

This form is being used to evaluate and improve the care you receive from your doctor. It is also meant to help you talk with your doctor about your health. Please take a few minutes to answer the first set of questions on this form and then give it to your doctor or a member of his or her staff. Your doctor will answer the second set of questions. Please answer honestly. Your responses will be confidential.

### Comprehensive PPM Patient Indicators Instrument

1. If you are a woman age 40 or over, have you had a breast cancer screening procedure (e.g., mammogram) performed in the past 2 years?  
 Yes  
 No
  2. If you are age 50 or over, have you ever had a colorectal cancer screening test performed (e.g., fecal occult blood, colonoscopy, flexible sigmoidoscopy, or double-contrast barium enema)?  
 Yes  
 No
  3. Do you use tobacco? Select Yes or No.  
 Yes  
 No
  4. If you are age 65 or over, have you been offered or given the pneumococcal vaccine?  
 Yes  
 No
  5. If you have diabetes, has your hemoglobin A1c been tested in the last 12 months?  
 Yes  
 No
  6. Is your blood pressure checked each time you see your doctor?  
 Yes  
 No
  7. If you are age 18 or over, has your body mass index been calculated within the last 6 months or during this visit?  
 Yes  
 No
- If your BMI is outside parameters (age 18–64 BMI  $\geq 25$  kg/m<sup>2</sup> or  $< 18.5$  kg/m<sup>2</sup>; age 65 or over BMI  $\geq 30$  kg/m<sup>2</sup> or  $< 22$  kg/m<sup>2</sup>), has a follow-up plan been determined?
- Yes  
 No

## Comprehensive PPM Physician Indicators Instrument

1. For a female age 40 or over, has a breast cancer screening procedure (e.g., mammogram) been performed in the past 2 years?
  - Performed
  - Ordered but not performed
  - Offered but refused
  - Not ordered
  - Not applicable
  
2. For a patient age 50 or over, have any of the following colorectal cancer screening tests been performed?
  - (a) Fecal occult blood in the past year
    - Performed
    - Ordered but not performed
    - Offered but refused
    - Not ordered
    - Not applicable
  
  - (b) Colonoscopy in the past 10 years
    - Performed
    - Ordered but not performed
    - Offered but refused
    - Not ordered
    - Not applicable
  
  - (c) Flexible sigmoidoscopy in the past 5 years
    - Performed
    - Ordered but not performed
    - Offered but refused
    - Not ordered
    - Not applicable
  
  - (d) Double-contrast barium enema in past 5 years
    - Performed
    - Ordered but not performed
    - Offered but refused
    - Not ordered
    - Not applicable
  
3. Have you asked the patient if he or she uses tobacco?
  - Yes
  - No
  
4. For a patient age 65 or over, has the patient received pneumococcal vaccine?
  - Yes
  - No
  - Vaccine was offered but refused
  - Vaccine was contra-indicated
  - N/A

5. For a patient with diabetes, have you tested the patient's hemoglobin A1c in the last 12 months?

Yes

No

6. Have you measured the patient's systolic and diastolic blood pressure today?

Yes

No

If yes, what is the patient's blood pressure?

Systolic (mm Hg) \_\_\_\_\_

Diastolic (mm Hg) \_\_\_\_\_

7. For a patient age 18 or over, does the medical record indicate a BMI within the last 6 months or during this visit?

Yes

No

If the patient's BMI is outside parameters (age 18–64 BMI  $\geq 25$  kg/m<sup>2</sup> or  $< 18.5$  kg/m<sup>2</sup>; age 65 or over BMI  $\geq 30$  kg/m<sup>2</sup> or  $< 22$  kg/m<sup>2</sup>), has a follow-up plan been documented?

Yes

No