

Appendix 5: Program Material Examples Continued

4. SOUTHCENTRAL FOUNDATION — PREVENTIVE TESTING/SCREENING REMINDER LETTER



Southcentral Foundation
Dr. Verlyn Corbett, MD
Anchorage Native Primary Care Center 3 East
4320 Diplomacy Drive, Suite 3191
Anchorage, Alaska 99508

March 6, 2018

C-O First and Last Name
C-O Mailing Address
DOB
MRN

RE: Preventive Testing/Screening

Dear C-O First Name,

Preventive care can help you avoid many serious health problems. Our records indicate that you are due for the following types of preventive care. Please call your scheduler, Brittany at **(907) 729-6557** to schedule an appointment. If you have any questions or concerns, please ask to leave a message with your Nurse Case Manager regarding this letter.


- | | |
|--|---|
| <input type="checkbox"/> Pap Smear | <input type="checkbox"/> Blood work/ Labs in Support Clinic |
| <input type="checkbox"/> Clinical Breast Exam/ Mammogram | <input type="checkbox"/> Fasting |
| <input type="checkbox"/> Appointment with Provider
30 minutes | <input type="checkbox"/> Non-fasting |
| <input type="checkbox"/> Medication Consult
Please bring your pill bottles into the appt. | <input type="checkbox"/> Blood Pressure Check |
| | <input type="checkbox"/> Immunizations update |
| | <input type="checkbox"/> Influenza (flu shot) |
| | <input type="checkbox"/> Pneumonia vaccine |
| | <input type="checkbox"/> Tetanus/diphtheria |
| | <input type="checkbox"/> Other _____ |

Sincerely,

Brittany Condefer, Case Management Support
Dr. Verlyn Corbett, MD
Phone: (907) 729-6557
Fax: (907) 729-4136

Appendix 5: Program Material Examples Continued

5. KANZA HEALTH CENTER WOMEN'S HEALTH PROGRAM — POSTCARD REMINDER




**Kaw Nation
Women's Health Program**
P.O. Box 474 — 3151 E. River Road
Newkirk, OK 74647
Phone (580) 362-1039 — Fax (580) 362-1467

This is to remind you that it is time or may be past time for your:


- Well Woman Exam (Pap Test and/or Clinical Breast Exam)
- Repeat/follow-up (Pap and/or Breast Exam)
- Annual Mammogram
- Follow-Up Mammogram

Comment: _____

Please call your regular Clinic indicated below today, to make an appointment with **Kaw Women's Health Program**.
If you have already made this appointment,
then we hope to see you soon.



Thank you for allowing us to help in caring for you!



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Women's Health Program**
P.O. Box 474 — 3151 E. River Road
Newkirk, OK 74647
Phone (580) 362-1039 — Fax (580) 362-1467

This is to remind you that it is time or may be past time for your:

- Well Woman Exam (Pap Test and/or Clinical Breast Exam)
- Repeat/follow-up (Pap and/or Breast Exam)
- Annual Mammogram
- Follow-Up Mammogram

Comment: _____

Please call **Your Clinic** at: _____ today,
to make an appointment with **Kaw Women's Health Program**.
If you have already made this appointment,
then we hope to see you soon.

Thank you for allowing us to help in caring for you!

You have an appointment with

KAW WOMEN'S HEALTH PROGRAM

Site: _____

Address: _____

Phone: _____

Mon. Tues. Wed. Thurs. Fri.


_____ at _____ am/pm

If unable to make appointment, please call **Kaw Women's Health** (580) 362-1039 or phone listed above.

Appendix 5: Program Material Examples Continued

6. GPTCHB POST CARD REMINDER

<p>XX Health and Wellness Center XXX Street City, State, Zip Code</p> <p>Dear Patient, Here's a friendly reminder that it's time for your yearly colorectal cancer screening.</p> <p>Please call our office to schedule an appointment to pick up a screening kit.</p>	<p>PLACE STAMP</p> <hr/> <hr/> <hr/> <hr/>
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	<p>Colon cancer kills more than 50,000 people each year, but screening can largely prevent the disease when precancerous polyps are found and removed before they turn into cancer.</p> <p>Carry on the Tradition of Life...</p> <p>Colorectal Cancer is:</p> <ul style="list-style-type: none">• Preventable• Treatable• Beatable
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