

Patient's Forename(s):.....
Patient's Surname.....
Hospital Number:.....
NHS Number.....
Date of Birth:.....
Or affix ID label

Taking tablets

Somerset Community Pain Management Service
Part of Musgrove Park Hospital

Appointment Discussion Aid

What worries me is.....

Low in Mood

**Here are some things you may like to talk about at your first appointment.
Choose to talk about any of these and add other concerns in the blank circles.
Either tick or add comments.**

Inactivity

My future

Family