Do I need to do bloodwork or get a test I'm nervous about? Here are some tips that might help!

- It's OK to tell people that I am nervous or afraid.
- · Ask the doctor or nurse to show me and explain what will happen before it happens.
- · Bring something that helps me feel more comfortable.
 - . Do I like listening to music?
 - Do I want to hold a ball or something squishy in my hand?
- · Bring someone with me!
 - Hold their hand if I need to!
- Close my eyes.
- Turn my head, then look away at the wall.
- Count to 20.
- I can also ask any questions that I have!
- · Be very proud of myself. I have been so strong and brave!



Today's Health Care Visit









Today's Health Care Visit

My Name: ______
Today's Date: _____

Current list of my medications, pills and vitamins (attach it for the doctor)

I have a plan or drug card that pays for my medicine? Yes No

Why am I at the doctor's today?

Things like illness, changes happening with family, staff or friends; need forms filled out; would like a check-up, need more medication etc....)

Did I recently go see any other doctors or dentist? Yes No





Things I don't like:

Medications changes

Were there changes to my medication? YES or NO				
If Yes:				
1.	Medication Name:			
	I am to take this times per day.			
	I am to stay on this for days			
	Reason Given:			
2.	Medication Name:			
	I am to take this times per day.			
	I am to stay on this for days			
	Reason Given:			

Do I need any help getting or paying for my medication?

Other information for me or my caregivers:

Would I like a follow up phone call?

Yes

No

Understanding Today's Visit: My name: **Doctor or Nurse's name:** Date: Why did I see the Doctor today? What did the Doctor or Nurse do?

Appointments & Follow-Up

Do I have any new appointments?				
YES	or NO			
If Yes,				
Doctor's Name:				
Where:				
Reason:				
Date:				

any parts blank		
My biggest fear or wo	orry about	coming for health care is:
Some ways you can h	elp me to k	petter understand
	nt things:	Talk to my caregiver too:
Use Pictures: Write Other:	it down:	Speak directly to me:
Have any of these b		ring me in the last week:

Have any of these been bothering me in the last week:		
Not sleeping well?		
Not hungry?		
Bath/washroom difficulties?		
Emotional issues?		
Feeling tired, no energy?		
Mouth or teeth?		
Sexual health?		
Anything else?		



