

## About Today's Visit

### Barnhill Family Medicine

Frank Barnhill, M.D.

Thanks for allowing us to provide better care for you and your family by completing this short questionnaire before the doctor sees you!

What is your main reason for seeing Dr. Frank today?

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If there were additional time left during your visit, what other concern would you like to discuss?

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Please check all that apply

- I have prescriptions that need to be refilled
- I will need a work or school excuse
- I need referral for an X-ray or lab test
- I have an insurance problem
- I have forms that need to be completed
- I need help with my medications
- I need to learn more about my diet
- I would like to be added to the prayer list
- I need help with a stressful problem

Your name \_\_\_\_\_

Date of birth \_\_\_\_\_

This form was developed by Barnhill Family Medicine to provide effective communication between staff members and those for whom we provide care.  
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