

Care Pattern Recognition Checklist

Patient Checklist:

- ☐ My provider listens to my concerns
- ☐ My questions are answered clearly
- ☐ I feel respected during appointments
- ☐ My symptoms are taken seriously
- ☐ I am included in decisions about my care
- ☐ Information is explained in a way I understand
- ☐ I am offered interpretation services if needed
- ☐ I do not feel judged because of my race, income, insurance, gender, disability, or background
- ☐ My pain and symptoms are not dismissed
- ☐ I have equal access to appointments and follow-up care
- ☐ My provider discusses all treatment options with me
- ☐ I feel safe speaking openly with my care team
- ☐ I receive the same level of attention and care as other patients
- ☐ My concerns are followed up on appropriately
- ☐ I leave appointments feeling heard and supported



If several boxes are unchecked, you may be experiencing barriers or disparities in care.

BRIDGE CARE CONNECTIONS