



South Lake Pediatrics
Infant, Child & Adolescent Care
www.southlakepediatrics.com
952-401-8300

Dear Teens and Young adults,

In anticipation of your upcoming appointment, we ask our adolescent and young adult patients to review the following questions. You may complete the form, or simply think about your answers. This form will be kept confidential.

Please summarize your main concerns:

When did these difficulties begin?

How has this affected your schoolwork and/or job?

How has this affected your relationship with your family?

How has this affected your relationships with your friends, classmates, team members or coworkers?

Have you been given a diagnosis or treated for this condition in the past? When? How?

At the time of your visit, your clinician will review your concerns in more detail. S/He will also be interested in your past medical history and your family history for those with similar difficulties.