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United States Department of Agriculture, University of Arkansas, and County Governments Cooperating

How to Talk To Your Doctor Group Session Report and Checklist

Make copies of and collect the following:

☐ Pre-class questions	
☐ Post-class questions	
Informed Consent doc and return.)	cument (Make 2 copies. Participant keeps one; collect signed copy
☐ Participant sign-in slip	(2 per page; cut in half)
Session date:	Number of participants:
Session conducted by (name):
Bole of person conducting se	ession (i.e., Extension agent, volunteer):
Tiolo of porson conducting st	
County where session was o	conducted:
0	
Session location (i.e., church	, community center, DHS):

Return this form with items listed above to:

Dr. Lisa Washburn
University of Arkansas
Cooperative Extension Service
2301 South University Avenue
Little Rock, AR 72204

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