
The Card for Your Doctor

Fill this in before your appointment and take it with you (Chapter 12).

About how I eat

☐ My type of vegetarian eating (the six types in Chapter 1):

☐ How long I've eaten this way: _____

☐ My B12 source, and how often: _____

☐ Whether my salt is iodised; whether I drink iodine-fortified milk:

About my body

☐ Heavy or long periods (if applicable): _____

☐ Whether I give blood, and how often: _____

☐ Symptoms I've noticed (tiredness, tingling, breathlessness, hair loss, forgetfulness): _____

☐ I'm pregnant, breastfeeding or planning a pregnancy: ☐ yes ☐ no

Medicines and supplements I take, with doses (remember to list biotin if you take it, because high-dose biotin can distort some lab tests): _____

Questions for my doctor

☐ Is my B12 in the borderline zone? Should I have MMA measured?

☐ What is my ferritin, not just my haemoglobin?

☐ What does this vitamin D number mean for me?

☐ Can I have a copy of the report?

My results (compared with the reference range printed on your own report)

Test	Result	Reference range	Date	Next check
Haemoglobin				
Ferritin				
B12				
MMA (if done)				
Vitamin D				
TSH				
Other:				