TEMPLATE J

Appointment Prep Sheet

Use with Chapter 13. One sheet per visit.

Item	Details
Professional and specialty	
Date, time, place	
Reason for the visit	
Questions to ask (top three first)	1. 2. 3.
What to bring	Templates F, I, B, D; medication bottles; dentures; diet orders
What was decided	
New diet orders or limits	
Referrals	
Follow-up date	
Cost and coverage	

Team list

Role	Name	Phone	Notes
Primary care doctor			
Registered dietitian nutritionist			
Pharmacist			
Speech-language pathologist			
Dentist			
Occupational therapist			
Neurologist or specialist			
Geriatric care manager			
Area Agency on Aging			