Preparing for a GP or Specialist Appointment

Current eating patterns

Binge eating episodes in the past four weeks:

About how many binge episodes each week:

Purging or other ways of making up for eating in the past four weeks:

If yes, describe:

How long this has been happening (months or years):

Night eating in the past four weeks:

Feeling out of control while eating: ☐ None ☐ Sometimes ☐ Often ☐ Severe

Mood and mental health

Anxiety or worry:

Low mood or feeling down:

Stress levels:

Changes in sleep:

How it affects daily life:

Physical symptoms

Hormone or period changes:

Stomach or digestive symptoms:

Weight going up and down:

Other physical concerns:

Tiredness or low energy:

Notes

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History

Past treatment for eating concerns:

Approximate dates:

Past treatment for mental health:

Current medications and doses:

Supplements:

What I want from this appointment

- [ ] An assessment and medical review
- [ ] A referral to a psychologist
- [ ] A referral to a psychiatrist
- [ ] A referral to a dietitian
- [ ] To talk about physical symptoms
- [ ] To talk about therapy options
- [ ] To talk about medication

Concerns

Questions

Date:

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