

IBS Care-Team Visit Prep Card

Use this page before a dietitian, clinician, pharmacist, or therapy visit.

One-Page Symptom Summary

- Main pattern:
- Stool pattern:
- Pain or bloating timing:
- Appetite, nausea, reflux, or fullness:
- What changed recently:

Food and Diet Context

- Current restrictions:
- Foods you avoid because of fear:
- Low-FODMAP phase, if any:
- Reintroduction results:
- Foods you want to keep:

Medication and Supplement List

- Prescription medicines:
- Over-the-counter medicines:
- Supplements:
- Recent starts, stops, dose changes, or timing changes:

Who Should Review What?

Question	Best role
Low-FODMAP structure, reintroduction, adequacy	Dietitian
Red flags, diagnosis, testing, prescriptions	Clinician
Medication timing or side effects	Prescriber or pharmacist
Food fear, anxiety, trauma, restriction risk	Qualified mental-health support

Appointment Questions

1. What pattern matters most?
2. What should I stop troubleshooting alone?
3. What is the next safe experiment?
4. When should I follow up?