## **My Doctor Visit Checklist**

- ✓ I said my name
- ✓ I got weighed and measured
- ✓ I answered a question from the doctor
- ✓ I stayed calm and took deep breaths
- ✓ I was BRAVE!

## **Bravery Badge!**

	This award goes to:	
	For being so brave at the doctor!	
Date:	Signature:	-

## **Patient Chart**

Patient Name:		
Age:	Visit Reason:	
Temperature:   Hea	art Rate:	
Notes from the Doctor:		

## **Doctor Tool Labels**

Stethoscope	
Thermometer	
Bandage	
Reflex Hammer	
Syringe (Toy)	
Clipboard	
Gloves	
Mask	