

# Preventative Care

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## Checklist

Primary care physician for **annual physical exam**

Optometrist for **annual eye exam**

Dentist for **annual cleaning and exam**

Specialists/Other

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### Before you go:

- Scheduling restrictions (1x per year or 365 days between visits)
- Any forms to be completed for insurance purposes
- Incentives from employer and/or insurance provider
- Cost coverage and eligibility