



Medicare Annual Wellness Visit Checklist

Before your appointment, review this checklist and choose the topics that are most relevant to your health history and risk factors. You can make notes about any concerns you may have. Bring this checklist to your wellness visit so your doctor can record when you are due for certain screening tests. It may serve as a helpful reminder for you when scheduling the care your doctor recommends.

My Topics to Discuss:

- Physical health (note any changes from last year)
- Risk factors ● Tobacco ● Alcohol ● Weight ● Other _____
- Diabetes care (if applicable) ● Blood glucose test ● Dilated eye exam ● Kidney function test
- Confusion/memory loss _____
- Chronic health condition(s) _____
- Ongoing pain (rate on a scale of 1-lowest to 5-highest) _____
- Vision problems _____
- Nutrition/appetite _____
- Sleep _____
- Physical activity _____
- Balance (note any falls since last year) _____
- Medicine refills/side effects _____
- Urine leakage _____

My Doctor's Recommendations:

- Cholesterol: ◆ Recommended (note date, if completed) _____
- Bone Density: ◆ Recommended (note date, if completed) _____
- Mammogram: ◆ Recommended (note date, if completed) _____
- Colorectal cancer screening test: ◆ Recommended (note date, if completed) _____
- Vaccine(s): ◆ Influenza (note date, if completed) _____
- ◆ Pneumonia (note date, if completed) _____
- ◆ Shingles (note date, if completed) _____
- ◆ Other _____

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