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| **DEPARTMENT OF HEALTH SERVICES**Division of Public HealthF-01223 (06/2024) | **STATE OF WISCONSIN**Bureau of Community Health PromotionChronic Disease Prevention & Cancer Control Section |
| wisewoman CASE MANAGEMENT |
| **SECTION 1 – CLIENT AND PROVIDER INFORMATION** |

| 1. Provider Agency Name | 2. Print Performing Provider/Case Manager Name | 3. Date of Contact |
| --- | --- | --- |
|       |       |       |
| 4. Client Name (Last, First MI) | 5. Date of Birth | 6. Client ID Number |
|       |       |       |
| **SECTION 2 – CLIENT REFUSED FOLLOW-UP SERVICE(S)** |
| 1. Indicate WISEWOMAN Services not completed. Check all that apply.
 |
| [ ]  Client refused Clinical Services and/or referral |
| [ ]  Blood Pressure[ ]  Healthy Behavior Support | [ ]  Glucose/A1C[ ]  Social Services and Support | [ ]  Cholesterol[ ]  Other, specify:       |
| SECTION 3 – CLIENT LOST TO FOLLOW-UP |
| 1. Indicate action causing lost to follow-up. Lost to follow-up is defined as a client who did not attend her scheduled workup/healthy behavior support intervention within three months after a screening visit and could not be reached to reschedule another appointment.
 |
| [ ]  Unable to be reached after 3 contact attempts[ ]  Moved, unable to locate[ ]  Other, specify:        |
| SECTION 4 – CASE MANAGEMENT NOTES |
|       |