

# Telemedicine Checklist



<b>Appointment Invitation</b>	
<input type="checkbox"/>	Save invitation email.
<input type="checkbox"/>	Review time and date and enter in calendar.
<input type="checkbox"/>	Save password and links.
<input type="checkbox"/>	Check which telemedicine video (or phone) platform will be used. Account or download needed?
	Notes:

<b>Plan Your Environment</b>	
<input type="checkbox"/>	Test for stable, high speed Wi-Fi Internet connection.
<input type="checkbox"/>	Ensure you will have privacy – not to be seen, heard, or interrupted.
<input type="checkbox"/>	Minimize distractions in the background.
<input type="checkbox"/>	Turn off loud electronics (televisions, etc.), and silence other sources of background noise.
<input type="checkbox"/>	Lighting – Be sure you have more lighting from your front than from behind you.
<input type="checkbox"/>	Camera – Be sure it is at eye level or above, and your head and shoulders are completely in the frame.
	Notes:

<b>Technical Check</b>	
<input type="checkbox"/>	Make sure your device is fully charged up or plugged in.
<input type="checkbox"/>	Connect to the Internet.
<input type="checkbox"/>	Test camera and microphone. (Most applications have test options)
<input type="checkbox"/>	Turn up volume on device or headphones.
<input type="checkbox"/>	Silence cell phone and computer notifications.
	Notes:

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## Final Preparations

- Have a practice call with a friend to check your set up.
- Alert your family or others around you of the time of your appointment and your location.
- Have pen/pencil and paper ready for notes, or a recording device.
- Keep this Checklist handy for notetaking.

## Document Preparation – Collect Prior to the Visit

- Write down your goals for the visit and important questions you want answered.
- Complete list of all prescription medications you are taking (name, dose, how often).
- List of all supplements you are taking (contents, brand, strength, how often).
- Recent medical history, and current symptoms.

## Appointment Notes – Treatment Plan

- My concerns and questions:** Have they all been answered? What should I do next?
- Medications:** Changes and any new prescriptions to be filled? Any new supplements?
- Lab Tests:** Are any being ordered? How will I get notification or instructions?
- Next Appointment:** Scheduled? When to schedule? How to schedule?
- Documentation of the Visit:** What follow-up and instructions will I receive? How? When?