIALIST APPOINTMENT CARE COMPANION

Prepare your priorities before the visit and capture what you learn.

Specialist: _____ **Date:** _____

MY GOAL FOR THIS APPOINTMENT

CONCERN #1

DESCRIBE THE CONCERN / WHAT ARE YOU FEELING?

HOW LONG HAS THIS BEEN HAPPENING?

WHAT MAKES IT BETTER OR WORSE?

SEVERITY SCALE - CIRCLE ONE

At its worst: 1 2 3 4 5 6 7 8 9 10

Right now: 1 2 3 4 5 6 7 8 9 10

SPECIALIST APPOINTMENT CARE COMPANION

Use your own words. Details about timing, triggers, and intensity can be helpful.

CONCERN #2

DESCRIBE THE CONCERN / WHAT ARE YOU FEELING?

HOW LONG HAS THIS BEEN HAPPENING?

WHAT MAKES IT BETTER OR WORSE?

SEVERITY SCALE - CIRCLE ONE

At its worst: 1 2 3 4 5 6 7 8 9 10

Right now: 1 2 3 4 5 6 7 8 9 10

OTHER DETAILS I WANT THE SPECIALIST TO KNOW

SPECIALIST APPOINTMENT CARE COMPANION

Capture the details you do not want to forget during the appointment.

CONCERN #3

DESCRIBE THE CONCERN / WHAT ARE YOU FEELING?

HOW LONG HAS THIS BEEN HAPPENING?

WHAT MAKES IT BETTER OR WORSE?

SEVERITY SCALE - CIRCLE ONE

At its worst: 1 2 3 4 5 6 7 8 9 10

Right now: 1 2 3 4 5 6 7 8 9 10

OTHER DETAILS I WANT THE SPECIALIST TO KNOW

SPECIALIST APPOINTMENT CARE COMPANION

Questions for the specialist - and room to write down the answers.

1. WHAT IS MY "WORKING" DIAGNOSIS?

NOTES / ANSWER

2. WHAT ELSE COULD THIS BE?

NOTES / ANSWER

3. MY PATIENT-SPECIFIC QUESTION

QUESTION + NOTES / ANSWER

SPECIALIST APPOINTMENT CARE COMPANION

Before you leave, write down what happens next.

NEXT STEPS / TREATMENT PLAN

TESTS, LABS, IMAGING, OR REFERRALS

MEDICATION CHANGES OR INSTRUCTIONS

FOLLOW-UP: WHEN, WITH WHOM, AND WHY

CLEARPATH TIP

Complete the first three pages before your visit when possible. During the appointment, use the remaining pages to record answers and next steps. Your "working" diagnosis is a starting point and may change as your healthcare professional gathers more information.