

I Can Do It: My plan to take charge of my life

Name	Date	
1. What's bothering me:		
2. I want to be able to:		
3. To take charge, I need to:		
A) Talk to these people:		
B) Get this medical information:		
C) Get other information:		
c) Get other information.		
4. Today's date is:		
	y this date:	
5. What is likely to get in the way is:		
6. To make sure I succeed, I am going to ask for help from:		
o. To make sure I succeed, I am going	wask for help from.	

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7. My progress is:		
Date/Time	Steps taken to learn and deal with my problem	
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8. I will review my	progress with (name):	When:
Patient	Witness	