

Your health and wellbeing... What are your priorities?

Your Full Name			
		[Date of Birth
My appointment i	s on:		
What pos What hav	opointment with us sitive changes hav ve you struggled v nave any goals you	ve you made?	ext year?
Not all of these Please circle an If there are quite discuss all of you	will be relevant to y of the topics wh a few, please numb our questions duri	ich you would like to discustoer the circles in order of your ng one appointment.	
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Aleas mai man	/ реоріе опеп ііке	to ask about	
Taking me		to ask about Healthier eating	Eating the right amount
	edication		Eating the right amount Giving up smoking
Taking me	edication sical activity	Healthier eating	
Taking me	edication sical activity intake	Healthier eating Coping at home	Giving up smoking

At your appointment we will talk about setting some goals. Thank you!

