



# MANAGING APPOINTMENTS CHECKLIST: Preparing for the Healthcare Appointment

## FACT SHEET

Client Name: \_\_\_\_\_

*Instructions: Staff to initial each area as completed. Write down any comments related to the completion of each task in the space provided. Forward or file completed checklist according to agency protocol.*

### Needed medication

- \_\_\_\_\_ 1. Make sure pre-appointment medication, if necessary, is available in the home on the day prior to the appointment. These pre-appointment medications may include antibiotics prior to a dentist appointment, anti-anxiety medications prior to appointments or procedures, and/or medications ordered prior to surgery.

### Prepare and take important information to the appointment

*If unable to find or do not know the information - call supervisor/nurse*

- \_\_\_\_\_ 2. Name and contact information of guardian/healthcare representative
- \_\_\_\_\_ 3. Insurance cards and photo identification
- \_\_\_\_\_ 4. Medication list or copy of current medication administration record (MAR) and medication history including recent medicine changes, reason for change, and any problems
- \_\_\_\_\_ 5. Medical/surgical history, tracking sheets, immunization records, and other information related to the appointment
- \_\_\_\_\_ 6. Information/questions provided by support team including events leading up to current problem/issue
- \_\_\_\_\_ 7. Completed healthcare visit/consultation form with reason for appointment written on it
- \_\_\_\_\_ 8. Contact information, directions, and parking information for the healthcare provider's office
- \_\_\_\_\_ 9. List of other current healthcare providers for the individual with their contact information
- \_\_\_\_\_ 10. Name, phone and fax number of a contact person from the provider agency if applicable
- \_\_\_\_\_ 11. Name, location, and phone and fax number of preferred pharmacy



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### Prepare the individual

- \_\_\_\_\_ 12. Follow orders regarding eating or holding medication as needed.
- \_\_\_\_\_ 13. Give any necessary routine and PRN (as needed) medication as instructed.
- \_\_\_\_\_ 14. Make sure there is enough time to have personal hygiene needs met and time to eat (if allowed) prior to the appointment.
- \_\_\_\_\_ 15. Make sure the individual is clean and dressed appropriately in clothing that can be easily removed if needed.
- \_\_\_\_\_ 16. Prepare snacks and drinks as needed especially if a long distance to the appointment
- \_\_\_\_\_ 17. Prepare supplies for hygiene needs such as wipes, adult undergarments, and change of clothing.
- \_\_\_\_\_ 18. Prepare activities and items to keep the individual occupied in the event you have to wait.
- \_\_\_\_\_ 19. Explain as appropriate what will happen during the appointment with input from the support team.
- \_\_\_\_\_ 20. Provide desensitization as needed and outlined in behavior support plan.
- \_\_\_\_\_ 21. Allow travel time to prevent rushing. If running late, notify office and inform them of situation, expected arrival time, and verify whether the provider can still see the individual.
- \_\_\_\_\_ 22. Arrive 10-15 minutes early (particularly if this is the first appointment) unless otherwise directed by provider's office.

It is essential that whoever accompanies the individual to the appointment knows the individual, knows what the appointment is for, and understands what to bring to the appointment. Notify your supervisor if you have any questions regarding the upcoming appointment.



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Comments:

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Staff Completing: \_\_\_\_\_ Date: \_\_\_\_\_

As a service for persons supporting individuals with intellectual/developmental disabilities, BQIS developed the Fact Sheet library. The information provided is designed to enhance the understanding of the topic and does not replace other professional or medical instructions or individually-developed plans. For more Fact Sheets and information, please visit [www.IN.gov/FSSA/DDRS/3948.htm](http://www.IN.gov/FSSA/DDRS/3948.htm)