

PATIENT PERSONA

ENTER PATIENT NAME HERE: _____

GOALS AND VALUES

Goals:

Values:

Age:

Gender:

Marital Status:

#/Age of Children:

#/Age of Grandchildren:

Location:



CHALLENGES & PAIN POINTS

Challenges:

Pain points:

SOURCES OF INFORMATION

Books:

Magazines:

News & Current Events:

Blogs/Websites:

Memberships/Groups:

Quote:

Occupation:

Job Title:

Annual Income:

Level of Education:

Vocabulary/Key Words:

OBJECTIONS & ROLE IN PURCHASE PROCESS

Objections to Moving Forward:

Role in the Purchase Process: