First Office Visit Planner
My partner, friend or family member was recently diagnosed

Appt. Date: __________ Location: ______________________
Appt. Time: __________ Doctor: ______________________

Note symptoms or side effects for discussion (issues with appetite, sleep, etc.)

Questions to Ask the Doctor

What type of DLBCL has been diagnosed? ______________________

Are there other diagnostic or biomarker tests that would be beneficial? ______________________

What are common symptoms associated with DLBCL? Are there complications of that I should be aware of? ______________________

What are the goals of treatment? How do we decide which treatment is best? ______________________

Are there any dietary changes that would be beneficial? ______________________

Are there activities that my partner should avoid? What can they continue to do? ______________________

What is the best way to reach you or your staff if I have questions? ______________________

Additional questions/comments/concerns: ______________________

My Visit Checklist
- Can you record the audio of the visit?
- Bring supplies to take notes
- Confirm access to patient portal
- Discuss the visit on the way home
- Pamphlets or other printed disease info