

# Medical Notebook

*A Care Companion*

**Name:** \_\_\_\_\_

**Date Range:** \_\_\_\_\_

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## Notes

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*You deserve*



compassion  
& choices

*in your healthcare.*

**We are the nation's oldest and largest nonprofit working to improve care, expand options and advocate for people to chart their own end-of-life journey.**

You're in the driver's seat of your care. With our tools, education and advocacy we are here to help you make informed decisions — because everyone deserves agency, support and compassion through life's end.

From initiating open, honest conversations about end of life or memorializing your wishes in an advance directive to becoming a strong advocate for yourself and your loved ones, we help you navigate healthcare planning and end-of-life decisions with confidence.

**Compassion & Choices is your partner in planning.**

Visit our website, **CandC.org**, to learn more.





# What is the Medical Notebook?

Managing healthcare can feel overwhelming, but this practical, easy-to-use notebook organizes your information and care history in one place. Think of it as your trusted care companion, designed to help you stay organized and in control.



Inside, you'll find helpful worksheets and trackers. You can use them to log symptoms, track your prescriptions, document medical events and visits, and note questions or concerns that arise. Whether you're managing a chronic condition, recovering from a procedure, or simply staying on top of routine care, this notebook helps ensure that nothing slips through the cracks.

*This notebook complements Compassion & Choices' End-of-Life Decisions Guide & Toolkit. Order your copy of the Guide booklet at [candc.link/DecisionsGuide](https://candc.link/DecisionsGuide) or scan the QR code to the right.*





# What are Advance Directives and Healthcare Proxies?

An **advance directive** is a legal document that outlines your preferences for medical care if you become too sick or injured to speak for yourself. It can include your wishes about life-sustaining treatments like CPR, ventilators and feeding tubes, as well as your values and goals for care at the end of life.





**A healthcare proxy**

(sometimes called a durable medical power of attorney or healthcare agent) is the person you legally appoint to make medical decisions on your behalf if you're unable to. They should be someone you trust to advocate for your values—this might mean someone outside of your family.

**Together, these tools help ensure that your care aligns with your wishes, even in a crisis. Everyone 18 and older should have them in place, no matter their health status. They're essential for making sure your voice is heard when it matters most.**

# About Me

Name: \_\_\_\_\_

Contact Information:

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Allergies:

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Medical conditions:

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Additional medical history details:

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## **Advance Directive:**

YES, I DO have an advance healthcare directive or living will.

Advance directives are kept here:

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# About My Community

## Healthcare Proxy:

YES, I DO have a designated healthcare proxy.

Proxy name and contact information:

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## People to notify in case of an emergency:

NAME	PHONE NUMBER	RELATIONSHIP

## Family medical conditions and health history of note:

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# About My Healthcare Providers

**Health Insurance** (company, medical record number, phone number, etc.):

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**Pharmacy** (company, location, phone number, etc.):

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**Healthcare Providers** (name, specialty, location, phone number, etc.):

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**Other frequent contacts** (company, point person, location, phone number, etc.):

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# Symptom Tracker

The following pages will help you record what you're experiencing and how you're affected. This will help you and your care team identify patterns and make informed decisions. The first line shows an example of how you might use these pages.

## Notes:

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SYMPTOM	START DATE	END DATE	SEVERITY 1-10 SCALE	IMPACT
<i>Headache</i>	<i>1/24</i>	<i>1/25</i>	<i>6</i>	<i>had to rest for the evening - couldn't focus</i>







# Prescription & Medicine Tracker

This section allows you to record all your prescriptions and important details, ensuring you have a clear and organized record of your medication regimen. The first line shows an example of how you might use these pages.

## Notes:

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DATE	TIME	MEDICINE	DOSE	WITH FOOD	FREQUENCY	NOTES
1/24	2pm	aspirin	2	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Daily <input checked="" type="checkbox"/> As Needed <input type="checkbox"/> __ A Day	for headache
				<input type="checkbox"/> Yes	<input type="checkbox"/> Daily <input type="checkbox"/> As Needed <input type="checkbox"/> __ A Day	
				<input type="checkbox"/> Yes	<input type="checkbox"/> Daily <input type="checkbox"/> As Needed <input type="checkbox"/> __ A Day	
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				<input type="checkbox"/> Yes	<input type="checkbox"/> Daily <input type="checkbox"/> As Needed <input type="checkbox"/> __ A Day	

DATE	TIME	MEDICINE	DOSE	WITH FOOD	FREQUENCY	NOTES
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				<input type="checkbox"/> Yes	<input type="checkbox"/> Daily <input type="checkbox"/> As Needed <input type="checkbox"/> __ A Day	
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DATE	TIME	MEDICINE	DOSE	WITH FOOD	FREQUENCY	NOTES
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				<input type="checkbox"/> Yes	<input type="checkbox"/> Daily <input type="checkbox"/> As Needed <input type="checkbox"/> __ A Day	



# Medical Event Log

These pages can help you construct a timeline of your medical history. Use it to log your previous events, plan for future appointments and keep track of questions you want to ask your provider.

Notes:

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<b>Date:</b>	<b>Provider:</b>
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Type:  Appointment  Unplanned Visit (urgent care/ER)  Test Result  
 Procedure/Surgery  Other: \_\_\_\_\_

Follow Up Scheduled: \_\_\_\_\_

Notes:

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<b>Date:</b>	<b>Provider:</b>
--------------	------------------

Type:  Appointment  Unplanned Visit (urgent care/ER)  Test Result  
 Procedure/Surgery  Other: \_\_\_\_\_

Follow Up Scheduled: \_\_\_\_\_

Notes:

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**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

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**Notes:**  
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\_\_\_\_\_

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                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

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**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
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**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
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**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

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**Notes:**  
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**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
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**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_ **Provider:** \_\_\_\_\_

**Type:**     Appointment                       Unplanned Visit                       Test Result  
                   Procedure/Surgery                      (urgent care/ER)                       Other: \_\_\_\_\_

**Follow Up Scheduled:** \_\_\_\_\_

**Notes:**  
\_\_\_\_\_  
\_\_\_\_\_





# How Do I Keep My Proxy and Advance Directives Effective?

Advance directives and healthcare proxies are only helpful if they reflect your current wishes and are available when needed. Here are tips to keep them active and effective:

**Review them regularly at least once a year** or after major life events, like a new diagnosis, change in relationship, or move to a new state.

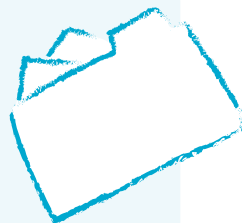


**Keep a copy with you** or store it in a digital folder you can access quickly in an emergency.



Talk to your proxy to **make sure they still feel comfortable** serving in that role and clearly understand your preferences.

**Give copies of your forms** to your proxy, doctors, specialists and any close family or friends who might be involved in your care.



**Let new providers know** you've already documented your wishes – don't assume they'll automatically receive this information.

Advance care planning is an ongoing process – **keep the conversation going**, too.





# What if I Hit Roadblocks While Advocating for My Care?

Interacting with the medical system can be challenging — here are some tips for when you face barriers getting the care you want:

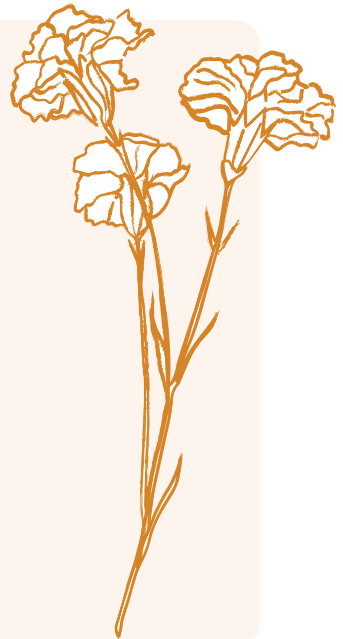
**Be clear and direct with your provider:** Make sure you and your doctor fully understand each other. Come prepared with a list of questions, and don't be afraid to ask follow up questions too. To make sure you understand what your doctor is saying, restate in your own words what you think they are telling you to ensure that you're on the same page.



**If your healthcare provider won't honor your end-of-life preferences, ask why.** Some healthcare systems restrict care options or doctors may be uncomfortable providing care they are unfamiliar with.



**Your provider is obligated to inform you of your options or refer you to someone who will.** If a healthcare system presents challenges, your provider may refer you to outside that system or you can seek another provider yourself. You always have a right to find a healthcare team that respects your wishes.



# You drive our movement.

Your gifts allow us to provide valuable resources to those navigating end-of-life care and options.

Invest in a future where everyone gets the care they want and deserve with Compassion & Choices.

**DONATE:**

[candc.link/donate-pmn](https://candc.link/donate-pmn)





8156 S Wadsworth Blvd #E-162  
Littleton, CO 80128  
800 247 7421

**CandC.org**

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