

What to Ask Your Doctor

Please print & bring with you

General Questions

1. What is the medical name for my problem?

2. What causes this problem?

3. Will this problem disappear altogether, lessen, or recur?

Disappear altogether Lessen Recur

4. What should I do to prevent this problem from recurring?

Treatment

1. Do I need any medication, and if so, what?

2. How will the medication help me?

3. How frequently should I take the medication?

4. Does this medication have any side effects that I must watch out for?

Yes No

5. In case of side effects, when should I inform you?

6. Are there any foods, drugs or exercises that I should avoid while on this medication?

Yes No

Diagnostic Tests

1. Will lab or other diagnostic tests be required in future?

Yes No

If so, please name them.

2. Why are these tests required?

3. Will someone inform me about the test results or do I need to call your office?

Yes No Call office

4. When will I get the results?

Tomorrow This week Next week Exact Date

Follow Up

1. Do I need to see another specialist?

Yes No

Type of specialist: _____

2. When is my next return visit?

Date ____/____/____

3. Do I need to inform you of my progress, and if so, when?

Yes

No

Date

4. How do I reach you in case of an emergency during daytime and after office hours?

Daytime:

After Hours:
