

YOUR HIGH CHOLESTEROL VISIT

What to Expect, What to Ask



Your Name: _____

Are there specific concerns you want to discuss today? No Yes _____

Have there been any major changes in your family lately?

None Move Job Change Separation Divorce Death in the family New pet Other?
Describe: _____

General Health Information. Since Your Last Visit:	Yes	No	Unsure
Have you had any major illness and/or hospitalizations?			
Have you or anyone in your family developed new medical problems?			
Are there any changes to your medications?			
Do you smoke?			
Do any adults who are around you smoke (includes inside or outside the house)?			

Do you currently follow a low cholesterol diet?

No Yes, always Yes, sometimes Yes, seldom

Do you check your blood pressure?

No Yes, everyday Yes, weekly Yes, every other week Yes, monthly

Do you currently take medication for high cholesterol?

No Yes Names of medication(s): _____

Ask your doctor about any specific concerns about high cholesterol.

Would you like to get more information on any of the topics below?

Medications/Treatments	Symptoms/Complications	Health Promotion	Nutrition
High cholesterol medicine	Signs of high blood pressure	Smoking cessation	Healthy diet
Lab tests to check/monitor weight loss	Normal range cholesterol	High cholesterol prevention	Calorie intake
Cholesterol specialist	Complications of high cholesterol	Exercise routine	Healthy snacks
Herbal remedies	High cholesterol risk factors	When to call doctor	Decrease fat intake
	Causes of high cholesterol	Dental appointment	Alcohol intake

This is not a self-diagnosis tool or a treatment plan. Please consult your doctor and share this with your doctor at your next visit.

Buckeye Health Plan is contracted with Medicare for an HMO SNP plan, and with the Ohio Medicaid program. Enrollment in Buckeye Health Plan depends on contract renewal.

Buckeye Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATTENTION: If you speak Spanish or Chinese, language assistance services, free of charge, are available to you. Call 1-866-389-7690 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-389-7690 (TTY: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-877-389-7690（TTY：711）。