WORKSHEET 5C
APPOINTMENT DETAILS

Use this sheet to plan the details of an appointment in advance.

Date: ________________________________________

Time: ________________________________________

Location: ________________________________________

Provider Name: ________________________________________

Reason:
- [ ] Office Visit
- [ ] Imaging
- [ ] Lab Work
- [ ] Treatment
- [ ] Surgery
- [ ] Other ________________________________________

Transportation:
____________________________________________________________

Lodging:
____________________________________________________________

Questions for the Healthcare Team:
____________________________________________________________
____________________________________________________________
____________________________________________________________

Notes:
____________________________________________________________
____________________________________________________________
____________________________________________________________

Appointment Tote Bag Checklist

Don’t forget to take these items with you, especially on long appointment days.

- [ ] Medical history
- [ ] List of medications
- [ ] Health insurance card
- [ ] List of questions
- [ ] Book, magazine, puzzle book
- [ ] Pen or pencil
- [ ] Music player and headphones
- [ ] Phone charger
- [ ] Blanket and/or extra cardigan
- [ ] Water bottle
- [ ] Snacks
- [ ] Toy, handheld game, or coloring book and crayons

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