PREPARING FOR YOUR APPOINTMENT

QUESTIONS TO ASK YOUR EYE DOCTOR

• What's the most likely cause of my eye problems?
___________________________________________________________________________________
___________________________________________________________________________________

• Are there other possible causes for my symptoms?
___________________________________________________________________________________
___________________________________________________________________________________

• What kinds of tests do I need? Do these tests require any special preparation?
___________________________________________________________________________________
___________________________________________________________________________________

• Is uveitis temporary or long lasting?
___________________________________________________________________________________

• Will I lose my sight?
___________________________________________________________________________________

• What treatments are available, and which do you recommend?
___________________________________________________________________________________

• What types of side effects can I expect from treatment?
___________________________________________________________________________________

• Is there anything I can do to prevent this from happening again?
___________________________________________________________________________________

• I have another health condition. How can I best manage these conditions together?
___________________________________________________________________________________

• Are there any brochures or other printed material that I can take home with me? What websites do you recommend?
___________________________________________________________________________________
___________________________________________________________________________________
QUESTIONS YOUR EYE DOCTOR MAY ASK

- When did you first begin experiencing symptoms?
  
  ____________________________________________________________
  ____________________________________________________________

- Have your symptoms been continuous or occasional?
  
  ____________________________________________________________
  ____________________________________________________________

- How severe are your symptoms? Have they gotten worse?
  
  ____________________________________________________________
  ____________________________________________________________

- Does anything seem to improve your symptoms?
  
  ____________________________________________________________
  ____________________________________________________________

- What, if anything, appears to worsen your symptoms?
  
  ____________________________________________________________
  ____________________________________________________________

- Have you ever had uveitis before?
  
  ____________________________________________________________
  ____________________________________________________________

- Do you have any other medical problems?
  
  ____________________________________________________________
  ____________________________________________________________

- Do you have arthritis?
  
  ____________________________________________________________
  ____________________________________________________________

- Do you have back problems?
  
  ____________________________________________________________
  ____________________________________________________________

- Have you had any recent skin rashes?
  
  ____________________________________________________________
  ____________________________________________________________

- Have you had any ulcerated sores in your mouth or on your genitalia?
  
  ____________________________________________________________
  ____________________________________________________________

- Have you had a recent upper respiratory infection or cold symptoms?
  
  ____________________________________________________________
  ____________________________________________________________

SOURCE: Mayo Clinic.com