Appointment Prep Sheet

BRING THIS ONE PAGE

Hand this over rather than the whole diary. A first appointment often runs 20–30 minutes and most of it gets spent establishing these four figures. Average them over the last three months.

NAME

DATE OF APPOINTMENT

RECORDS COVER

MIGRAINE DAYS PER MONTH

Days, not attacks. One attack over two days counts as two.

TOTAL HEADACHE DAYS PER MONTH

Includes the ordinary ones.

ACUTE MEDICATION DAYS PER MONTH

Per drug type. Report it accurately — it changes the plan.

DISABILITY SCORE

MIDAS or HIT-6, with the date. Keep old scores for the trend.

TREATMENT HISTORY — THE SECTION CLINICIANS NEED MOST

MEDICATION (PREVENTIVE & ACUTE)	HIGHEST DOSE REACHED	HOW LONG ON IT	WHY STOPPED / EFFECT

"Something beginning with T that didn't help" can't be acted on. Whether a drug failed at a low dose after two weeks or at full dose after four months leads to completely different next steps.

MY TYPICAL ATTACK

WARNING SIGNS · WHERE THE PAIN SITS · OTHER SYMPTOMS · DURATION · THE DAY AFTER

HISTORY & OTHER CONDITIONS

AGE AT FIRST MIGRAINE · WHEN THIS PATTERN STARTED · FAMILY HISTORY

OTHER MEDICATION, INCL. CONTRACEPTION, MOOD AND SLEEP

QUESTIONS TO ASK

- [ ] What type of headache disorder is this, and why?
- [ ] Am I a candidate for preventive treatment?
- [ ] How long before we decide this isn't working?
- [ ] Which side effects mean stop rather than push through?
- [ ] How many days a month can I safely take my acute medication?
- [ ] What would make you want to see me sooner?
- [ ] What should I track before the next appointment?

MINE

DECIDED TODAY

WRITE THIS DOWN BEFORE YOU LEAVE THE BUILDING