

Patient Name: \_\_\_\_\_

Hello. I'm excited to get to serve you today. Taking care of my patients is my joy, passion, and calling. My dream is to spend unlimited time with my patients. Unfortunately, the government, insurance companies, and the healthcare system limit *most* office visits to 15 minutes. I want you and I to get a lot done for you today. If we need to, I will setup a follow up visit to take care of the rest. Please, fill out this form to get us started. Thank you!

1) What is the main thing you would like **us to focus on** and get done for you today?

\_\_\_\_\_

2) What are other things you would like us to take care of **if there is time** (write them in order of importance): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Check all that apply:**

- I need some prescriptions refilled
- I need a school or work excuse
- I need a referral to a specialist
- I need some forms filled out today
- I would like to get some help losing weight and staying healthy
- I feel depressed and would like some help
- I would like to get tested for sexually transmitted diseases
- Need some shots

**Please answer the following questions.**

Have you been to urgent care, emergency room or been hospitalized since your last office visit?  
YES / NO. If yes, where: \_\_\_\_\_

Have you seen any specialists since your last office visit? YES / NO. If yes, please list them.

\_\_\_\_\_