

Dear Patient,

In an effort to improve care please take a moment to fill out the questions below:



What concerns would you like Dr. XX to focus on today?

1. _____
2. _____
3. _____
4. _____



Please list any prescriptions you may need refilled today:

1. _____
2. _____
3. _____
4. _____



Please list any specialists you have seen and tests you have had since last year:

Thank you,

Dr. XX