

Doctor Visit Summary

Patient Name:

Dr. Name:

Appt Date & Time:

Address

I schedule this appointment because:

My symptoms:

Questions I want to ask:

The doctor's comments, notes, changes to medications, and/or recommendations:

From today's visit:

Height:	
Weight:	
Temp:	
Blood Pressure:	
Pulse	
Respiration:	

My to-do list:



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