Appointment With: Dr. [Name]                                                       Appointment:       [Date]

**Reason for Visit: New Patient Appointment**

**Issues to discuss at today’s appointment:**

We may not be able to address all these issues today but it may give you a scope of what I’m concerned about and decide on a care plan accordingly)

* Focus for appointment
  + Referral from podiatrist Dr. [Name] to discuss pinning toes
* Current Issues
  + 4th toe of both feet curving in – rubbing the 3rd toe and creating sores­­.
  + Left foot continues to be sore where it was broken for longer periods of time after hiking or long walks.
* Relevant Medical History
  + Neuropathy diagnosed Fall 2015 by EMG (noticed around Spring 2013), result of diabulimia from type 1 diabetes
  + Left foot avulsion fracture of the cuboid, April 2013
  + Torn ligaments in right foot, 3rd and 4th toe, from car accident (wore walking cast)
  + Figure skater until age 23
  + Cysts in right foot ankle beginning at age 15 (wore walking cast and orthopedics)
  + Family history of foot deformities in [family members]
* Current Treatments
  + Don’t wear tight shoes
  + Don’t wear high heels
  + Tried buddy taping 3rd and 4th toes (toe ends up still bending under 3rd toe)
  + Tried toe spacers (single and multiple) (pushes other toes out of place, especially when wearing socks)
  + Check feet for sores

**My anxieties about seeing new providers:**

* **Mental health stigma** – often providers see my mental health diagnoses and have preconceived notions of the disorders. Please set these aside. Feel free to ask me direct questions about my mental health and please be receptive to additional information about my illnesses that I will provide you with.
* **Not feeling heard** – feeling heard and respected for my knowledge in health and healthcare really helps the doctor-patient relationship. Using validating responses can help me feel heard.  Note that sometimes my being assertive offends providers.  I prefer to be a colleague in my care, working together and that will mean me speaking up.
* **Communication –** As above with feeling heard, feeling I can communicate with you is important. Often writing is the best way for me to communicate my needs and concerns.  Communication is the key to helping me with any health issue I may be facing.
* **Being touched** – because of a history of abuse, I am very anxious in general seeing new providers. Having to be touched for physical exams can be really hard for me.
* **Not being seen as a whole person** – I have many diagnoses treated by many different providers but I am one person. Coordinating care and having my entire self acknowledged including all diagnoses and social determinants of health is important to provide the best care.  Along with that, providers need to be aware that sometimes they blame all of my health issues on mental health or diabetes which are rarely the cause of the issue I’m presenting with – those often become a scapegoat when real conditions exist.  Seeing me as a whole person can help us get to the best treatment and outcome for me.

**Overview:**

Below is a recap on my life since our last appointment.  These are things that I think will help you understand me as a whole person so you can provide better care.

**Coordination of Care:**

* PCP: see every x months
* Therapist: see x often
* Rheumatologist: see every 6 months
* Other upcoming specialty appointments: GI, Dermatology, Psychiatry
* No upcoming appointments with GYN, Neurologists, Endocrinologist, Dentist, OT, PT, Pain Management

**What you should know about me:**

* History of abuse and trauma
* Suffer from diabulimia (EDNOS – where a type 1 diabetic skips insulin shots to lose weight); severely sensitive about weight/comments around weight
* On disability since December 2013. Live on $893/month + $92/month food stamps. Homeless October 2015- August 2016.
* Legal career focused on HIPAA, health technology, legislative health policy including issues of access to health care
* Currently write a blog and run a website TheResearchLoop.com (connecting patients with researchers)
* Have 2 cats who can be very grounding for me
* Love hiking at Staunton State Park (pictures I’ve taken below):

[](https://healthasahumanright.files.wordpress.com/2017/10/copy-of-infographic-e28093-untitled-design-2.png)

**Current difficulties:**

* Processing trauma has left me open to many triggers lately
* Seeing new providers including GI and dermatologist which will create a lot of anxiety

**Additional notes**

* **Email:**  For many reasons, I prefer to use email directly to and from my personal email address at [email]. This helps me with coordination of care, but more  This **is** HIPAA compliant. Please see additional documentation explaining the exact provisions in law, rule, and regulation that supports the use of email. For more see:
  + 45 C.F.R. 164.522(b)
  + <https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/access/>
  + <https://www.hhs.gov/hipaa/for-professionals/faq/570/does-hipaa-permit-health-care-providers-to-use-email-to-discuss-health-issues-with-patients/>