

Questions for your Doctor

FIGURING OUT WHAT'S WRONG

Doctor _____ Date _____

Doctor's diagnosis _____

What might be causing my health problem(s)? _____

Are my symptoms a sign of a more serious condition? _____

What tests do I need? _____

Do I need to see a specialist? Which one? _____

YOUR MEDICAL CONDITION

How long will this condition last? _____

Will it come back? _____

How will this condition affect my life? _____

What can I do to prevent it from coming back? _____

YOUR OTHER QUESTIONS

1. _____

2. _____

3. _____

FOLLOW-UP WITH YOUR DOCTOR

I need a follow-up if: _____

Next appointment _____ **Time** _____

Choosing the best treatment

TREATMENT OPTION 1

Treatment option _____

RISKS	SIDE EFFECTS	BENEFITS

TREATMENT OPTION 2

Treatment option _____

RISKS	SIDE EFFECTS	BENEFITS

TREATMENT OPTION 3

Treatment option _____

RISKS	SIDE EFFECTS	BENEFITS

TREATMENT OPTION CHOICE

Your doctor's recommendation _____

Your choice _____

Why? _____

Use these forms to write down information when you're at the doctor's office about what the doctor says. Ask your doctor about the risks, benefits and side effects – both long and short term – for each treatment option. Review each option with your physician and family to help you choose the best treatment for you.