

Preparing for a Successful Telehealth Visit

This guide will help you prepare before your visit with your service provider.

		Provider's Name:			
	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?				
	\Box Celebrations \Box Concerns \Box Challenges \Box Other				
	 Any new changes, observations or updates to share about: 				
			\Box Doctors	□ Behaviors	□ Symptoms
			□ Medicines	□ Treatment	\Box Labs \Box Imaging \Box Other
			□ School	□ Therapies	□ Socialization
	•	Plan of Ca	re:		
	Any updates from other providers/specialist or changes to the plan of care NOTES:				iders/specialist or changes to the plan of care



DURING THE VISIT Who, How and What?

- Who will participate in the visit- either joining virtually or in person?
 - \Box Child
 - □ Parent, family member, or other caregiver
 - \Box Home health aide
 - \Box Others
- How do you want the visit to flow or proceed? What will be discussed:
 - □ How comfortable are you helping with the physical exam?
 - \Box Do you want to demonstrate or share information about any home routines, supplies, or aquirment?
 - 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:



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:
 - \Box Referrals \Box Prescriptions \Box 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:
 - \Box Preference for the day and time that works best for your child and family
 - \Box 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?



List additional acheivements, concerns, or challenges you want to discuss:

FOLLOW-UP NOTES:



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