BEFORE THE VISIT

Select as applicable and briefly explain in the notes: ☑

- Since your last visit, is there any information you want to share with your provider?
  - ☐ Celebrations ☐ Concerns ☐ Challenges ☐ Other
- Any new changes, observations or updates to share about:
  - ☐ Doctors ☐ Behaviors ☐ Symptoms
  - ☐ Medicines ☐ Treatment ☐ Labs ☐ Imaging ☐ Other
  - ☐ School ☐ Therapies ☐ Socialization
- Plan of Care:
  - ☐ Any updates from other providers/specialist or changes to the plan of care

NOTES:

DURING THE VISIT  Who, How and What?

- Who will participate in the visit- either joining virtually or in person?
  - ☐ Child
  - ☐ Parent, family member, or other caregiver
  - ☐ Home health aide
  - ☐ Others
- How do you want the visit to flow or proceed? What will be discussed:
  - ☐ How comfortable are you helping with the physical exam?
  - ☐ Do you want to demonstrate or share information about any home routines, supplies, or equipment?
  - ☐ Would your child like to share any information during the visit?
- Did you notice anything during the exam that your provider did not notice that you want to share?
  - Describe in the notes:

NOTES:
NEXT STEPS

Before the visit is over, you and your provider can:

▪ Discuss the plan of care. **PAUSE Are you comfortable and confident with the care plan?**
▪ Discuss if you will need or will be provided:
  □ Referrals  □ Prescriptions  □ Orders for supplies, therapies or medical care
▪ **Clarify:** Who is responsible for key parts of care plan, communication and care coordination?
▪ Discuss next appointment: will an in person or virtual visit work best for your child? Consider the follow in this discussion:
  □ Preference for the day and time that works best for your child and family
  □ Discuss the safety and risks of each of the options (face-to-face and virtual)
  □ Share your child's and your family's needs
▪ Any other needs or concerns that were not discussed?

**NOTES:**

List additional **achievements, concerns, or challenges** you want to discuss:

**FOLLOW-UP NOTES:**

This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling $1,000,000 with 0% financed with non-governmental sources. The contents are those of the authors and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.