



Along with this information, please provide any pertinent test results, immunization records, imaging and X-rays, consultation notes from other providers, pathology reports or any other information that you feel is important to share with your provider

Trig to Go

Questions to Ask My Provider

Diagnosis

What Condition is causing my symptoms? _____

Where can I find out more about my condition? _____

Is it possible that more than one condition could be causing my symptoms? _____

How common is my condition? _____

What is the average recovery time? _____

What is my prognosis? _____

Am I contagious? _____

Tests

What are the tests being performed? _____

How accurate are the results? _____

What information will these results give me? _____

What do I need to do to prepare for these tests? _____

Where can I get copies of my results? _____

How soon must I get these tests? _____

Is this a common test for someone with my symptoms? _____

Medications

Why am I being prescribed this medication? _____

What are the side effects? _____

Are there any side effects that I should watch out for and report right away?

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What are the dosage instructions for this medication? _____

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Medications – continued

Will this medication interfere with any of the other medications or over the counter supplements that I am currently taking? _____

What should I do if I miss a dose of this medication? _____

Procedures

Why do I need this procedure? _____

What are the benefits and risks of this procedure? _____

What is the recovery period? _____

What could happen if I elect not to have this procedure? _____

Are there any other treatments that I can do instead? _____

How do I prepare for this procedure?_(dietary restrictions, stopping medications, etc...)

Will there be any pain associated with this procedure? _____

Who will be performing this procedure? _____

Will I be able to drive home after the procedure or will I need someone to drive me?

General

Am I at risk for any chronic conditions? _____

Are there any screenings that I should be getting? _____

Are there any lifestyle changes that I should be making? _____

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