

# MEDICAL EXPENSE TRACKER

Period: \_\_\_\_\_

Patient: \_\_\_\_\_

**DESCRIPTION / ITEM**

**FREQUENCY**

**ACTUAL COST**

**INSURANCE  
PAID**

**Medications & Supplements**

**Specialists & Therapy**

**Testing & Labs**

**Supportive Care & Misc**

**TOTAL OUT OF POCKET \$**

Notes & Observations: