

Appointment overview

Start here! A one-page summary of what matters most. You can bring the rest of this workbook if more detail is needed.

NAME / PREFERRED NAME

APPOINTMENT DATE + CLINICIAN

MY MAIN CONCERN / REASON FOR THIS APPOINTMENT

TOP 3 PRIORITIES (MOST IMPORTANT FIRST)

HOW THIS IS AFFECTING MY DAILY LIFE

WHAT I AM HOPING TO GET OUT OF TODAY

Tip: Mention the most important concern early, in case time runs short.

Symptoms & daily impact

Describe what has changed, how often it happens, and what it actually means for your everyday life.

SYMPTOM / ISSUE + WHEN IT STARTED

FREQUENCY, DURATION, PATTERNS + POSSIBLE TRIGGERS

WHAT HELPS, WHAT MAKES IT WORSE + WHAT I HAVE TRIED

ON A BETTER DAY, THIS LOOKS LIKE...

ON A WORSE DAY, THIS LOOKS LIKE...

Helpful examples: walking, lifting, eating, sleep, work, personal care or recovery time.

Relevant medical history

Only include what is relevant to this appointment. Keep a fuller medical summary separately if useful.

DIAGNOSES + RELEVANT PAST HISTORY

SURGERIES, ADMISSIONS OR IMPORTANT COMPLICATIONS

KEY SPECIALISTS, TESTS, RESULTS OR CLINIC LETTERS

ALLERGIES, SENSITIVITIES + PREVIOUS REACTIONS

Include any baseline symptoms or conditions that could affect treatment decisions.

Medications & access needs

Bring an up-to-date medication list. Check any changes and safety questions with your clinical team.

CURRENT MEDICATIONS / SUPPLEMENTS

Name / strength	Dose + timing	Notes / prescriber

TREATMENTS TRIED + ANY SIDE EFFECTS

ACCESSIBILITY / COMMUNICATION / EXAMINATION ADJUSTMENTS

Examples: sensory triggers, seating, mobility, positioning, breaks or an advocate.

Questions to ask

Pick the questions that matter to you. There is no need to use every prompt.

- ☐ What could explain these symptoms?
- ☐ Which tests or investigations would help, and why?
- ☐ What are the treatment options, benefits and risks?
- ☐ How might my existing conditions or medications affect the plan?
- ☐ What happens if the results are normal but symptoms continue?
- ☐ When should I seek more urgent medical advice?

MY OWN QUESTIONS (IN PRIORITY ORDER)

It is okay to ask for explanations in plain language or for written information.

During the appointment

Use this page for key answers and agreed decisions. An advocate can help take notes if you prefer.

ASSESSMENT / EXPLANATIONS DISCUSSED

TESTS, REFERRALS OR TREATMENT OPTIONS AGREED

MEDICATION CHANGES OR SAFETY INFORMATION

THINGS I WANT CLARIFIED BEFORE I LEAVE

Before leaving: who is doing what, when, and how will I hear back?

Afterwards & next steps

Keep this with your appointment notes so important actions, referrals and results do not get lost.

FOLLOW-UP TRACKER

ACTION / RESULT / REFERRAL	WHO	WHEN	DONE

RESULTS I AM WAITING FOR / WHEN TO CHASE

RECOVERY, SUPPORT OR ADJUSTMENTS I MAY NEED

Keep a copy of letters and check that follow-up plans match what was agreed.