


TELEHEALTH CHECKLIST



Created By:  *Experts in Aging Wisely*

Date:		Time:	
Name of Practitioner:			
Reason for Appointment:			
How will the appointment take place (call, Zoom, Facetime, other portal)?			
Login Information (Username/Password)			

APPOINTMENT SETUP



When you call to set the appointment, ask what information you can provide in advance. Be ready to provide the best method to reach you. Telehealth may be provided by telephone or video, or both.



If the doctor has an online portal, ask how you can get access and set it up prior to the appointment.



Establish a place in your home where you have a strong internet connection, can sit still and be seen on your computer/tablet/phone without interruption and good lighting. Test your speakers and webcam (if using video).



Be sure the provider has your current medical insurance information. Alert the doctor if you have recently moved and have an address change or any other payment/insurance changes.

INFORMATION TO PREPARE & UPLOAD

- Update your MyMedicare.gov and create a report to share to the doctor
- Update medical history with any new diagnoses or medications
- List of your current medications and why you think you are taking them. Include all over the counter medications as well as vitamins and supplements. If you are using alcohol or any other substance, report your use truthfully.
- Pharmacy information

Name of Pharmacy	
Phone	
Fax	
Address	

- Most recent doctors seen and reason/results. Vaccinations, screenings, tests, hospitalizations, treatment you have had in the past year.

Recent Doctors Seen	
Reason for Visits	
Vaccinations/ Screenings/Tests	
Results	
Hospitalizations Date/Reason(s)	

- Document and be prepared to share your current body temperature, weight, heartbeats per minute, and blood pressure.

Temperature	
Weight	
Heart Rate	
Blood Pressure	

- Any other test/monitoring results?

- What are your primary concern(s)?
If you have more than one, place them in order of importance to you.

- Recent symptoms (what, level of pain or symptom severity, disruption to daily life, when did it happen, what else was happening, had you taken medications, eaten anything or done any activity, how long did it last, recurring?)

DURING THE TELEHEALTH VISIT

Notes:

My Questions:

Recommended Tests? Why?

Recommended Treatment? Why?

What results are expected?

Health status and recommendations:

FOLLOW UP

Next Appointment Date:

Time:

Treatment plan or new medications:

Things to Monitor:

When to Call Medical Professional:

Clarification Needed: