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Questions for the Doctor

To optimize your child's well-visit, please print this form and bring to the office; check any specific concerns you would like to discuss with Dr. Bergman or add your questions/comments below:

Developmental Milestones

- motor/physical skills
- coordination/muscle strength
- expressive speech
- social interaction
- cognitive ability/intelligence

Growth

- height concerns
- weight concerns
- prematurity

Nutrition

- infant feeding options
- picky eater
- food allergies/reactions
- organic foods
- vitamins/supplements
- healthy diet-overview

Bowel/Bladder Function

- toilet training
- constipation
- bedwetting

Sleep/Naps

- sleep/nap schedule
- sleep location
- crib safety
- snoring
- teeth grinding
- nightmares/sleepwalking

Illness Management/Conditions

- fever care/medication dosing
- asthma
- vomiting/diarrhea
- eczema
- recent injury

Behavior/Mental Health

- discipline concerns
- ADHD symptoms/progress/medication
- anxiety
- mood swings/depression
- peer/sibling difficulties

Education

- academic concerns
- social problems
- talented/gifted child
- learning difficulties/disorders

Adolescence

- pubertal changes/expectations
- personal relationships/dating/contraception
- parent-teen relationship
- exposures-alcohol, tobacco, drugs
- road safety-driver/passenger

Dental

- brushing/flossing habits
- cavities
- overbite/underbite concerns
- braces
- referral needed-dentist/orthodontist

Safety

- car seat information
- second-hand smoke exposure
- guns-storage location/access
- bath safety, hot water temperature
- sun exposure/protection
- swimming – learning/safety concerns

Activities

- time outdoors/nature exposure
- screen time: video, internet, social networks
- extracurricular activities
