



Planning Today's Visit

At Women's Health Care Center

1. If you want **only** a Preventive Health Visit or **only** a Problem-Based Visit today, write **#1** in that box below.
2. Or, if you want to **both** have a preventive health visit **and** talk about other health problems today, write **#1** in the box for the main reason you are here. Write **#2** in the box for the second reason.
 - a. During your visit, we will make sure we cover the #1 reason you are here today.
 - b. If we have time to cover both your #1 and #2 reasons today, your insurance may be billed for 2 visits. (Insurance plans cover preventive health visits and problem-based visits in different ways.)
 - c. If there is not enough time to take care of both issues today, we will help you set up a visit for another day. We will take care of the issues you marked as #2 at that visit.

Preventive Health Visit (wellness visit or annual physical) to create your personal care plan for screening, prevention, and counseling **based on national guidelines for your age, risk factors, and screening history**, for these issues:

- Common cancers such as breast, cervical, colon, and lung
- Common medical conditions: diabetes, osteoporosis (brittle bones), heart disease & stroke
- Common safety issues
- Routine vaccines
- Sexual health such as screening for sexually transmitted infections or refilling birth control prescription

This visit can include refilling your **usual** prescriptions (if no major changes are needed).

Are you here for **“Welcome to Medicare”** or **“Medicare Wellness” Visit**? Yes No

Are you due for a Pap test today? Yes No Not sure

Problem-Based Visit (consult, evaluation, treatment, re-check, or follow-up):

Please check what you want to talk about or have done today. You may check more than 1 box:

- Evaluating new or ongoing health problem(s)
- Treating new or ongoing health problem(s)
- Medicine issues such as changing medicines, or refilling prescriptions without a Preventive Health Visit
- Tests or screenings that are **not** listed under Preventive Health Visit
- Referral(s) for anything **not** listed under Preventive Health Visit
- Forms you need filled out, such as FMLA, Disability, Travel, Adoption, or Sports
- Office procedure (such as a biopsy, wart treatment, or putting in or removing an IUD)
- Other _____