

MEDICAL CONSULTATION

DATE:

PROFESSIONAL:

REASON(S) FOR CONSULTATION:

WHO'S ACCOMPANYING ME?:

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THE QUESTION: (THE ONE YOU WOULD ASK IF YOU COULD ONLY ASK ONE)

PLAN: (WHAT'S NEXT?)

PROFESSIONAL RECOMMENDATIONS, TESTS, REFERRALS, NEW TREATMENTS, THINGS TO LOOK UP.

OTHER QUESTIONS OR CONCERNS:

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NEXT APPOINTMENT: