PREPARE…
So you know what to bring.

PARTICIPATE…
So your health care provider knows your symptoms and your concerns.

PLAN…
So you know what to do after your appointment.

To learn more about communicating with health care providers, visit the Ask Me 3 website:
www.npsf.org/askme3

My health care provider’s name is:

The clinic name and phone number are:

My next appointment is:

Other helpful information:

Directions
Paper and pen
List of questions
Photo ID
Insurance card
Prescription list
Money

Understanding my plan of care is important so I can begin to feel better.
~ Don H.

Making the Most of Your Clinic Visit

Tips for patients from patients

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### Prepare

Before your appointment, review your appointment slip.

- Check the date and time.
- What time do you need to arrive?
- Do you know where to go?

Be ready to bring these things with you:

- Your filled out health history form
- Insurance card or coupon
- Insurance co-pay, if needed
- Photo ID
- List of the medicines you currently take (or bring the medicine bottles) – be sure to include vitamins and herbal supplements
- Copies of your medical records, if you have them
- X-ray films or CD, if you have them
- Money for parking, bus, or other forms of transportation

### Participate

- What is my main health problem?
- What are my symptoms?
- What are my questions for my health care team?

- Your provider may ask you questions about your past medical problems to get a full picture of your health history.
- It is OK for you to ask questions if you do not understand what is being said. For patients who do not speak English, please let us know in advance so we can have an interpreter available for you.

**UWMC is a teaching hospital where professional teams work together with their patients.** ~ Joanne D.

- Some providers work with students and resident doctors, so more than one person may come into the exam room. They should introduce themselves to you. If they do not, ask their names.

### Plan

- What is my diagnosis? (Say this back to your provider to make sure you got it right.)
- What test(s) am I having?
- What medicine(s) do I need to take?
- What else do I need to do? Why is it important for me to do this?
- Who do I call if I have questions?

Name: ________________________
Phone: ________________________

**Once I go home, I watch to see if the medicine or treatment is working.** ~ Norma C.