

REQUEST TO RECORD A MEDICAL APPOINTMENT — HOW TO USE IT

Recording, written information and communication support · Version 1.0, September 2026 (Classification: Public)

WHAT THIS FORM IS FOR

This form asks your doctor for one or more accommodations at appointments: permission to record, information in writing, or changes to how you are spoken to. It explains your reason, requests consent, and records the answer.

It is built on the College of Physicians and Surgeons of Alberta's own published advice to patients. The CPSA says you can record in an exam room, that you should tell your physician before recording, and — its own direction — that you should explain why you would like to record and request consent before starting. This form is how you do that in writing.

The CPSA also warns that recording a physician who does not know or consent may be treated as a breach of trust, that clinics may have policies against it, and that it could result in being discharged as a patient. Asking first is not a formality. It is the thing that protects you.

BEFORE YOU FILL THIS OUT

You do not have to disclose a diagnosis. The reasons section is tick boxes about difficulty remembering, processing time, anxiety in medical settings and the like. None of them require you to name a condition.

Recording is not the only thing on this form, and it is not the safest ask. If what you need is your doctor writing things down, facing you when speaking, or giving you more time, tick only those. The form says it plainly: asking for written information is a request nobody can reasonably refuse, and it does not carry the risks recording does.

Give it to them before the appointment if you can. Handing it over at reception, or emailing the clinic beforehand, gives the physician time to consider it rather than deciding on the spot with a waiting room backing up.

WHAT EACH SECTION IS ASKING FOR

In plain terms, section by section. You do not have to read it all — find the part you are stuck on.

Section 1 — Patient

Your name, the date, your physician's name and the clinic. This is what makes the request part of your record rather than a conversation nobody wrote down.

Section 2 — Why I am asking

Tick all that apply. Memory, cognitive processing, anxiety in medical settings, needing more time. Tick truthfully and tick more than one if more than one is true. You are not required to explain further, and you are not required to name a condition.

What you are asking for

Separate the asks. Consent to record is one. Information in writing is another. Communication support — being faced when spoken to, extra time, plain language — is another again. A doctor who says no to recording may well say yes to the others, and you want those recorded as agreed rather than lost in a refusal of the first thing.

The answer

There is space to record what your physician said. Fill it in at the appointment, including a refusal. A written record that you asked and were refused is useful. A verbal refusal nobody wrote down is not.

WHERE THIS GOES AFTER YOU SIGN IT

Your physician and their clinic — not the government.

This is between you and your doctor. It does not go to AISH, ADAP, Alberta Health or anyone else.

Give it to the clinic ahead of the appointment where possible.

Reception, the clinic email, or the patient portal. If that is not possible, hand it to your physician at the start of the visit rather than partway through.

Keep the completed copy with the answer written on it.

That copy is your record of what was asked and what was agreed.

WHAT HAPPENS NEXT

If your doctor agrees, hold them to it gently and keep the form. An accommodation agreed once tends to hold for later appointments if there is something in writing to point at.

If your doctor refuses the recording, ask for the written-information part instead and note the refusal on the form. You have lost nothing by asking in the way the College itself recommends.

If a clinic policy is the reason given, ask for the policy in writing. A policy that exists will be produced; one that does not, will not.

WHAT NOT TO DO

Do not record without asking. The College's warning is explicit and the consequence it names is being discharged as a patient. The whole purpose of this form is that you do not have to take that risk.

Do not record other people. The CPSA is clear that you can record in an exam room but not in a waiting room. Other patients have not consented to anything.

Do not send this form to the campaign. It belongs in your medical file, not in ours.

Quoted passages are from the published advice of the College of Physicians and Surgeons of Alberta to Albertans. This form is an advocacy tool and is not legal or medical advice.

Request for Accommodation

Recording, Written Information, and Communication Support at Medical Appointments

Where you stand, in the College's own words.

The College of Physicians and Surgeons of Alberta (CPSA), in its published advice to Albertans, states:

“Although you can record your conversation, you cannot record anyone else’s conversations (e.g., you can record in an exam room but not in the waiting room). However, you should let your physician know before recording them.”

The CPSA further warns that a physician who does not know of, or consent to, being recorded may regard it as a breach of trust, that clinics may have policies prohibiting recording without consent, and that such breaches **“could harm your relationship with them and result in you being discharged as a patient.”**

The CPSA's own direction to patients is this:

“Explain to your physician why you would like to record the appointment and request their consent before starting to record.”

That is what this form is for. It explains your reason, requests consent, and records the answer.

Section 1 - Patient

Patient name

Date of request

Physician name

Clinic name

Section 2 - Why I am asking

Tick all that apply. You do not have to disclose a diagnosis.

I have difficulty remembering what is said to me during appointments.

I have a cognitive condition that affects processing or recall.

Anxiety or stress in medical settings affects my ability to take in information.

I need extra time to process spoken information.

Pain, fatigue, or medication affects my concentration.

My care involves multiple providers and I need an accurate record to share with them.

I need to share instructions accurately with a support person or caregiver.

I am Deaf or hard of hearing, and I miss or mishear spoken information.

I rely on seeing your face to follow what is being said.

I take in written information far better than spoken information.

I have difficulty speaking or being understood, and need extra time to respond.

Other (described below).

In my own words, this is how it affects me in appointments:

Maximum 420 characters.

Section 3 - What I am asking for

Tick everything that would help you. You may ask for one of these, or several.

Recording

Permission to make an **audio recording** of my appointment with you.

Written information

A **written summary** of the plan and instructions before I leave.

Medication names, doses, and changes **written down**, not only spoken.

Next steps, referrals, and test results explained **in writing**.

Communication support

Please **face me directly** and speak clearly. I rely on seeing your face.

Please give me **extra time** to process and respond. Please do not rush or finish my sentences.

If I do not understand, please **write it down** rather than repeat it louder.

Permission to bring a **support person** to listen and take notes.

I require a **sign language interpreter**. Please advise how this is arranged.

Time to **repeat back** instructions so we can confirm I have understood them.

Please contact me by **text, email, or letter** rather than by telephone.

Section 4 - My undertakings (if I am asking to record)

If you consent to recording, I agree to the following. If I am not asking to record, skip this section.

I will record **only my own appointment**. I will not record in waiting rooms or record other patients or staff.

I will tell you each time before I begin recording.

I will stop recording immediately if you ask me to.

I will use the recording for **my own care only**. I will not post it publicly or share it online.

I may share it with a caregiver, support person, or another treating provider involved in my care.

Patient signature

Date

If printing this form, sign by hand.

Section 5 - For completion by the physician or clinic

Agreed. The accommodations requested above will be provided.

Agreed in part, with conditions (set out below).

Recording declined. Reason set out below. Other accommodations requested may still be provided.

Conditions agreed, or reason for declining recording:

Maximum 340 characters.

Accommodations that will be provided:

Maximum 200 characters.

Physician signature

Date

How to use this form

1. Fill in Sections 1 to 4. Fill it in on screen, or print it and write on it.
2. Give it to the clinic ahead of your appointment, or bring it with you.
3. Ask them to complete Section 5, and **keep a signed copy for yourself.**
4. If consent is declined, that is their right. But you now have their reason in writing and an alternative accommodation on the record. Keep it.

Ask before you record. The CPSA is clear that recording without your physician's knowledge can result in you being discharged as a patient. Losing your doctor in the middle of a disability application is a cost none of us can afford. Ask, get the answer in writing, and you are protected either way.

You do not have to ask to record at all. If what you need is your doctor to write things down, to face you when speaking, or to give you extra time, tick only those boxes. Asking for written information is a request nobody can reasonably refuse, and it does not carry the risks that recording does.

The Alberta Disability System Breakdown - Advocate

St. Albert, Alberta | July 2026
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This form is an advocacy tool and is not legal advice. Quoted passages are taken from the published advice of the College of Physicians and Surgeons of Alberta (CPSA) to Albertans, "Ending the Physician-Patient Relationship."