

See, Test & Treat Standard Operating Procedure Manual Table of Contents

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STANDARD OPERATING PROCEDURES FOR SEE, TEST & TREAT, A PROGRAM FUNDED BY THE COLLEGE OF AMERICAN PATHOLOGISTS (CAP) FOUNDATION

BACKGROUND: THE CAP AND THE CAP FOUNDATION

As the world's largest organization of board-certified pathologists and leading provider of laboratory accreditation and proficiency testing programs, the College of American Pathologists (CAP) serves patients, pathologists, and the public by fostering and advocating excellence in the practice of pathology and laboratory medicine worldwide.

As a 501(c)(3), the CAP Foundation, its philanthropic arm, delivers charitable funding to improve patient care by: mobilizing pathologists to provide cancer screening, diagnosis and care to underserved communities; awarding training, research and leadership scholarships to help prepare the pathologist leaders of tomorrow. Find more information about the CAP Foundation visit www.foundation.cap.org. Contact the CAP Foundation at capfnd@cap.org. Follow the CAP Foundation on Facebook at <https://www.facebook.com/capfndn> or follow us on Twitter at @capfndn.

OVERVIEW: SEE, TEST & TREAT PROGRAM

No woman in America should die from undiagnosed cervical or breast cancer—yet every year, thousands of American women discover these cancers too late. When women don't receive preventive care, what's at stake is almost beyond measure: the many years of quality life that these women deserve; the vital roles they play in their families, communities and workplaces; their many contributions to communities and economies; the far higher costs of treating a cancer diagnosed late.

See, Test & Treat is a CAP Foundation initiative that delivers free, pathologist-led cervical and breast cancer screening to vulnerable women in US communities. The goal of See, Test & Treat is to engage underserved patients in community health care services by offering same-day screening, results, education, and immediate access to follow-up care in a culturally appropriate setting.

See, Test & Treat is a comprehensive cancer-screening program that connects women in need to the life-saving diagnostic skills of a pathologist and the services of a volunteer team of health care professionals assembled for their care. The program serves to foster partnerships between pathologists and their clinical colleagues and to educate the public about the important role that pathologists play on the patient care team.

This pathologist led program offers medically underserved women, those with little or no access to preventive care, those without health insurance (uninsured or underinsured), those facing barriers to care (language, cultural, financial, transportation) free cervical and breast cancer screenings, education, same-day results, and a connection to follow-up care in a one-day, single visit model and often provides a medical home for the future. Screenings include a pelvic exam, clinical breast exam, Pap test and screening mammogram.

See, Test & Treat often becomes the entry point into the health care system for women, families, and communities.

The program seeks to inspire women to become active participants in healthy behaviors and preventive health care, and to influence their family and community to do the same. If you can reach women, you can engage families. Women make approximately 80% of the health care decisions for their families, and when they're well connected to the primary care system, they're more likely to ensure that their families receive regular care as well. We see this "multiplier effect" at every See, Test & Treat program. Women screened through See, Test & Treat typically bring two friends or family members to attend with them. The program seeks to inspire women to become active participants in healthy behaviors and preventive health care, and to influence their family and community to do the same.

The CAP Foundation provides grants of up to \$20,000 to support its interdisciplinary, dignified approach to patient care; preference is given to 501(c)3 organizations.

Liability

The CAP Foundation assumes no, and hereby disclaims all, liability for the testing, diagnosis, or treatment of women participating in the See, Test & Treat program (see Rider 1). Participating sites should engage their Compliance and/or Risk Management Department to gain an understanding of and address any liability issues. It is expected that the care, testing, and treatment to be provided in the See, Test & Treat protocol by the participating gynecologists, cytologists, radiologists, pathologists, and mammography technologist shall be consistent with the standards of care applicable to such specialties.

Trademark

See, Test & Treat® is a registered trademark of the CAP Foundation. Prior to public use of the name and trademark, permission must be granted by the CAP Foundation. All intellectual property relating to See, Test & Treat® is owned exclusively by the CAP Foundation and shall remain the sole property of that party unless otherwise agreed in writing. Intellectual property arising out of collaborative activities will be determined in definitive agreements.

FOREWORD AND PURPOSE OF STANDARD OPERATING PROCEDURES

The CAP Foundation's See, Test & Treat Standard Operating Procedures (SOPs) provide direction to individuals and organizations involved in the planning and execution of a See, Test & Treat program. This document is not intended to address all possible variations that may arise in the planning and execution of See, Test & Treat programs. More detailed and specific resources are available to complement these SOPs in the appendices, or by contacting the CAP Foundation at capfdn@cap.org.

It is intended to be a living document that may be adapted when needed, but it may not be altered without the approval of the College of American Pathologists Foundation staff.

The purpose of the SOPs is as follows:

1. Provide a baseline standard for planning, execution and follow-up that is applicable to any See, Test & Treat program.
2. Ensure all participants focus on their specific tasks while being knowledgeable of all other areas to ensure a smooth and successful program.
3. Create continuity around the knowledge of how See, Test & Treat programs are intended to function.
4. Ensure a consistent quality experience for patients, clinicians, volunteers, health care systems, and the community.
5. Offer guidance and approaches to ensure repeatable and scalable programs. These SOPs apply to all See, Test & Treat programs.

Core Program and Grant Requirements

1. CAP member pathologist to lead or co-lead a program to offer cervical and breast cancer screening to a U.S. community of underserved women.
2. The CAP member pathologist will partner with a volunteer, multidisciplinary clinical team and host site for care of patients.
3. A hospital/clinic program host with the capacity to provide a Pelvic and Clinical Breast Exam, Pap test, and Screening Mammogram to eligible women.
4. Preference is given to 501(c)3 organization to act as recipient and fiduciary of CAP Foundation grant funding.
5. Provision of same-day Pap test results and same-day or prompt Screening Mammogram results (within one week).
6. Same-day results delivered face to face.
7. Establishment of a best practices protocol for delivering patient results that cannot be conveyed the same day. This may involve a phone call and certified letter to make sure patients are not lost to follow-up.
8. Provision of available information about financial aid, charity programs, state or federal assistance, and health insurance market place exchange.
9. Adherence to the American Cancer Society (ACS) and/or the American Congress of Obstetricians and Gynecologists (ACOG) Guidelines.
10. Conformance with acceptable standards of practice for the screening and diagnosis of cervical and breast cancer.

11. Compliance with appropriate federal, state, and local health provider licensing and regulations for cervical and breast cancer screening.
12. Connection to follow-up care for patients with abnormal results.
13. Culturally sensitive, translated, patient-centered education and health information.
14. Submission of a completion of Patient Outcomes Data Form within 30 days post program

PROGRAM/GRANT APPLICATION

To take this life-saving program to the next level, the CAP Foundation has established an 18-month program pipeline. An aid to host sites as well as Foundation operations, our 18-month program pipeline ensures advanced planning; budgeting and fundraising—all vital areas needed to help See, Test & Treat achieve greater scale and impact.

The CAP Foundation offers See, Test & Treat grants of up to \$20,000 to support See, Test & Treat program expenses that other grants and in-kind donations do not cover. This grant typically pays for items such as exam and laboratory supplies, equipment rental, promotional materials, educational aids, interpreters, translation of materials, patient transportation, and meals.

CAP Foundation encourages volunteerism whenever feasible and supports See, Test & Treat programs by procuring in-kind donations of testing kits and supplies, loaner equipment whenever possible, as well as knowledge sharing in terms of running effective programs.

As See, Test & Treat continues to expand, we look to programs to become more self-sustaining and actively pursue other sources of funding in addition to securing in-kind donations in the areas of refreshments/food, supplies, promotion and publicity.

Our program process begins with our Request for Applications (RFA), each June through July - for programs targeting delivery in following year.

Pathologists and institutions interested in hosting a program and applying for a CAP Foundation See, Test & Treat program must complete and submit the following two forms:

Prescreening Questionnaire ([See Appendix 1 – Program/Grant Applications](#))

This brief query helps prospective host sites determine if they can, at a high level, meet and manage the core requirements to host a See, Test & Treat program.

Program/Grant Application ([See Appendix 1 – Program/Grant Applications](#))

The program grant application is to be completed by host sites that are committed to hosting a See, Test & Treat program and have the resources in place to support the program core components. Grants of up to \$20,000 are available to support See, Test & Treat program expenses that other grants and in-kind donations do not cover.

See, Test & Treat Grant Review Process

The CAP Foundation Grants Committee will review all applications and award funds on behalf of the CAP Foundation Board of Directors. Programs are evaluated on their ability to:

- Identify medically at-risk (uninsured/underinsured) population facing barriers to care
- Reduce barriers to cervical and breast cancer screening and follow-up care
- Advance early detection and treatment of cervical and breast cancers
- Provide measurable results and outcomes
- Utilize standardized procedures set forth by the CAP Foundation

Funding Schedule/Eligibility

The grant recipient will receive 50% of the award upon official approval of the application by the CAP Foundation Grants Committee. Each program is required to submit the See, Test & Treat outcomes data worksheet no later than 30 days following the program along with documented program costs to receive the balance of the funds. This aggregate-blind program data will be used to develop a formal research protocol to track and monitor the impact of See, Test & Treat and to improve the program design.

The CAP Foundation will not provide See, Test & Treat grants to the following entities:

- Individuals
- Social organizations
- Trade or business associations
- Memorials, such as cultural exchange programs or program to benefit any particular individual, including individual travel and/ or study

All organizations applying for See, Test & Treat program grants from the CAP Foundation must demonstrate solid financial and program management.

Outside Funding:

To help defray the cost of the program, sites are encouraged to seek in-kind and local financial donations. Keep in mind that not everyone you ask to donate knows about your See, Test & Treat program. Clearly state why you are seeking donations, what the current situation is and what the desired outcome will be.

Identifying additional funding opportunities

Seek local funding opportunities, donations and partnerships. Get in touch with the [CAP Foundation Development team](#) for help, guidance, and suggestions as to how to approach funders.

1. Research local foundations, community groups (i.e. Exchange Clubs, Rotary clubs, women's clubs, etc.) and institutions that would be interested in providing funding to local programs. Be mindful of grant application deadlines and funding cycles.
2. Connect with businesses and organizations in the community who might be interested in donating food, transportation, or items for the program. Additionally, utilize these connections as a means to promote the program and recruit participants.

3. Work with your institution's grant writer or outreach staff to identify key community groups or businesses that have a relationship with your institution.
4. Talk with board members and key stakeholders at your institution to see if they are connected with any organizations, clubs or businesses that would be interested in supporting See, Test & Treat.

Simple tips to follow when reaching out and asking for a donation:

1. **Use simple and direct language:** Think about telling a story to explain your See, Test & Treat program, its impact on the community and why you are asking for a donation.
2. **Do tailor your message:** Determine how you will make "the ask" (phone call, casual email note or formal letter); think about appealing to each person's individual or business interests to make a correlation with See, Test & Treat.
3. **Do know what you're asking for:** It's important to clearly outline your request.
4. **Do know who you're asking:** Make sure you know who your audience is when you ask for donations.
5. **Don't be scared of rejection:** You will not get a donation from every person you ask, and that's okay.
6. **Do have a positive attitude:** Stay positive, let people know the impact their donations will have on the success of your See, Test & Treat program and why it's important.
7. **Do think outside the box:** Get creative when you ask for donations for your See, Test & Treat program, and experiment with connecting with others via email, social media, in person, or better still, all three!

STEPS TO PLANNING A SEE, TEST & TREAT

Step 1: Identify a Patient Population

See, Test & Treat is a screening program for patients who experience health disparities or face socioeconomic, linguistic, insurance, health literacy, transportation, and other barriers accessing cervical or breast cancer screening. Health disparities can be defined as inequalities that exist when members of certain population groups do not benefit from the same health status as other groups. In relation to cervical and breast cancer, such differences occur when one group of women has a higher incidence of mortality rate than another or when one group has a lower survival rate than another.

In underserved communities both urban and rural, many women live without regular health care, increasing their risk for late diagnoses. African American women are 40% more likely to die of breast cancer, primarily as a result of late diagnoses. Latina women in America are 60% more likely to develop cervical cancer and 40% more likely to die from it. Southeast Asian women have higher invasive cervical cancer incidence rates and lower Pap testing frequencies than most other ethnic groups in the US. Cervical cancer incidence rates are five times higher among Vietnamese American women than white women.

Resources for identifying patient populations:

- Centers for Disease Control and Prevention
- [National Cancer Institute \(NCI\) Fact sheet](#)
- NCI Plan to Overcome Cancer Health Disparities [PDF]

Step 2: Secure a Host Hospital or Clinic with an Underserved Population

1. Confirm support of the host site institution/organization and commitment from the following areas:
 - a. Hospital/Clinic administration
 - b. Medical director
 - c. Pathology department/chair
 - d. Gynecologist/gynecology department
 - e. Radiologist/radiology department
 - f. Laboratory director/chair
 - g. Marketing/Communications/Public Relations department(s)
 - h. Patient advocate/community outreach
 - i. Interpreter Services
 - j. Registration
 - k. Financial aid department
 - l. Health insurance marketplace provider (to provide enrollment information)
 - m. Facility Department (security, event set-up, parking/traffic control)

2. Schedule a program date approved by the host organization and the CAP Foundation.
3. Avoid scheduling programs that conflict with hospital, community events or holidays.
4. Consider factors that could be impacted by weather, especially if any part of the program will be held outdoors
5. Consider sufficient space for patients, accompanying family members or friends, clinical services, education and food.
6. Confirm with institution/organization that event space and exam rooms are available.
7. Confirm where and how host site will connect patients to follow-up care and treatment when abnormal or cancer results are discovered.
8. Confirm that transportation to your program is available.

Step 3: Identify a Program Coordinator/Recruit a Workgroup to Plan and Implement the Program
(See Appendix 4 - Sample Work Plan)

It is recommended that all See, Test & Treat programs identify a Program Coordinator to assist with planning/organizing/coordinating all program logistics such as scheduling planning group meetings, taking meeting minutes, and coordination of follow-up assignments; ideally this person has project management skills. Consider reaching out to a part-time staff person or a retired clinician who may be interested in taking on a temporary assignment; those in administrative fellowships or graduate students may value the experience in serving as a program coordinator.

- Program Coordinator/Organizer
- Pathologists
- Cytotechnologists
- Gynecologists
- Oncologists
- Nurses
- Radiologists
- Mammography Technicians
- Registration
- Financial aid/insurance marketplace navigators
- Public Relations, Marketing or Communications Representative
- Administrative staff
- Patient advocates
- Community outreach
- Interpreters (any interpreters involved in translation of test results, medical procedures, follow-up care, etc. must be medically certified)
- Building/Facilities representation

Step 4: Estimate Patient Volume

Use the following planning guidelines to estimate number of patients:

- Establish the number of private examination rooms available for screening.
- Determine the number of clinicians available to provide patient exams and screenings.
- Estimate the amount of time needed for patients to change into a hospital gown.
- Allow ample time for a pelvic and Clinical Breast Exam, Pap test, patient, and clinician questions (15 to 20 minutes).
- Estimate the time for patients to dress after exams.

- Determine the amount of time necessary to transition from exam room to mammography.
- Determine the amount of time for patients to undress.
- Determine time needed to perform Screening Mammograms (20 minutes).
- Use the above information to estimate the number of women who can be served.
- Estimate the amount of time needed to process, read, interpret, and deliver results.
- Set the program hours of operation to achieve goals.
- Think about your typical clinic no show rate and consider registering additional patients to mitigate this (or create a patient wait-list)

Step 5: Adhere to ACS/ACOG Guidelines to Determine Patient Eligibility within the Population in Need

| Population | Source | Cervical Cancer Screening |
|-------------------|---------------|---|
| Aged <21 y | ACS/ACOG | No screening |
| Aged 21-29 y | ACS/ACOG | Pap test (cytology) alone every 3 years |
| Aged 30-65 y | ACS/ACOG | Pap test (cytology) alone every 3 years (acceptable); Pap test plus an HPV test (called “co-testing”) every 5 years (preferred) |
| Aged > 65 y | ACS/ACOG | No Screening following adequate prior negative screening |
| | | |
| Population | Source | Breast Cancer Screening |
| Aged 21 - 39 y | ACS | Breast exams, either from a medical provider or self-exams, are no longer recommended. |
| Aged 25 - 39 y | ACOG | Clinical breast exam (CBE) may be offered every 1 to 3 years. |
| Aged 40 - 44 y | ACS | Breast exams, either from a medical provider or self-exams, are no longer recommended. Offered choice to start yearly mammograms |
| Aged 40 - 49 y | ACOG* | Clinical breast exam (CBE) yearly Offered choice to start annual mammograms |
| Aged 45 - 54 y | ACS | Breast exams, either from a medical provider or self-exams, are no longer recommended. Yearly Screening Mammogram |
| Aged 50 - 75 y | ACOG* | Clinical breast exam (CBE) yearly Yearly/Biennial Screening Mammograms |
| Aged 55 + | ACS | Breast exams, either from a medical provider or self-exams, are no longer recommended. Yearly/Biennial Screening Mammograms |

*Women at average risk of breast cancer should have screening mammography every one or two years based on an informed, shared decision-making process that includes a discussion of the benefits and harms of annual and biennial screening and incorporates patient values and preferences.

Step 6: Devise Patient Recruitment Materials

- Create Media and Marketing Plan ([See Appendix 2 – Media Kit](#)).
- Engage marketing, communications and/or public relations personnel at the beginning of the planning stages to develop a program outreach and/or promotional strategy.
- Distribute promotion/patient recruitment materials a minimum of 6 weeks in advance of the program date ([See Appendix 3 – STT Flyer Template](#)).
- Work with community outreach experts within your institution and/or within the community to reach target populations. Provide/include talking points for consistent messaging by outreach personnel or if material is provided as a leave behind.
- Employ community advocates to visit and recruit patients from the community.
- Post multilingual flyers in locations frequented by the target audience such: as beauty salons, women’s shelters, churches, libraries, community centers, grocery and other stores, laundromats, ESL classes, local workplaces, fast food restaurants, and currency exchanges.
- Post multilingual flyers in your clinic or hospital.
- Cross promote your See, Test & Treat program at other community events; look for speaking engagements.
- Consider use of social media including Event Brite sign-up portal, Constant Contact to gather names and generate email notifications.
- Contact local radio to conduct free public service announcements; community calendar announcements.
- Contact local cable TV hosts to interview members of the planning team.
- Advertise in newspapers; community calendars.
- Post on hospital website, Facebook, and Twitter. (See Facebook/Twitter Instructions in the Media Kit)
- Create tactics to remind patients of their appointment times and any last minute instructions (mitigate no show rate).
 - Reminder Phone Calls
 - Text Messages
 - Postcards
 - Magnet (with appointment information)

Conduct pre-program workshops for resistant populations that may require additional information before participating.

- Create cultural awareness and sensitivity by holding a simple event to explain to women and their families what happens at a See, Test & Treat program.
- Have interpreters, volunteers, and clinicians available to field questions.
- Familiarize community influencers with the program and key messages about the importance of cervical and breast cancer screenings.
- Include diagrams and education about the procedures that will take place during the program.

Step 7: Create Pre-registration Process Prior to Patient Recruitment ([See Appendix 5 - Sample Patient Registration FAQ and Form](#))

1. Work with your Billing/Finance department to set-up a **special code/guarantor account** to use for See, Test &

Treat patients so they will not receive a bill for screening services provided at the event. Make sure this account code is shared with all relevant departments.

2. Determine whether registration will be conducted by phone, online, or via text message.
3. Devise a prescreening form to gather patient contact information, demographic information, patient/family history for cervical or breast cancer, and eligibility for screening based on age and ACOG/ACS screening guidelines.
4. Create a script in which to train registration staff so all are asking potential patients the same questions as well as giving correct event details. In addition, staff needs to understand and answer questions regarding the circumstances under which a patient would or would not receive a Pap test or Screening Mammogram.
5. Permit registration staff to access appropriate databases to look up dates of previous screenings (Pap and/or Screening Mammogram) to confirm eligibility.
6. Advise patients that the name on their photo ID should be the name used when pre-registering and completing all forms for See, Test & Treat and future medical visits. Include this information and procedures in patient outreach and recruitment activities.
7. Mitigate the patient no-show rate – overbook or double book appointments based on your institution’s typical no-show rate.
8. Utilize a waitlist, with a plan to contact women for unfilled appointments. These women can still attend educational segments.
9. Plan to accommodate walk-ins to fill appointment slots made available by women who do not keep their appointments, aka no-shows.
10. Plan for interpreters to meet population needs (any interpreters involved in translation of test results, medical procedures, follow-up care, etc. must be medically certified).
11. Assign volunteers to place reminder phone calls/text messages to registered participants two to three days prior to event to confirm appointments.

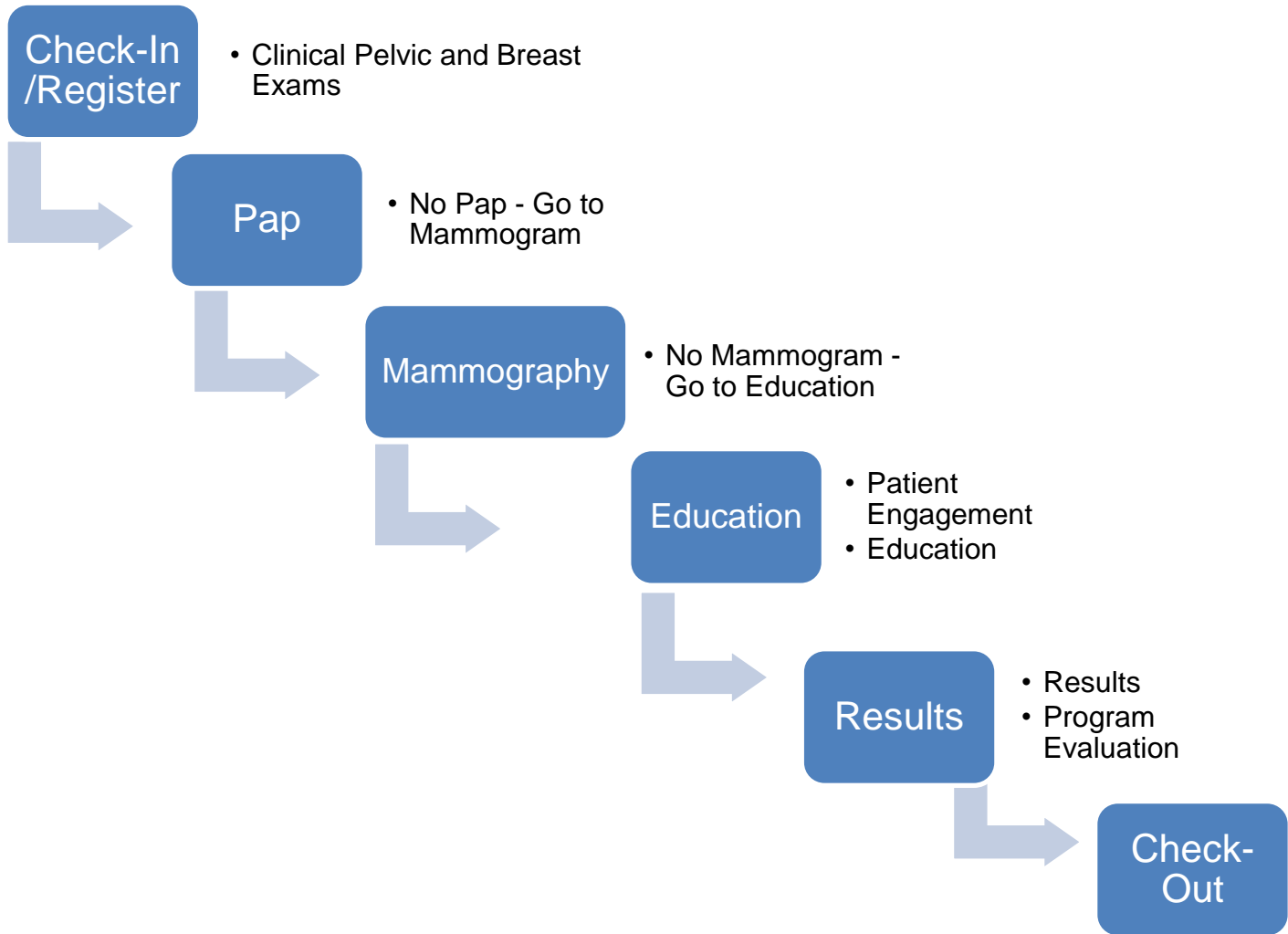
Step 8: Patient Management and Flow

1. Map out your See, Test & Treat program to determine the best use of available space, patient flow and interaction among departments. Consider creating workflows ([See examples in Appendix 6](#))
2. Determine location of check-in areas for patients and volunteers.
3. Determine location for on-site registration of See, Test & Treat patients
4. Provide patients with a program map and card/folder listing all their screening appointment times. ([See Appendix 7 – Sample Program Map and Activity Card](#) and [Appendix 14 – Sample Activity Card and Program Evaluation](#))
5. Determine need for translator or patient escort; assign as needed to help escort patient to screening appointments and/or activities to assure timeliness and engagement.
6. Consider having patients go to a check-in station either before or after on-site registration; use this station to orient patients to the program. This area can provide additional information/handouts such as a program map to

help patients find various program locations, health ticket/activity card so patients know what is happening throughout the day (have patients check off each activity as an incentive to participate and complete their card.)

7. Volunteers can view patient health ticket/activity card to help direct individuals throughout the program.
8. Show patients where the restrooms and refreshments are kept.
9. Station volunteers in corridors and main areas to help guide patients and answer questions.
10. Consider color coding key areas using balloons and/or signage.
11. Ensure patient forms are completed and collected during the on-site registration process, including:
 - a. Host site registration forms.
 - b. Patient consent to health screening and waiver of liability.
 - c. HIPAA compliance and patients to be offered the opportunity to receive a copy of the “Notice of Privacy Practices.”
 - d. CAP Foundation media release form ([See Appendix 8 - Photo Release Form](#)).
 - e. For patients who do not wish to be photographed, establish a visible way to identify them to the photographer (e.g., no photo sticker, colored beads, etc.).
12. Ensure appropriate signage throughout site to guide the women to registration, screening, education, and check-out areas. Offer in more than one language as needed to support your patient audience.
13. Consider providing patient guides/translators and/or station volunteers throughout the main program areas to assist patients with questions or to help them determine where they should go next (screening, education, food, waiting area, results area).
14. Determine location of check-out areas for patients and volunteers.
15. Ensure volunteers are available to See, Test & Treat patients to answer questions or collect any forms prior to leaving event.

SAMPLE Patient Flow Chart



Step 9: Determine Volunteers Needed

Create a contact sheet for all volunteers to include their full name, role, responsibility, and contact information (phone/email). All volunteers should be familiar with HIPAA Guidelines specific to patient Protected Health Information (PHI).

Using the information to estimate the number of patients to be screened in Step 5, determine the number of volunteers and clinicians (who are licensed, credentialed, or granted privileges) to provide services at the program. ([See Appendix 9 – Sample Volunteer Support](#)).

Program Logistical Support:

- Program Coordinator
- Volunteer Coordinator
- Education Coordinator
- Health Fair Coordinator
- Children’s Activity Coordinator
- Food Coordinator
- Greeters
- Interpreters
- Additional Interpreters (not medically certified)
- Patient Escorts
- Specimen Couriers
- Phlebotomist
- Exam Room Attendants
- “Float” volunteers
- Photographer
- Security
- Parking Attendants
- Check-In Station (patients and volunteers)
- Onsite Patient Registration
- Patient Navigators
- Check-Out Station (patients and volunteers)

Patient Screening Support

- Conduct pelvic and Clinical breast exams
- Perform Pap test
- Process and read Pap specimens
- Perform Screening Mammogram
- Read and interpret Screening Mammograms
- Discuss results with patients

Volunteer Recruitment

- Begin volunteer recruitment early within your own specialty
- Advertise in institutional newsletter, website, bulletin
- Enlist other specialties and community advocates to announce opportunity in staff and group meetings

Volunteer Management

- Circulate/post a volunteer announcement and sign-up sheet, website, etc.
- Create a volunteer contact sheet to include: name, contact information, role, responsibility, and time commitment; circulate among volunteers.
- Create job descriptions and expectations for each volunteer role ([See Appendix 10 – Sample Volunteer Recruitment and Job Descriptions](#)).

- Develop a process/procedure for each area so volunteers understand what is happening and what they need to do.
- Develop a program map so volunteers can familiarize themselves with the activities and locations throughout the building so they will know where to find things and what is happening at various times throughout the day.
- Assign key leaders to manage each volunteer group.
- Make sure all volunteers are wearing their STT t-shirt and name tags; for those in key roles – add this to their name tag.
- Make sure those serving as translators are easy to identify.
- Schedule a walk through the day before your See, Test & Treat event to allow volunteers to become oriented with the program and ask questions.
- Hold a 5 to 10 minute huddle the day of your See, Test & Treat program to orient volunteers and to answer any last minute questions. Conduct a walk-thru with volunteers if time allows.
- Make sure volunteers know what is happening in their area specific to patient and clinician interactions.
- Share key documents (e.g. patient registration lists, volunteer contact sheet), program map, pager numbers, phone and fax numbers with volunteers as feasible.
- Consider appointing someone to monitor and manage volunteer staffing at each station/location throughout the day of the event. This will prevent understaffing and volunteers not having the opportunity to take a break or get food. Make sure food is available to all volunteers throughout your See, Test & Treat program.
- Please send ALL volunteer names (with credentials) to the CAP Foundation 2-weeks before your program in order for certificates of appreciation to be processed and delivered.

Volunteer Orientation

1. Schedule time before your event to conduct a volunteer orientation and program walk-thru (e.g., day or evening before, onsite huddle prior to the program start).
2. Define the expectations of your volunteer team; provide a written orientation packet if needed to include event logistics (volunteer roles, dress code, start/stop times, patient screening, education and food areas, volunteer areas, key contacts), along with any last minute instructions ([See Appendix 11 – Volunteer Orientation Packet Outline](#)).
3. Confirm volunteer role, responsibility and hours of participation.
4. Remind volunteers to check-in and check-out when arriving/departing the program.
5. Instruct volunteers to communicate with their colleagues – share information about what is happening during the day.
6. Discussing patient information or programmatic issues in public spaces is never a good idea; remind volunteers to seek out assistance and a private area to discuss and get guidance.
7. Remind volunteers that they could be asked to pitch in as needed and may be asked to do something outside of their assigned role.

Step 10: Create Day-of-Program Registration Process

1. Utilize electronic health records whenever possible to accurately capture patient contact information, demographic information, screening eligibility, patient/family history for cervical or breast cancer, and follow-up information.
2. Work with all departments to consolidate the gathering of patient information (avoid the need for patients to provide duplicate information at different stations).
3. Verify information gathered from preregistered patients. Reminder: patients should use the same name that is on their photo ID.
4. Have patients communicate how they would like to be contacted. This may include postcard, phone call/text, email, or mail.
5. Have patients complete registration forms, HIPAA forms, media releases and waivers, as necessary.
6. Create a program agenda listing locations and times of other activities, education and screenings taking place during your See, Test & Treat program that women can participate in while waiting for test results. Provide this information as a handout or poster or both. Orient volunteers prior to the event; make sure to explain this to patients when they are checking in.
7. Provide an activity card so patients can check off when they complete an activity or receive a screening.
8. Remind women of the importance to remain at the program to get results and complete a post-program questionnaire (utilize an incentive if needed).
9. If a paper-based patient registration system is used, ensure there are multiple copies so that gynecology, mammography, and the laboratory have necessary information for initial testing and follow-up procedures.
10. Have a system for ensuring that patient contact information has been captured, should paper forms be lost or misplaced.

Patient Identification

- Develop a patient identification system so that results can be readily and correctly matched.
- Follow all HIPAA guidelines specific to patient Protected Health Information (PHI).

Waiting Area

- Choose an area for patients to wait for screening and/or results.
- Determine what other activities will be available for patients to participate in while they are waiting.
- Keep the patients engaged and informed to foster a more meaningful, long-term clinical relationship with health care providers.

Step 11: Patient Exam Logistics

- Develop a rotation system to utilize multiple patient exam rooms & providers.
- Assign individuals to specific exam rooms to ensure efficient room turnover for next patient exam.
- Please make sure all rooms are outfitted with equipment needed to complete patient exams (ie: sufficient lighting).
- Note: Advise providers against excessive use of lubricant during Pap tests to avoid compromising of specimens.

Step 12: Patient Education

Patient Education

The time between cervical and breast cancer screenings and waiting for same-day test results provides a perfect window of opportunity to engage women and their families in education. See, Test & Treat leverages this wait time to persuade women to take control of their health, and encourage family and members of the community to do the same. The most important factor is that education and educational materials are translated and culturally appropriate.

The CAP Foundation has developed patient education kits made up of three components:

- [Patient Activity Guide](#) – this handout provides information to patients on the importance of cervical and breast screening along with leading a healthy lifestyle
- [Power Point Presentation](#) – the patient education tool is intended to explain and reinforce the information contained in the Patient Activity Guide.
- [Educator Guide](#) – this document provides ideas and suggestions on how to implement and use these education materials during your See, Test & Treat program.

Patients learn valuable lessons, such as:

- Adopting a healthy lifestyle with healthy diet and regular exercise can lower the risk of cancer and other diseases.
- Receiving routine cervical and breast cancer screenings can detect abnormal cells before they become cancer.
- Finding cancer early can make treatment more successful.
- Pathologists and laboratory medicine are central to getting your diagnosis.

Interactive, hands-on learning promotes:

- Patient engagement as they experience and interact directly with clinicians.
- Unique experiences when patients can look through a microscope to see normal and abnormal cells with a guided tour from a pathologist or resident.
- Education can be in a health fair, table, or booth setting and can include the following:
 - One-to-one patient conversation and interaction
 - Demonstrations of self-breast exams with interactive anatomical models
 - Demonstration of disease states through posters or anatomical models
 - Posters and information sheets
 - Workshops
 - Lectures

Patient Activity Cards and Program Evaluations: [\(See Appendix 13 – Activity Card and Program Evaluation\)](#)

1. Provide patient with a card that lists their screening time(s), along with all the activities and on-site education available for the day. Instruct patients that this card then must be stamped after participating in an activity or educational program.
2. Provide patient evaluation forms to gather information about patient experience and satisfaction.
3. Incentivize patients with a gift card for completed evaluations and vouchers.

Collect forms from patients at the check-out station.

Step 13: Healthy Meals

Patients (and accompanying family members) and volunteers will be at your See, Test & Treat program site

anywhere between 3 to 8 hours whether receiving screenings, participating in the health fair or waiting for results. Providing a healthy breakfast, lunch and snack provides the opportunity to introduce patients to nutritious and healthy food options along with fueling fuel your volunteer team.

Consider the following:

- Setting up a table in a main area with a volunteer assigned to manage the food station.
- Offering easy to eat, hand-held food choices; provide culturally appropriate food based on the patient population being served
- Conducting a lunch and learn session
- Having a separate food area for volunteers

Step 14: Children's Activities

See, Test & Treat recognizes that one barrier to care faced by women is the availability of childcare. When planning your program consider a space and process for offering children's activities during the program. These can include coloring books, crafts, games, reading materials along with other activities.

Consider the following:

- Offering age appropriate activities
- Establishing an identification/matching system for each child/parent
- Determining the age range/limit for participation
- Securing volunteers who have experience working with children
- Checking with your Risk/Compliance department for guidance

Step 15: Laboratory, Laboratory Personnel and Specimen Management

- Space and personnel must meet all state/local requirements to screen for and diagnose cervical and breast cancer on the same day.
- Ensure program has licensed/certified personnel to conduct all exams, obtain and process Pap specimens, and take and review breast images.
- Follow the rules governing your organization regarding credentialing for personnel.
- Ensure your program utilizes a CLIA-certified laboratory to perform specimen testing.
- Determine the laboratory setup that works best while remaining compliant with state and federal regulations.

Specimen Management

- Establish a protocol for specimen labeling.
- Identify a system to process specimens in the order in which they were collected.
- Establish a protocol for batching and delivering specimens to the appropriate staff for processing and interpretation.
- Avoid excessive batching of specimens, as that may result in processing delays that can impact the delivery of results to patients.
- Arrange for volunteer couriers, if necessary.

Step 16: Deliver Patient Results ([See Appendix 12 - Sample Patient Discharge Form](#))

1. Determine how the results will be collected and provided to the clinician, and who will be communicating these results to the patient.
2. Identify a private setting for delivery of same day Pap and Screening Mammogram results.
3. Explain abnormal results and further testing or procedures required. Avoid using the word “cancer.”
4. Triage patients to receive any further required testing available that day.
5. Provide a take-away card with contact information so patients can call post-program with any questions.
6. For further testing or treatment that is not available that day, connect patient with hospital or clinic personnel who can arrange and communicate next steps to patient (provide a take-away sheet with contact information).

Step 17: Follow-up Testing and Treatment

In instances where abnormal findings are discovered through pelvic or Clinical breast exam, Pap test, or Screening Mammogram, host site clinicians are encouraged to provide patients with additional onsite treatment whenever feasible.

1. When abnormal Pap test results are found, clinicians may find the following same-day tests or treatment beneficial to the patient:
 - a. Colposcopy
 - b. LEEP
2. When abnormal breast results are found via Screening Mammogram or manual palpation:
 - a. Additional mammogram views and/or
 - b. Fine Needle Aspiration (FNA), often performed by a Cytopathologist.
3. In cases where further treatment is needed that cannot be performed onsite, program hosts/clinicians are required to:
 - a. Arrange follow-up, including locations, providers and financial arrangements for women with abnormal results requiring further care (provide a take-away sheet with contact information).
 - b. Explain the follow-up plan to patients both orally and in writing before they leave the See, Test & Treat program.
 - c. Provide patients with a card listing resources and contact information if they have any questions after leaving the See, Test & Treat event.

Models for Follow-Up Care

See, Test & Treat host sites have employed various methods for connecting patients with abnormal Pap and Screening Mammogram results to further care. Tactics used include:

- Hospital affiliates committing to patient follow-up for cervical and breast abnormalities.
- Partner practice committing to patient follow-up for Pap and Screening Mammogram abnormalities.
- Triage with patient navigators and physicians working in area clinics/imaging centers that have committed to patient follow-up for cervical and breast abnormalities.

- Volunteer physicians accepting patients into their private practice.
- Referral to County medical center.
- Enrolling patients in a state/federally funded women's cancer screening program, applying for Medicaid, or in a health insurance marketplace plan.

Step 18: Debrief and Celebrate

1. After your STT program it's important to conduct a debrief session within a week of your event, to include all supporting staff and volunteers, to gain input, determine what worked well and if any changes need to be made to your program for next year ([See Appendix 14 - Debrief](#)).
2. Celebrate your success! Host a thank you lunch the week after the event and invite the Hospital Administrators, C-Suite, and Volunteers.
3. Recognize volunteers internally on message boards, flat screens, newsletters, intranet, institution website, press releases, etc.
4. Leverage internal awards available within your institution for See, Test & Treat volunteers
5. Consider sending out handwritten thank you notes.

Step 19: Complete and Report Patient Outcomes and Patient Survey Results

1. Within 30 days post program, submit a completed Patient Outcomes worksheet to receive the balance of the CAP Foundation grant ([See Appendix 15 – Program Outcomes](#)).
2. Report survey results as a means to learn about how well community need was addressed.
3. Provide results as a means of improving the See, Test & Treat program.
4. Decide whether you will conduct a See, Test & Treat program next year.
5. Submit a Request for Application for next year.

Rider 1

The CAP member pathologists are not employees, agents or representatives of the CAP Foundation, and have no affiliation with the CAP Foundation other than the CAP member pathologists' professional membership with the College of American Pathologists. The CAP Foundation is not responsible for the actions or inactions of the CAP member pathologists. The participating sites and clinicians are at all times solely responsible for their own conduct, and should not rely on these Standard Operating Procedures in determining whether they have complied with their applicable professional standards of care.

APPENDIX 1 - SEE, TEST & TREAT[®] PROGRAM GRANT APPLICATION FORMS

In its first years of growth, See, Test & Treat has met the highest standards of quality, delivered powerful impact in dozens of communities, and proven its ability to reach greater scale. As See, Test & Treat continues to demonstrate its impact on communities across the United States; we are experiencing an overwhelming response to host programs in many communities.

To take this life-saving program to the next level, the CAP Foundation has established an 18-month program pipeline. An aid to host sites as well as Foundation operations, our 18-month program pipeline ensures advanced planning; budgeting and fundraising - all vital areas needed to help See, Test & Treat achieve greater scale and impact.

The CAP Foundation will continue to offer grants of up to \$20,000 to support See, Test & Treat program expenses that other grants and in-kind donations do not cover. As See, Test & Treat continues to expand, we look to repeat programs to become more self-sustaining and actively pursue other sources of funding in addition to securing in-kind donations in the areas of refreshments/food, supplies, promotion and publicity.

The 2020 See, Test & Treat RFA period will open on Friday, June 1, 2019 and close at 5:00 pm CT on Tuesday, August 31 , 2019. With this in mind, now is the time to work within your organization to gain support to host a program and recruit colleagues to support you in this life-saving endeavor...because no woman in America should die from undiagnosed cervical or breast cancer.

APPENDIX 2 – MEDIA KIT

See, Test & Treat Media Kit – suggested press materials for host sites (with templates and guidelines).

- CAP Foundation See, Test & Treat Program Media Relations Timeline
- Pitching pointers
- CAP Foundation fact sheet
- CAP Foundation See, Test & Treat key messages
- Media alert template
 - Print
 - Electronic
- Press Release template
- Social Media guidelines (Twitter and Facebook)
 - Job Aid: Boosting Content on Facebook

CAP Foundation See, Test & Treat Program Media Relations Timeline

| Month | Activity | Status |
|--------------------|---|---|
| 5 months pre-event | Identify/Secure Photographer if Foundation assigned photographer is not assigned | Communicate as host action item on monthly conference calls |
| | Explore broadcast opportunities in regional and local markets | Communicate as host action item on monthly conference calls |
| | Contact regional ethnic media and public health outlets about possible placements | Communicate as host action item on monthly conference calls |
| | Develop press materials: <ul style="list-style-type: none"> • Team contact list – host, CAP • Pitch letter • Multimedia press release • Fact sheet • Talking points • Media alert (to be distributed 3 weeks prior to the event, as well as the day before and day of event.) | |
| | Compile media list | |
| 4 months pre-event | Continue to develop/finalize press materials CAP and Host Site Communications | |
| 3 months pre-event | Distribute pitch letter and press release to long-lead publications and calendar of events editors | |
| | Make follow-up calls to the long-lead publications | |
| 2 months pre-event | Continue to follow-up with the long-lead publications | |
| 1 month pre-event | Explore possible pathologist interviews to record, distribute local radio stations. | |
| | Distribute press release to: <ul style="list-style-type: none"> • Local newspapers • Television stations • Radio stations • Social media outlets (e.g. CAP or host web sites, Twitter accounts, etc.) | |
| | Make follow-up calls to the media outlets which received the press release | |
| 2 weeks pre-event | If produced, ensure pre-recorded radio interviews with pathologist are distributed to local radio stations | |
| | Distribute media alert to local television stations. | |
| | Continue to follow-up with local media outlets to see if planning to attend or cover the event. | |
| | Issue tweets, social media postings | |

| Month | Activity | Status |
|-----------------------|---|--------|
| Day Prior | Re-distribute media alert. Continue to follow-up with local media | |
| EVENT DAY | Conduct media interviews with outlets that attend the event. | |
| | As budget or resources permit, select two photos to distribute via AP Photo Express. Develop captions | |
| | Engage social media from event: "tweets;" CAP and host Facebook postings; event photos | |
| 1 – 2 weeks following | Media follow-up; results reporting | |

PITCHING SEE, TEST & TREAT® TO LOCAL MEDIA

Pitching Pointers:

1. Personalize your letter or email to the local journalists you have identified.
2. Keep your message short and simple (aim for no more than 200 words.)
3. When emailing a pitch, consider splitting your effort into two emails:
 - a. An initial 150-word introduction highlighting newsworthy specifics. For example, is it the first See, Test & Treat for the facility, city, or region?
 - b. Follow up two to three days later with a more detailed email that includes some narratives; consider including one sentence about a patient experience from a previous See, Test & Treat at your facility. Paste your final Media Alert in the bottom of the email.
4. Use bullet points to speed the editor's ability to review.
5. Have a clear next step. For example:
 - a. State the time and date you plan to call the journalist to follow up with more details.
 - b. Include contact information and encourage reporters to respond and provide you a preferred time for you to call them.
 - c. Offer to send a media kit, or feature a link to a press release posted on your website.

Additional Fast Facts: Include as Needed to Support Your Pitch

- More than 12,000 women will be diagnosed with cervical cancer this year.
- With the introduction of the Pap test in 1941, cervical cancer has decreased by more than 70%.
- Recent advances indicate that the human papillomavirus (HPV), one of the most common sexually transmitted diseases, can cause cervical cancer. Updates to screening guidelines and introduction of the HPV vaccine have increased questions and concerns women have about cervical cancer and screening.
- Regular screening and knowing the facts can help protect women from serious health conditions.
- Screening tests, such as the Pap test and HPV test, as well as the HPV vaccine have made cervical cancer one of the most preventable cancers.
- Pathologists are physicians who screen for cervical cancer by examining cells under a microscope.
- Sometimes called the “doctor’s doctor,” pathologists work closely with the other physicians on the patient care team to provide an accurate diagnosis and to determine if further testing is needed if cervical cancer is detected. They also help guide treatment.

COLLEGE OF AMERICAN PATHOLOGISTS (CAP) FOUNDATION FACT SHEET

About the CAP Foundation

- The CAP Foundation champions patient-centered and humanitarian roles for pathologists. The CAP Foundation strives to connect people, especially those in need, to the specialized, life-saving skills of pathologists.
- Through the generous financial support of CAP members, staff, industry, foundations, and patient advocacy groups, the CAP Foundation serves as the leading philanthropic organization for pathologists.

- Since its inception in 1963, the CAP Foundation has proudly granted millions of dollars to support pathology education, research, and humanitarian programs.
- CAP members, staff, industry, foundations, and patient advocacy groups provide the generous financial support that makes the CAP Foundation the leading philanthropic organization impacting patients and the specialty.
- The CAP Foundation is a registered 501(c) (3) charitable organization, with Federal Tax ID 36-6134600. Donations are tax deductible to the extent allowed by law.

ABOUT SEE, TEST & TREAT®

- The CAP Foundation's flagship program, See, Test & Treat, delivers pathologist-led free cervical and breast cancer screening and same-day results to women in need. The program is funded by donations to the CAP Foundation.
- CAP member pathologists, partnering with hospitals and clinics to host a program, apply for grants up to \$20,000 for each program site. These pathologists, together with a team of health care professionals, donate their time and expertise to deliver See, Test & Treat's same-day screening, results, and connection to follow-up care.
- See, Test & Treat follows the most current [American Cancer Society breast cancer](#) and [cervical cancer guidelines](#).
- The See, Test & Treat program offers the following:
 - A clinical pelvic and breast exam, Pap test, and screening mammogram.
 - Same-day Pap test results, same-day or prompt mammogram results, and connections to follow-up care. Such follow-up care may include onsite colposcopy and cervical biopsies, additional mammography views, and breast fine-needle aspirations.
 - Inclusive, culturally sensitive education, outreach, and care to ethnically diverse, vulnerable patients while they wait for test results often delivered by a pathologist.

SEE, TEST & TREAT GOALS, IMPACT:

- Recognizing women as catalysts to change within the family and community, See, Test & Treat seeks to influence community health care and lifestyle behaviors for the better by establishing habits of preventive care and integrating patients into a medical home.
- In a one-day, single-visit model that also may offer interpreters, nutritious meals, medical and health care supplies, community outreach materials, transportation, and children's activities, See, Test & Treat helps women overcome obstacles to care.
- See, Test & Treat introduces patients to laboratory medicine as it brings the pathologist's expertise directly to patients in need.
- Through 2017, the CAP and CAP Foundation have:
 - Sponsored and funded 66 See, Test & Treat programs
 - Helped nearly 6,000 women in underserved communities across the nation

- The program's benefits go beyond these numbers, reaching and engaging women and their families who have previously been disconnected from health care.

Key Messages for Speaker, Interviewee Reference

- The CAP Foundation's See, Test and Treat program aims to provide free cervical and breast cancer screening, **same-day results**, and connection to follow-up care all in one visit, for vulnerable women in communities around the country.
 - Women receive a pelvic exam, along with a Pap test to screen for cervical cancer, and a Clinical Breast Exam along with a screening mammogram to screen for breast cancer.
- As the philanthropic arm of the CAP, the CAP Foundation funds the See, Test & Treat program.
- Pathologists who are members of the CAP volunteer their time and expertise to lead a team of volunteer gynecologists, radiologists, and other clinicians to provide See, Test & Treat screenings.
 - Pathologists are medical doctors who specialize in laboratory medicine in order to diagnosis diseases, evaluate patient health, and identify potential treatment options.
- Support for See, Test & Treat helps improve access to care to foster community health. Moreover, it removes barriers to care that many women face. For example, See, Test & Treat:
 - Uniquely screens and provides women with test results in one day, which helps women who cannot take time off work for doctor visits.
 - Often includes language interpreters, supporting women who have limited English language fluency.
 - While women wait for their test results, they enjoy free nutritious meals, receive translated education materials from a variety of allied health organizations, and they grow comfortable with health care resources in their community.
- See, Test & Treat shines a light on the pathologist's essential role in collaborative, coordinated patient care.
- Through 2017, the CAP and CAP Foundation have sponsored 66 See, Test & Treat programs and helped nearly 6,000 women in underserved communities across the nation.
- The CAP Foundation plans to expand the See, Test & Treat program in the coming five years so that more pathologists can coordinate and provide essential screening services to more vulnerable women across the US.

MEDIA ALERT

FOR IMMEDIATE RELEASE

[insert distribution date]

MEDIA CONTACT:

[Insert Your Media Contact Information Name, Title
Phone, Email]

Jonathan Lehrer, CAP Foundation Communications
800-323-4040 ext. 7443
jlehrere@cap.org

REMOVE BARRIERS TO EARLY CANCER DETECTION

for [Insert your service area or region] Women See, Test & Treat® free cervical and breast cancer screening program delivers same-day test results to area women in need

WHAT: With a grant from the College of American Pathologists Foundation, **[Insert your organization and facility's name]** will provide free cervical and breast cancer screening, same-day results, and access to follow-up care for local women in need.

WHEN: **[Insert day, date, and event start and finish times]**

WHERE: **[Insert site facility's full street address, ZIP code; Include contact name and number if preregistration is offered]**

WHO: **[insert lead pathologist first + last name]**, MD, FCAP, the **[insert pathologist's title]** leads the collaborative screening. **[Insert brief biographical detail, e.g., a board-certified pathologist, Dr. X specializes in etc.]**

Pathologists, physicians who diagnose diseases through laboratory medicine, are uniquely qualified to explain how regular cervical and breast cancer screenings and immediate test results can help reduce deaths caused by these cancers. The volunteer clinical team includes cytopathologists, gynecologists, internists, radiologists, residents, nurses, medical students, technologists of various specialties, community health professionals, and many more.

WHY: Each year, about 12,000 women in the United States are diagnosed with cervical cancer. Among some underserved groups, the incidence is 25% higher than that of the general population. And yet with regular screening, cervical cancer can be nearly eliminated. When breast cancer is diagnosed in its earliest, localized stages, the five-year survival rate is 98%.

The **[insert facility name]** See, Test & Treat program targets local underserved women, including **[insert your targeted patient population, for example: Asian, Hispanic, and African American women]**. Multilingual outreach includes **[if appropriate detail language services provided.]**

The CAP Foundation is the philanthropic arm of the College of American Pathologists, the leading organization of board certified pathologists, which serves patients, pathologists, and the public by fostering and advocating excellence in the practice of pathology and laboratory medicine worldwide. The CAP Foundation supports patient-centered and humanitarian initiatives lead by pathologists, striving to connect people in underserved communities with the specialized skills of pathologists.

[Insert your boilerplate statement here]
(Consider incorporating local statistics as appropriate:

CDC – Cervical Cancer Statistics by State:
<http://cdc.gov/cancer/cervical/statistics/state.htm>)

PRESS RELEASE

FOR IMMEDIATE RELEASE

[insert distribution date]

MEDIA CONTACT:

[Insert Your Media Contact Information Name, Title
Phone, Email]

Jonathan Lehrer, CAP Foundation Communications
800-323-4040 ext. 7443
jlehrere@cap.org

**[Insert short headline. Please include See, Test & Treat in headline
Note: For electronic or wire service distribution, delete logos above]
—insert subhead as needed —**

[Insert Dateline] — **[Sample copy:** Backed by a grant from the College of American Pathologists (CAP) Foundation, pathologist **[insert first, last name]** MD, FCAP, **[insert title]** leads clinical volunteers to deliver a See, Test & Treat cancer screening program **[insert date, times, location.]** The program serves area women in need and represents a partnership between **[name additional organizations, as appropriate.]** See, Test & Treat will provide women with a free Pap test with same-day results and screening mammogram with same-day or prompt results.

[Insert a quote. Refer to the example below; edit and use as needed]

“The incidence of cervical and breast cancer among minority women is higher than that of the general population,” Dr. **[insert pathologist’s last name]** said. “The See, Test & Treat program helps reduce such disparities by connecting women with care in their communities—care that speaks their language and understands their challenges. With regular screening, these women can learn more about their unique risks, and we can detect cancers early, when the potential for survival is greatest.”

[Insert other quotes, details of your event and its participants, as well as any location or registration information.] **[Insert other quotes, details of your event and its participants, as well as any location or registration information.]**

[See the See, Test & Treat Key Message document to include, if desired, available cervical and breast cancer incidence data.]

About [insert your organization’s boilerplate]

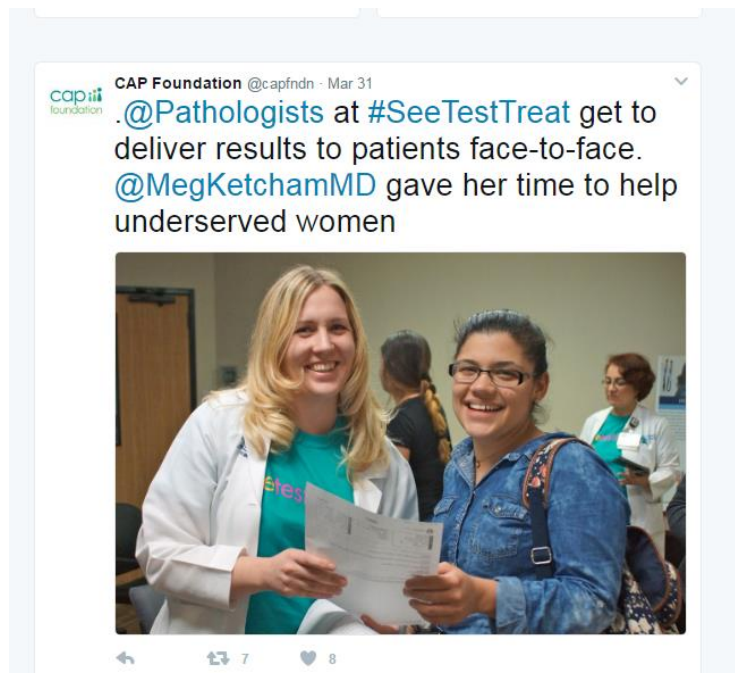
About the College of American Pathologists and CAP Foundation

The CAP Foundation, its philanthropic arm, supports patient-centered and humanitarian initiatives led by pathologists, striving to connect people in underserved communities with the specialized skills of pathologists. Find more information about the CAP Foundation visit www.foundation.cap.org. Contact the CAP Foundation at capfnd@cap.org. Follow the CAP Foundation on Facebook at facebook.com/capfndn or follow us on Twitter at @capfndn.

LEVERAGING SOCIAL MEDIA FOR SEE, TEST & TREAT®

Twitter Guidelines

- Please include the CAP's Twitter handle in your tweets: @capfndn
- Email your organization's Twitter handle to the CAP Foundation's social media manager, Denise Kainra at dkainra@cap.org to be included in CAP Foundation tweets.
- Use ideal length to increase retweet rate: 120 characters
- Use photos to also increase the retweet rate
- Remember that spaces, dashes, and everything else count as characters
- Character-saving tips:
 - Use a semicolon (;) or ampersand (&) instead of the word "and"
 - Don't count spaces after semicolons, commas, etc.
 - Use lab instead of laboratory
 - Don't worry about Dr.'s first names or FCAP
- Additional Tips:
 - Write out your thought or draft message in the Twitter compose box, and then edit out adjectives, articles, and any unnecessary words and characters. Think: "clear, concise, and compelling, and then be even more concise."
 - If possible, post a tweet that "tags" the hospital and any other organizations involved in event. You can do a search at the top of the Twitter homepage to find these handles or find from the Web. For example:



Facebook Guidelines:

- Like and post your See, Test & Treat event highlights and status updates to the CAP Facebook page (facebook.com/capfndn)
- While Facebook status updates accommodate thousands of characters, aim to be concise
- Accompany each post a photo
- Just like Twitter, tag your institution if it is on Facebook and be sure to tag the CAP Foundation.

Using Boosted Content to Boost See, Test & Treat® Registration

Intro to Targeted Data on Facebook

Facebook uses the demographic information that users provide to help advertisers reach audiences. Without realizing it, we provide detailed information to Facebook in order to help paid advertisers reach us and segment us into audiences.

See, Test & Treat host sites can use this affordable means to reach a bigger audience of potential patients by using even the most basic information users provide to Facebook:

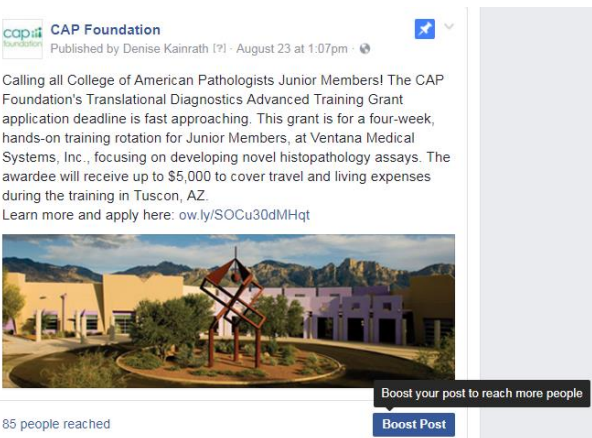
- Geographic
- Interests/Likes
- Demographic

Boosting Your Post

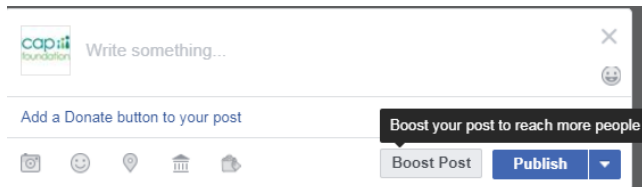
You can boost a new or existing post from Facebook by clicking the blue “Boost” button that shows up at the bottom of each post. A pop-up will open for you to navigate the Boost options and start targeting your audiences.

- Currently, boosts are only available for Pages on Facebook. An individual person will not be able to boost their personal posts. Host sites will need to create a post on their Institution’s page, Community page, etc.

Boost on an Existing Post



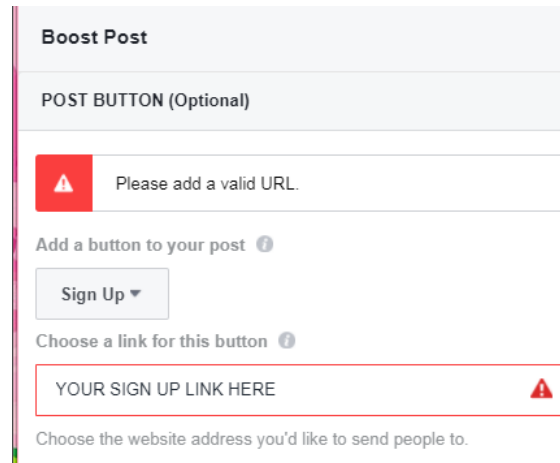
Boost on a New Post



Choosing What to Include

The boosted post should be detailed, but to-the-point. Use the image associated with the post to include some information to supplement the text that will be added. Stay within 100-150 words of text and 100 words or less on the image (see below for example post).

Facebook allows you to add a button to the post as a “call-to-action,” prompting viewers to click a button that allows them to learn more, sign up, etc. This is a great place to direct people to a survey or event page where they can RSVP and you can collect contact information.



Collecting Information and Links

Survey Monkey is a survey collector to ask pre-screening questions and collect contact info, preferred appointment times, etc. Eventbrite is an event-based website that can help pre-register women and also collect pre-screening and contact info.

Does your Boosted Post have:

- An eye-catching image
- A link to a landing page
- Who qualifies?
- When is the program?
- What screenings?
- Where is the program happening?
- How to register?

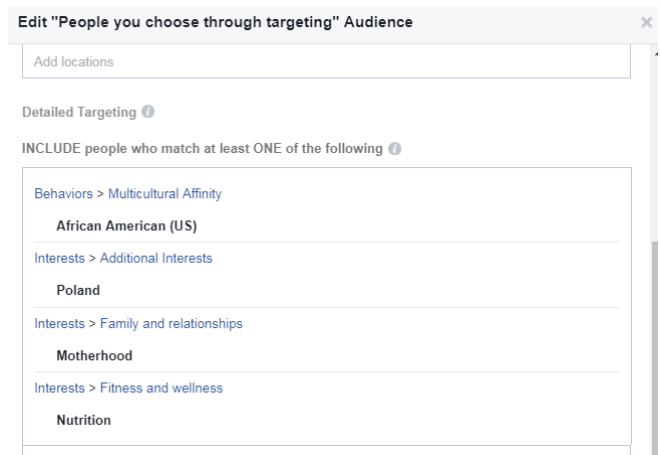
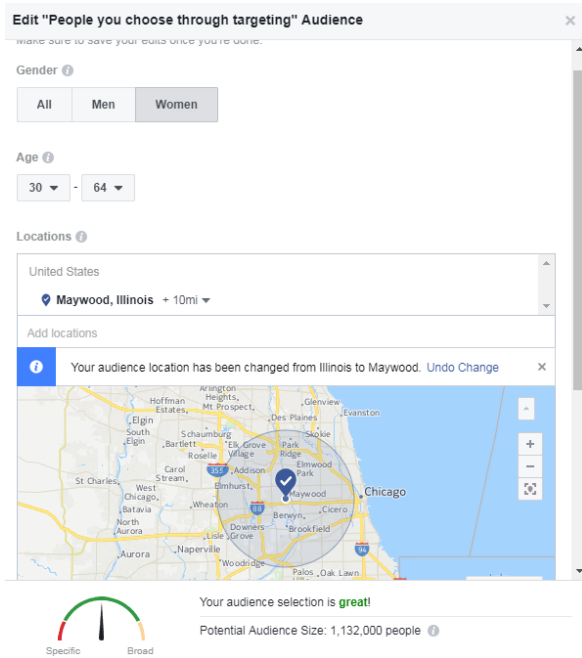
Example post:

Next Saturday (9/16), Central Hospital will be offering FREE breast and cervical cancer screenings to women ages 30-64 who are uninsured. Screenings are by appointment only. Call 888-584-7888 to make an appointment and verify eligibility, or visit www.test.link.com/STT

Selecting a Target Audience

Pages are able to target by gender, location and age range, as well as demographic and personal information by selecting “People you choose through targeting” as the audience. Other options include those who like your page, and those who like your page and their friends.

Females of a certain age living in a small radius from the site may yield a large audience; there are more than 1 million 30-64 year old women living 10 miles from Maywood, IL. By selecting more than just geographic and demographic information, this boosted post is able to reach a more specific audience.



The audience above could encompass a 31 year old African-American woman from Maywood who likes the hip-hop and R&B radio station in Chicago. Additionally, it could capture a 40 year old Polish mother who has liked a Polish grocery store in the surrounding area. Additionally, these people might be likely to share the post themselves with their personal Facebook networks.

Choosing a Budget & Duration

Facebook will prompt you to enter a budget and a desired timeframe for the boosted post to show up. Choosing *when* to boost a post is definitely audience-specific and may differ from site to site. Additionally, settling on a budget may depend on how many people you want to boost the post to, how close to your target registration you are, and how far out from the program you are.

BUDGET AND DURATION

Total budget ⓘ

\$100.00 USD

Estimated People Reached ⓘ

7,600 - 20,000 people of 570,000

Refine your audience or add budget to reach more of the people that matter to you.

Duration ⓘ

1 day **7 days** 14 days

Run this ad until

You will spend an average of **\$14.28** per day. This ad will run for **7 days**, ending on Sep 12, 2017.

Suggested Boost Time & Duration

Boost 1: Capture the early-birds and get the word out about the program, at least 6 weeks in advance of the program.

- Boost for the one week or two week option to get a wide spread of users.

Boost 2: Boost registration toward the end of the registration period and overbook the program to account for no-shows.

- Boost for a shorter time frame to ensure that the message is being seen often by many people.
- Select your audience based on any gaps in registration numbers so far; segment to a younger or older audience if many people from one age group have already registered and the program needs older/younger patients as well.

Resources

www.canva.com - Tool to design graphics, banners, flyers and more. Use a template or create your own designs.

www.eventbrite.com - Create and list your program; use the registration feature to capture pre-registration information from potential patients.

www.surveymonkey.com - Design a survey or pre-screener to collect information about potential patients.

Denise Kainrath- CAP Foundation Operations Manager DKainra@cap.org 847-832-7718

CAP Foundation Facebook- <https://www.facebook.com/capfndn/>

CAP Foundation Twitter- <https://twitter.com/CAPFndn>

APPENDIX 3 – SAMPLE FLYER TEMPLATE



Prevention and Health Education
 free cancer screenings and health education
 for uninsured and underinsured women



Opportunity to receive FREE:

- Clinical pelvic exam
- Cervical cancer screening (Pap test), ages 21–64
- Additional treatment services available
- Clinical breast exam
- Mammogram (age appropriate), ages 40–64
- Same-day test results
- HPV test

Other FREE programs and services offered:

- Health education resources
- Preventative screening
- HPV vaccine
- Limited children's activities
- Learn about the health care marketplace

*Women should expect to wait two to three hours for their test results.

SPEND THE DAY WITH US!

Saturday, May 19, 2018

Montefiore Imaging Center
 3400 Bainbridge Avenue
 Bronx, NY 10467

**Registration now
 open! 718-920-4600**

How does See, Test & Treat work?

Every See, Test & Treat offers free screenings for both cervical and breast cancer.

Cervical cancer is preventable, and breast cancer can be treated when it is diagnosed early.

Women receive their results on the same day— removing an obstacle that keeps many women from following through on preventive care. For a woman who works two jobs with inflexible schedules and has limited options for childcare, simply getting back to the hospital for a second visit to receive test results can be a challenge. This is why it is so important to plan your day to allow you to wait for your test results.

Cervical and breast cancer screenings are just the beginning. Every See, Test & Treat includes additional health services that respond to the unique needs of its community. Every woman who shows up for screenings can spend the whole day learning how to take charge of her own health and wellbeing.

Every woman has the chance to review her results in person with a clinician. This unique dialogue turns the scariest part of health care—waiting for results from a potentially life-changing test—into one of the most welcoming, supportive and educational. Through See, Test & Treat, women better understand their own health care and how to ask questions of their providers.



APPENDIX 4 – SAMPLE PROGRAM WORK PLAN

Based on a 10-month planning process

| Determine Eligibility | Complete Pre-Screening Questionnaire to determine if you are ready to host a See, Test & Treat (STT) program | |
|------------------------------|--|---------------------|
| Month 1 | Action | Notes/Status |
| | Discuss screening needs of community (breast and cervical cancer screening, etc.) – Identify population at risk | |
| | Discuss market to be served (Hispanic, Chinese, African American, etc.) | |
| | Identify timing for the event that works best for community. Consider holidays, weather, etc. | |
| | Begin to identify possible locations to hold the program | |
| | Confirm support of your institution/organization to host a one- day screening program to provide free cervical and breast screening to underserved women | |
| | Confirm support from the following areas: 1. Hospital/Community Health Center Administration 2. Medical Director 3. Pathologist / Pathology Department 4. Gynecologist / Gynecology Department 5. Radiologist / Radiology Department 6. Laboratory | |
| Month 2 | Action | Notes/Status |
| | Identify See, Test and Treat Working Group | |
| | Confirm program date with providers and Working Group | |
| | Hold kick-off meeting | |
| | <ul style="list-style-type: none"> • Determine meeting frequency • Develop template agenda and work plan for Working Group meetings Develop contact sheet with names and contact information for Working Group | |
| | Begin to identify testing services offered | |
| | Discuss event logistics – flow of event, timing | |
| | Begin to identify registration process to accommodate preregistered patients and walk-ins | |
| | How will the patients navigate the program | |
| | How will abnormal results be managed [Cervical and Breast] | |
| | Begin to identify vendors who could possibly donate supplies, as well as partners (Susan G. Komen for the Cure, American Cancer Society) | |
| | Begin to identify possible education, food, and other activities | |

| | | |
|----------------|--|---------------------|
| | Begin to identify need for interpreters | |
| | Develop a list of supplies needed (e.g. gloves, gauze, etc.) | |
| Month 3 | Action | Notes/Status |
| | Discuss Licensing and Credentialing | |
| | Discuss Insurance Advocate Position | |
| | Confirm rooms for program | |
| | Finalize list of tests that will be offered | |
| | Finalize the number of vendors needed for health fair | |
| | Begin to identify program materials needed: banner, signage, etc. | |
| | Identify number volunteers and roles (e.g. runner, greeters, insurance advocates, etc.) | |
| | Continue to contact vendors about supplies | |
| Month 4 | Action | Notes/Status |
| | Begin to assign people to volunteer positions | |
| | Begin to create a floor plan | |
| | Draft template letter to invite local politicians, community leaders, patient advocates or special guests | |
| | Begin contacting identified health fair vendors, partner, and vendors to donate supplies | |
| | Continue to work on program logistics | |
| | Begin developing program agenda | |
| Month 5 | Action | Notes/Status |
| | Develop media list: magazines; newspapers, including health reporters and calendar editors; radio; television; Internet; social media outlets; in-house publications, etc. | |
| | Develop media alert for broadcast media | |
| | Finalize interpreters | |
| | Confirm registration telephone number and process | |
| | Confirm food and other activities | |
| | Confirm partners and vendors who will be donating supplies | |
| | Create and send a SAVE THE DATE postcard | |
| Month 6 | Action | Notes/Status |
| | Begin to develop STT flyers | |
| | Begin to develop press release for long-lead magazines | |
| | Continue to develop program agenda | |
| | Develop patient appointment reminder postcards, if necessary | |

| Month 7 | | |
|----------|---|--------------|
| Month 7 | Action | Notes/Status |
| | Finalize STT flyers (approval needed from other sponsors) | |
| | Finalize program signage, banners, etc. | |
| | Distribute press releases to magazine and any publications with a long-lead time | |
| Month 8 | | |
| Month 8 | Action | Notes/Status |
| | Distribute STT flyers at local churches, schools, stores in community; weekend markets, etc. | |
| | Begin scheduling patient visits | |
| | Create volunteer schedule | |
| Month 9 | | |
| Month 9 | Action | Notes/Status |
| | Call patients to remind them about their appointments; send reminder postcards | |
| | Order food | |
| | Distribute press releases | |
| | Provide full volunteer list to CAP Foundation (for certificates of appreciation) | |
| | Schedule day and time to hold a program debrief meeting with all volunteers and the CAP Foundation | |
| | Hold final planning meeting and program walk-through | |
| Month 10 | | |
| Month 10 | Action | Notes/Status |
| | Walk through the program and patient flow with clinical partners and volunteers | |
| | <ul style="list-style-type: none"> • Confirm patient flow plan with entire team • Confirm volunteer flow; day of program check-in, roles, assignments, etc. | |
| | Confirm education plan and materials are prepared | |
| | Go through pre-program list of supplies and work flow requirements | |
| | Confirm healthy food orders are correct and scheduled | |
| | Final confirmation that laboratory services are secured | |
| | <ul style="list-style-type: none"> • Confirm specimen processing logistics • If applicable, ensure courier services are scheduled | |

| Day of Program (before patients arrive) | Action | Notes/Status |
|--|---|--------------|
| | Adhere to established patient flow plan | |
| | <ul style="list-style-type: none"> • Patient registration; patients must fill out registration forms, media release • Patient waiting areas • Pelvic and a clinical breast exam • Educational offerings • Healthy meal(s) • Results | |
| Post Program | Action | Notes/Status |
| | Create summary of patient results | |
| | Provide patient data to CAP Foundation | |
| | Send Thank You letters / emails to volunteers and program partners | |

APPENDIX 5 – SAMPLE PATIENT REGISTRATION FREQUENTLY ASKED QUESTIONS & REGISTRATION FORM

SEE, TEST & TREAT FREQUENTLY ASKED QUESTIONS (FAQ'S)

Event date:

Event time:

Location:

Transportation/Parking:

What is the See, Test & Treat program?

See, Test & Treat is a free cervical and breast cancer screening program for women who encounter financial, linguistic, social and cultural barriers to health care. Specifically those without health insurance, have not been exposed to health education or preventive disease screenings, and do not have a medical home.

In a single-day, culturally appropriate program, women receive a pelvic and Clinical Breast Exam, a Pap test with same – day results, a mammogram with same-day or prompt results, connection to follow-up care plans, interpretive services, translated educational sessions and materials and a healthy meal.

Through community and culturally appropriate education, individuals, families, and entire communities learn to navigate through the health care system. They also learn about the positive impact of healthy lifestyle and behaviors for prevention of disease and improved health.

Will I need to show that I'm a resident or citizen of the United States?

No

Is there an age limit to attend to program?

Yes, 21-65 yrs. old.

I do not speak English, will an interpreter be present?

Preferred language will be asked during registration in order to schedule interpreters.

Any costs for services?

No, all services on the day of the event are free of charge.

What services will be provided?

Pap test by a physician

Clinical Breast Exam by a physician

Mammogram if over 40 yrs. of age

Health education

SHOULD I PREPARE FOR TESTS IN ANY WAY?

What is a Pap test?

The Pap test also called a Pap smear, checks for changes in the cells of your cervix. The cervix is the lower part of the uterus (womb) that opens into the vagina (birth canal). The Pap test can tell if you have abnormal (unhealthy) cervical cells, or cervical cancer.

How can I prepare for a Pap test?

For two days before the test do not:

- Use tampons
- Use vaginal creams, suppositories, or medicines
- Use vaginal deodorant sprays or powders

- Have sex

- Douche

Should I get a Pap test when I have my period?

No. Doctors suggest you schedule a Pap test when you do not have your period. The best time to be tested is 10 to 20 days after your period.

What will happen if my Pap test is abnormal?

The physician will inform you if need to have further testing on the day of the event. If you need further testing or treatment on the day of the event, a physician from xxxxx will provide follow-up care.

What is a Screening Mammogram?

A mammogram is a low-dose x-ray exam of the breasts to look for changes that are not normal. The results are recorded on x-ray film or directly into a computer for a doctor called a radiologist to examine.

A Screening Mammogram allows the doctor to have a closer look for changes in breast tissue that cannot be felt during a Clinical Breast Exam.

How can I prepare for a Screening Mammogram?

If you are 40 years of age or older and haven't had a mammogram in the last year, the physician may ask you to have a mammogram. Do not wear deodorant and bring the films from the last mammogram with you.

Will there be a cost for any abnormal results or follow-up treatment?

Women that are eligible will be enrolled in a state cancer screening program or can meet with a health insurance marketplace navigator to enroll in a plan.

Do I need to be present for the entire event?

Additional activities are available to engage you and your family members (**mention activities available for patients at your event**). You must stay until you have received all results and if you require follow-up treatment. Expect a 2-3 hr. wait.

When will I receive my results?

Waiting times for final results will be available anywhere from 2 to 3 hours after your screening.

Will my results be shared with anyone?

No, the clinical information will be kept at xxxxx

Will food be available?

Yes, healthy light refreshments will be available.

Can I bring my child/children on the day of the event?

Yes, we will have children's activities available.

I do not have a primary care doctor; will I be able to find a primary care appointment or a doctor at this event?

We will have representatives available at the event to connect you with information to access a doctor.

Will you offer this event on another date aside from INSERT DATE?

No, not at this time. Services will be provided only on this date, an appt. can't be scheduled for a future date.

Once STT appt. slots are full, women interested in obtaining a pap, Clinical Breast Exam and/or Screening Mammogram may call the INSERT NAME at: xxx-xxx-xxxx

SAMPLE PATIENT PRE-REGISTRATION FORM

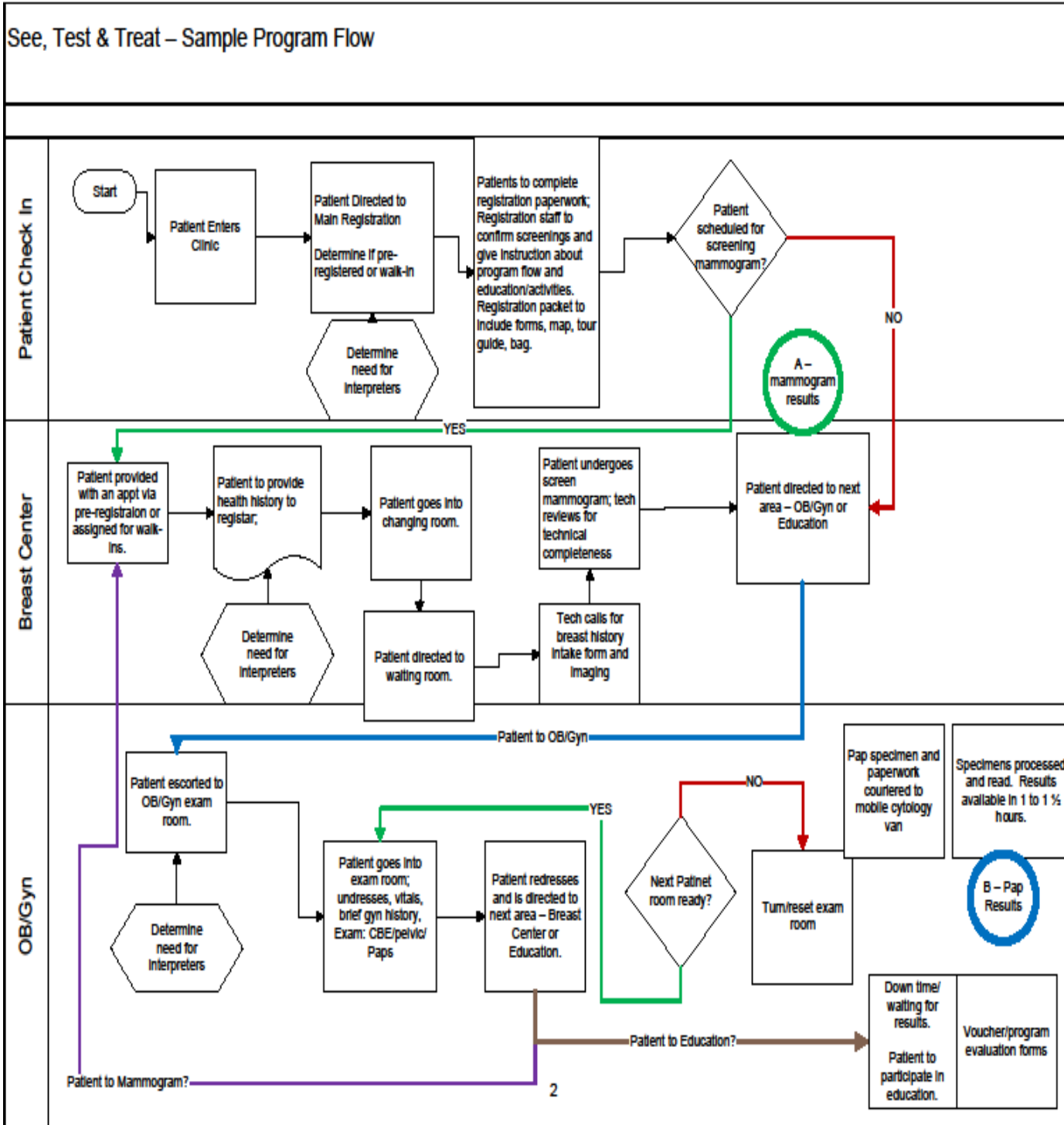
Today's date: _____
(First letter of last name)

1. Are you between the ages of 21 – 65? Yes or No (if no, not eligible for the program)
2. Do you have health insurance? Yes or No

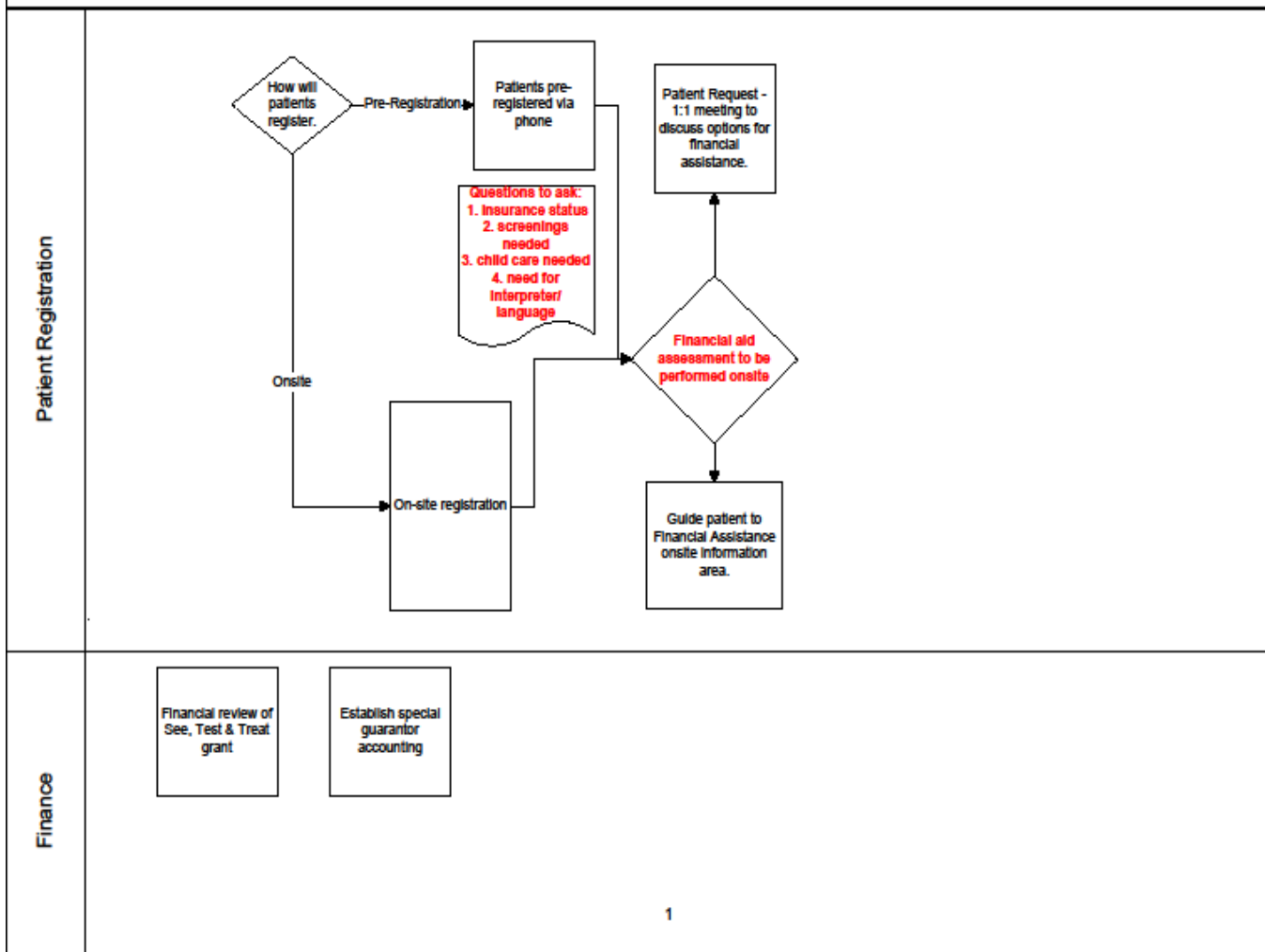
| | | |
|---|---|-------------------|
| Name (last, first) | | |
| Age & DOB (mm/dd/yyyy) | | |
| SS# (if no SS#, patient is still eligible for services) | | |
| Address (street, city, zip) | | |
| Phone: Alternate Number: | | |
| Preferred Language | Interpreter Needed? <input type="checkbox"/> YES <input type="checkbox"/> NO | If YES, language: |
| Marital Status | <input type="checkbox"/> Never Married <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced | |
| Have you or a family member ever been diagnosed with cervical cancer? If YES | What treatment did you have? Where did you have the treatment? What was the result? If a family member, who? | |
| Have you or a family member ever been diagnosed w/ breast cancer? | | |
| Race | <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> American Indian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Two or more races <input type="checkbox"/> Other | |
| Emergency Contact | Name | |
| | Relationship | Phone Number |
| When was your last Pap test? | PAP Testing Eligibility <ul style="list-style-type: none"> Women ages 21 to 65 who: Never had a Pap test No Pap test within the last three years (INSERT MONTH/YEAR) Abnormal Pap test result Additional Question: Have you had a hysterectomy? <input type="checkbox"/> Yes or <input type="checkbox"/> No Comments Pap test eligible? <input type="checkbox"/> Yes or <input type="checkbox"/> No | |

| | |
|--|--|
| <p>Have you received HPV test / screening? (<i>Note: This is different from the HPV vaccine</i>)</p> | <p>HPV screening eligibility</p> <ul style="list-style-type: none"> • Women ages 30 to 65 who: • Never had a HPV test/screening • No HPV test/screening within the last five years (INSERT MONTH/YEAR) • Abnormal Pap presenting with ASCUS results <p>HPV test eligible? <input type="checkbox"/> Yes or <input type="checkbox"/> No</p> |
| <p>When was your last mammogram?</p> <p>Criteria? Exclude those presenting with visible lumps or lesions</p> | <p>Mammogram Eligibility?</p> <ul style="list-style-type: none"> • Women 40 and over • No mammogram within the last year (INSERT MONTH/YEAR) • No visible lumps or lesions <p>Additional Questions:</p> <p>1. Are you 40 years of age or older? Yes – eligible No – if less than 40; must have an order from a doctor. Otherwise – not eligible</p> <p>2. Has it been at least a year since your last mammogram? Yes – eligible No – not eligible</p> <p>3. Do you have breast implants? Yes – not eligible No – eligible</p> <p>4. Are you pregnant or breastfeeding? Yes – not eligible No – eligible</p> <p>5. Are you having any problems such as lumps or dimpling? Yes – refer to a doctor for diagnostic exam* No – eligible *Diagnostic exam is free if they qualify for financial assistance</p> <p>6. Have you ever had breast cancer? No – eligible Yes – Have you received a mastectomy or a lumpectomy? If Yes to a mastectomy – the healthy breast can be screened If Yes to lumpectomy – cannot be screened</p> <p>Mammogram Eligible? <input type="checkbox"/> Yes or <input type="checkbox"/> No</p> <p>Mammogram only (no Pap): <input type="checkbox"/> Yes or <input type="checkbox"/> No</p> <p>If Yes, must bring: old films (where done), do not wear deodorant or powder on day of event.</p> |
| <p>Appointment Time</p> | <p>AM <input type="checkbox"/> 8:00 <input type="checkbox"/> 8:15 <input type="checkbox"/> 8:30 <input type="checkbox"/> 8:45 <input type="checkbox"/> 9:00 <input type="checkbox"/> 9:15 <input type="checkbox"/> 9:30 <input type="checkbox"/> 9:45 <input type="checkbox"/> 10:00 <input type="checkbox"/> 10:15 <input type="checkbox"/> 10:30 <input type="checkbox"/> 10:45 <input type="checkbox"/> 11:00 <input type="checkbox"/> 11:15 <input type="checkbox"/> 11:30 <input type="checkbox"/> 11:45 <input type="checkbox"/> 12:00PM</p> |
| <p>Determine eligibility for state /federal cancer screening program criteria?</p> | <p>Eligible for state/federal program? <input type="checkbox"/> Yes or <input type="checkbox"/> No</p> <p>Reminder: Patient can still receive services if not eligible for state/federal program</p> |

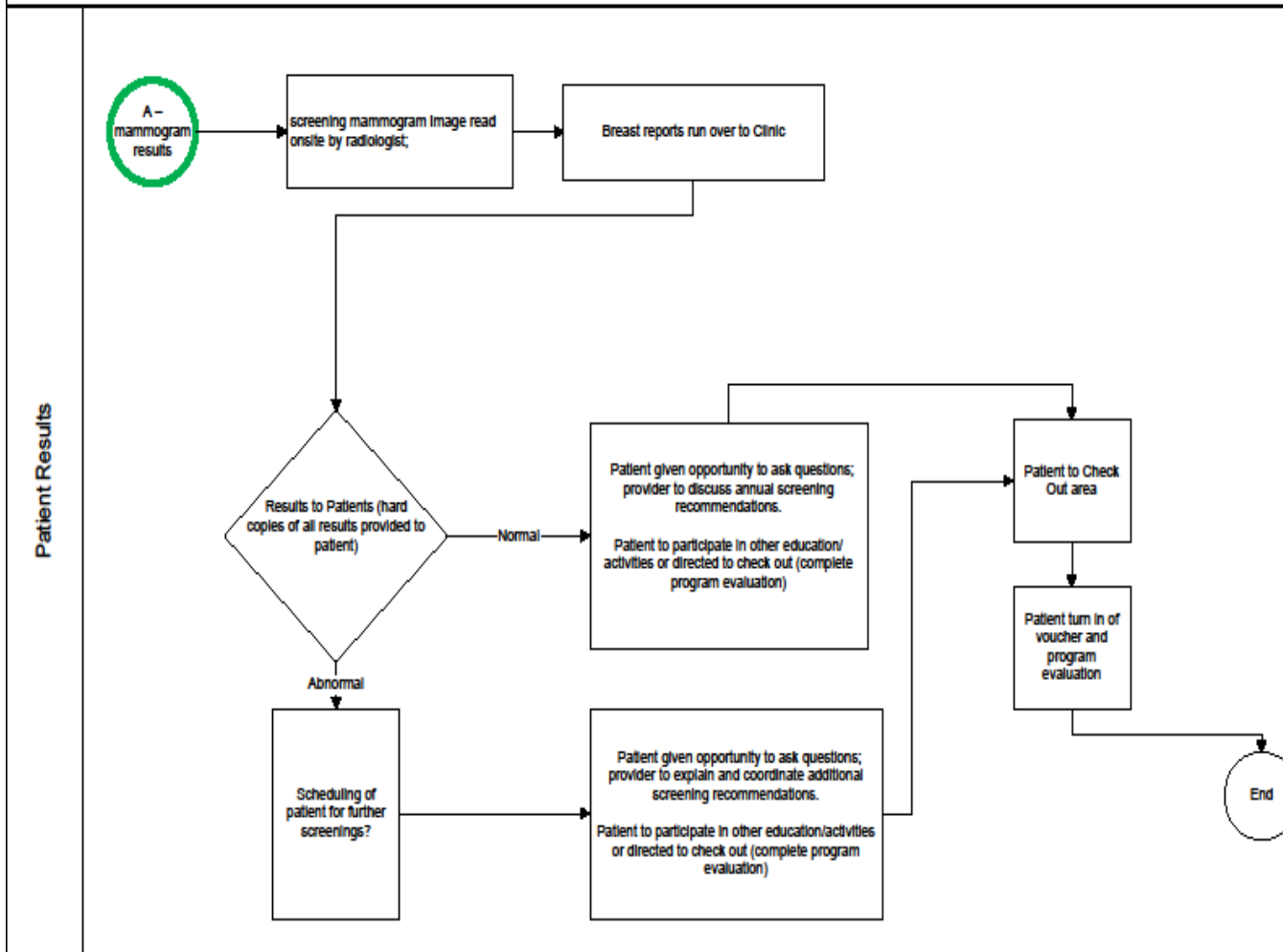
APPENDIX 6 – SAMPLE PROGRAM WORKFLOWS



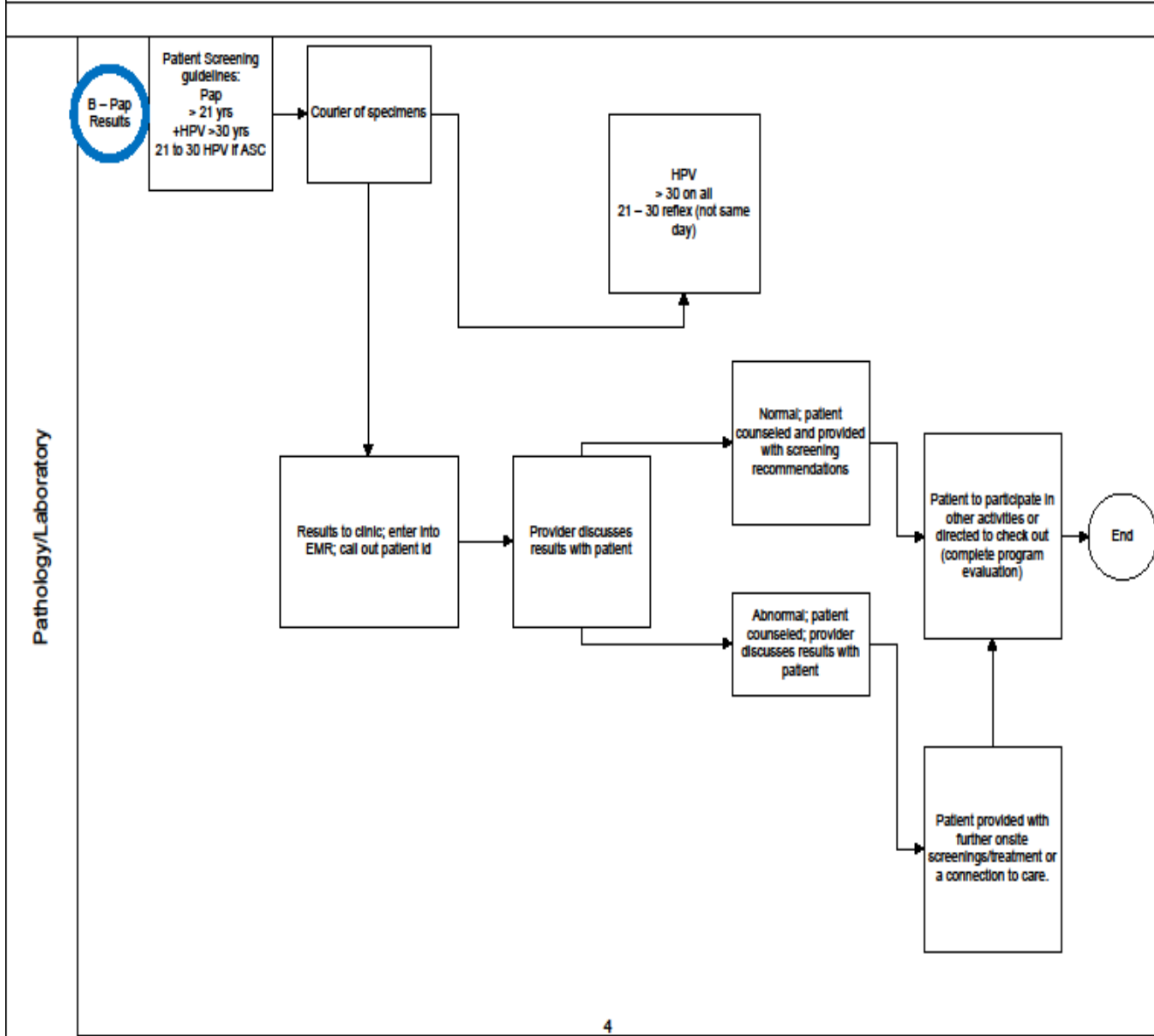
See, Test & Treat – Sample Patient Registration Flow



See, Test & Treat – Sample Screening Mammography Flow



See, Test & Treat – Sample Pap Test Processing Flow



See, Test & Treat – Sample flows for Marketing / Education / Children's Activities

| | |
|--|---|
| <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Promotional /Marketing Matrix</p> | <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 5px; width: 15%;">Develop promotion plan and tactics</div> <div style="border: 1px solid black; padding: 5px; width: 15%; transform: rotate(45deg); transform-origin: center;">Identify essential elements for flyer/ post card</div> <div style="border: 1px solid black; padding: 5px; width: 15%; color: red;">Begin program promotion 6-8 weeks in advance</div> <div style="border: 1px solid black; padding: 5px; width: 15%;">Printed materials (ACS – translated); guides to take patients throughout event</div> <div style="border: 1px solid black; padding: 5px; width: 15%;">Languages: Spanish, Vietnamese, English</div> <div style="border: 1px solid black; padding: 5px; width: 15%;">Onsite logistics: signs (informational and directional)</div> </div> |
| <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Education</p> | <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 5px; width: 20%;">Non Clinical activities happening throughout the day</div> <div style="border: 1px solid black; padding: 5px; width: 60%;">Connect with Community Partners; and provision of education (Breast Health, GYN Health (cervical and bone health; what is a Pap), skin safety.</div> </div> |
| <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Kids Area</p> | <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 5px; width: 20%;">Kids activity area –</div> <div style="border: 1px solid black; padding: 5px; width: 20%; transform: rotate(45deg); transform-origin: center;">Determine a sign in/ sign out process</div> <div style="border: 1px solid black; padding: 5px; width: 20%;">Activities: TBD...</div> </div> |

APPENDIX 7 – SAMPLE PROGRAM MAP AND ACTIVITY CARD



Health Ticket



April 14, 2018 | 10 a.m. - 3 p.m.
Women's Health Center | 5320 Elliott Drive, Ypsilanti, MI 48197



Imaging - 1st Floor



Mammogram

Appointment Time



Breast Health Education



Gyn Clinic - Suite 2110 (2nd Floor)



Gyn Exam

Appointment Time



Mammogram/Pap Results - Suite 203



Health Insurance - 2nd Floor



Meet with Patient
Financial Services



Education - 2nd Floor



Receive Patient Education Packet



Meet the Doctors



Self Breast Examination Teaching



Community Resource Room (2nd Floor)



Internal Medicine Screenings



Community Resources



Nutrition - Kitchen (2nd Floor)



Cooking Information and Demonstrations

PCU Label _____

Pager Number _____

Be **Responsible**

APPENDIX 8 – PHOTOGRAPHY AND MEDIA RELEASE

PHOTOGRAPHY / VIDEOGRAPHY

Taking pictures or filming of the participants and volunteers during the program is a visible way to tell a program's story and capture the faces of the community you serve. The pictures/videos may be used to showcase the program's and the facility's outreach to the community.

Work with your Public Relations/Communications department to determine a patient media strategy to capture stories and interviews.

All volunteers, clinicians, and patients are to complete a CAP/CAP Foundation media/photo release form. Participants and volunteers may request not be photographed. For those who do not / will not complete this form, there must be a procedure in place to identify them to the photographer.

Any and all photographs/videos captured by the CAP/CAP Foundation or a representative of are the property of the organization.

Written permission is required before reproducing any CAP/CAP Foundation photographs for any purpose.

If a host site engages its own photographer, this individual must follow all STT branding guidelines. This information will be provided upon request.

MEDIA RELEASE FORM

College of American Pathologists

I (please print your name) _____, give the **College of American Pathologists** and the **College of American Pathologists Foundation**, the absolute right and permission to use my likeness on its Web sites, in social media channels, and in its promotional videos, video news releases (VNR), satellite media tours (SMT), publications, promotional materials, and publicity efforts. I understand that my likeness, which may or may not include my name and other identifiers, may be used on the CAP Web site, the CAP Foundation Web site, and in a VNR, SMT, publication, print ad, direct-mail piece, electronic media (e.g. video, DVD, Internet), or other form of promotion.

I hereby waive any and all rights to inspect or approve any of the finished version(s), including a written copy that may be created in connection therewith.

I understand that if my photograph is posted on the CAP's Web site or on the CAP Foundation's Web site, the image can be downloaded by any computer use. I agree to waive any claim I may have against the following entities:

- The College of American Pathologists
- The College of American Pathologists Foundation
- The photographer and/or producer
- All staff of the College of American Pathologists and the College of American Pathologists Foundation

I am of full age. I have read this release and give the College of American Pathologists and the College of American Pathologists Foundation permission to use my likeness as it deems appropriate.

Name _____ Date _____

Signature _____

Address _____ City _____ State _____ Zip _____

Telephone Number _____ Email Address (internal use only) _____

Media Release & Waiver of Liability

Media Release

I authorize the College of American Pathologists, the College of American Pathologists Foundation, and HOST INSTITUTION (hereinafter collectively referred to as the “Sponsors”), the absolute right and permission to take photographs, films, audio and/or video, interview me, or publish article(s) or information about me for the purpose of:

- Publications, fundraising, publicity, promotion, web site or advertising for the Sponsors or affiliated entities.
- “Marketing” as defined in the Federal Privacy Regulations.
- Research/education programs.
- Publication and newspapers, printed media, radio, television, web site and all types of electronic communication media.
- Placement in a central repository for the use by the Sponsors, i.e. reuse.

I realize that I will not be compensated in any way for the taking or use of photographs, films, audio and/or videotapes, or the publishing of any article(s) or information about me. I understand and agree that this Authorization is valid unless I cancel it in writing (as described in the next sentence) for as long as the Sponsors (or any organization that succeeds it) stay in business. I understand that I may cancel this Authorization at any time (as long as the Sponsors have not taken action in reliance on this Authorization) by certified mail, return receipt requested the Sponsors.

I understand that neither the Sponsors nor any of their affiliated health care providers can make me sign this Authorization as a condition to getting treatment, making payments on any bills, or gaining enrollment or eligibility in any health insurance plan, unless the Federal Privacy Regulations allow it.

Waiver of Liability

I understand, acknowledge and agree to the following:

- I am voluntarily participating in the See, Test & Treat program taking place on INSERT DATE.
- I understand and agree that the screenings I am participating in treatment rendered are being conducted by volunteer physicians and other health care professionals/assistants in my best interest, for the benefit of my health, and are preliminary in nature only.
- I understand that the Sponsors and the participating volunteers make no claims or guarantees with respect to the accuracy of these screening evaluations due to the limited nature of the services provided.
- I agree that it is my responsibility to follow up on any recommendations or diagnoses that are made during these screenings, and obtain follow up treatment from my personal physician.
- I agree to indemnify and hold harmless the participating Sponsors and volunteers from any and all claims, liability and expenses (including attorney fees and other costs) arising out of advice given or not given, tests conducted or any other action or inaction on the part of the participating Sponsors or volunteers, before, during or after this health screening event.
- HIPAA Notice Acknowledgment: I have received or I have been provided the opportunity to receive a copy of the “Notice of Privacy Practices” that explains when, where and why my confidential health information may be used or shared. I acknowledge that the Sponsors, affiliated organizations and their staff may use and share my confidential health information with others in order to treat me or to arrange for payment of my bill, and for issues that concern the Sponsors operations and responsibilities.

- I have read this media release and give the Sponsors permission to use my likeness as it deems appropriate.
- I have read this waiver of liability; I understand the provisions and my waiver is made knowingly and voluntarily.
- I agree that I have received a signed copy of this Authorization.

Name Date

If minor, name of child Date of Birth Relationship

Signature

Address City State Zip

Telephone Number

Email Address (internal use only)

APPENDIX 9 – SAMPLE VOLUNTEER SUPPORT GUIDE

| See, Test & Treat Sample Volunteer Guide for Cervical and Breast Cancer Screening | | | |
|--|---------------------------------------|----------------------------|---|
| Category (Personnel) | Number of Suggested Volunteers | | Notes |
| | Screening 50 Women | Screening 100 Women | |
| Patient On-Site Registration (Check In / Out) | 4 | 4 | |
| Patient Navigators | 3 | 6 | |
| Patient Greeters | 5 | 10 | |
| Staff Project Manager | 1 | 1 | |
| On-Site Coordinator | 1 | 1 | |
| Children’s Activity Coordinator | 1 to 2 | 1 to 2 | Based on need |
| Food Coordinator | 1 | 1 | |
| Supply Coordinator | 1 | 1 | |
| Cytotechnologist and Cyto Prep Tech | 4 | 6 | |
| Cytopathologist | 2 | 2 | |
| Pathologist | 2 | 2 | |
| Pathology Residents | 6 | 6 | Assist with education; engage patients in viewing healthy and unhealthy cells via two-headed microscope |
| Specimen Runners/Couriers | 2 | 3 | |
| Pathology/Laboratory Volunteers | 3 | 6 | |
| OB/GYN Administration | 4 | 6 | |
| OB/GYN | 6 attending physicians | 10 attending physicians | Perform exams and provide patient results |
| OB/GYN Residents | 6 | 6 | Assist with patient prep/exam; taking patient history |
| Nurse (NA/RN/MA) | 6 | 10 | |
| Colposcopy/LEEP (Provider) | TBD | TBD | Based on need |
| Colposcopy/LEEP (Nurse) | TBD | TBD | Based on need |
| Mammography Registration | 1 | 3 | |
| Radiologist | 1 | 1 | |
| Radiology Technician | 2 | 3 | |
| Phlebotomist | 1 | 1 | |
| Financial Aid | 2 | 3 | |
| Insurance Navigators | 1 to 2 | 1 to 2 | |
| Education | TBD | TBD | Based on education offered |
| Interpreters | TBD | TBD | Based on need |
| Total | 58 | 82 | |

APPENDIX 10 – SAMPLE VOLUNTEER RECRUITMENT FORM AND JOB DESCRIPTIONS



SAMPLE VOLUNTEER RECRUITMENT FORM

ABOUT THE SEE, TEST, & TREAT

See, Test, & Treat event brings together a team of pathologists, providers, health care professionals, and volunteers in order to deliver no-cost cervical and breast cancer screenings. The patient population to be screened includes those that are uninsured/underinsured, unable to qualify for any state program, and in need of cancer screenings. As a valuable member of our community, we would like to invite you to join us in participating in this year's See, Test, & Treat event.

DATE
Location
Time

Our goal is to provide (screening goal) qualifying individuals a Pelvic Exam, Pap test, a clinical breast exam, screening mammography, same-day results, health education and a connection to care. **We need your help!** Your participation will directly support event participants with their journey towards health and wellness.

VOLUNTEER ROLES

1. **Greeters:** Greet participants when they walk in and briefly explain the overview of the day. Direct each patient to check in.
2. **Event Navigators:** Help navigate patients through the entire event. Be available to answer any logistical questions including the event flow, where things are located, when things are happening, transportation to mammogram process, food location, and where they will get their results.
3. **Food Volunteers:** Help set up food when it arrives, keep food/water stocked, help hand out food to participants, and make sure that all trash is picked up.
4. **Kids Activity Volunteers:** Interact with children in the kid's zone, bringing out different activities and monitoring play. Will NOT be responsible for any children and may not let parents leave their child alone.
5. **Volunteer Check-In:** Runs check-in and check-out for volunteers, assists with anything volunteers need, ensures all areas are covered with a volunteer, and alerts CDHC staff to any needs.

PLEASE FILL OUT THE ATTACHED VOLUNTEER APPLICATION When you have completed and signed the Volunteer Application form, please return it by DATE to:

**Volunteer Coordinator
name and contact
information**

See, Test, & Treat
DATE
LOCATION
TIME

VOLUNTEER APPLICATION

1. Contact Information

Name: _____

Cell Phone: _____

Work Phone: _____

Email: _____

2. Availability *Please mark one*

- Morning 7:30am – 12:00pm
- Afternoon 12:00pm – 4:00pm
- All Day 7:30am – 4:00pm

3. Interests *Please mark all areas you are interested in volunteering*

- Event Navigator
- Kids Activity Volunteer
- Food Volunteer
- Volunteer Coordinator
- Greeter

4. T-shirt Size *Small – 3XL*

- Small
- XL
- Medium
- 2XL
- Large
- 3XL

5. Training Session *Please select the one you will attend*

- DATE/TIME
- DATE/TIME
- Cannot Attend Either Training Session

6. Agreement and Signature

Name (printed): _____

Signature _____

Date: _____

7. Return This Volunteer Application by DATE to:

Volunteer Coordinator
name and contact
information

APPENDIX 11 – SAMPLE VOLUNTEER ORIENTATION PACKET OUTLINE

Include the following information in your See, Test & Treat Volunteer Packet

1. Date/Time/Location for Volunteer Orientation
2. See, Test & Treat Program Location and Date
3. Program Description and Goals
4. Any Program Highlights (program flyer, article/press release, special guests, activities, etc.)
5. Volunteer Arrival Time
6. Volunteer Check In and Check Out areas
7. Volunteer Lounge location
8. Core Contact Team – Contact List

| Name | Role/Area of Expertise (who to call for what) | Cell Phone |
|------|---|------------|
| | | |
| | | |
| | | |

9. Program Map (where things are taking place – screenings, education, food, results, etc.)
10. Schedule of Events (activity, time and location)
11. Volunteer Expectations/Roles/Responsibilities (for example):
 - Act as a program ambassador at all times.
 - Wear dark color pants, scrubs or jeans for the event and comfortable shoes. You will be provided with a t-shirt.
 - Wear a name tag if you have one; otherwise one will be provided.
 - Introduce yourself to patients. Explain who you are and why you are here.
 - Approach all patients, volunteers, program partners with respect. A gentle approach with patients works best; ask a volunteer to help you have a conversation with a patient if needed.
 - Refrain from discussing patient information in public (HIPPA); patients may volunteer more information than you need/want to know. Always be professional.
 - Pitch in as needed; you may be asked to do something outside of your normal role.
 - Communicate with your colleagues – share information about what is happening during the day.
12. List of General Rules for Volunteers to follow (for example):
 - Leave your area as originally set up, not removing or replacing equipment or supplies.
 - Use only main door to enter and exit the clinic, not using any other doors within the clinic
 - DO NOT USE any of the computers in the clinic, if you need internet services please find key personnel in your area.

APPENDIX 12 - SAMPLE DISCHARGE TEMPLATE

Today you underwent screening for cervical cancer. The cervix is the opening of the uterus or womb. Cancer of the cervix can be prevented by screening to look for abnormal cells that, if left untreated, could become cancer. Today you underwent the following tests:

- Pap smear – a scraping of cells that is reviewed under the microscope; your Pap smear result was:
 - Normal
 - Abnormal and you need to have further follow-up. You have an appointment scheduled on _____ at _____ am/pm at _____
 - Abnormal and you have had your follow up colposcopy already. Results will take 2 weeks to return and we will contact you. If you have any questions or problems please call _____ and ask for _____.

- HPV Testing – testing to see if you have been exposed to the HPV virus that is the cause of most abnormal pap smears and most cervical cancers. The results of your HPV test will take 1 – 2 weeks and we will contact you with the results. If the test is positive you may need to come in for further testing; even if your pap smear is normal.
 - Your final results will be sent to the address you provided

Today you underwent screening for breast cancer by having a screening mammogram.

A mammogram is a low-dose x-ray exam of the breasts to look for changes that are not normal. The results are recorded on x-ray film or directly into a computer for a doctor called a radiologist to examine.

A Screening Mammogram allows the doctor to have a closer look for changes in breast tissue that cannot be felt during a Clinical Breast Exam.

- Breast Imaging – Screening Mammogram:
 - No findings of concern; routine screening recommended
 - Follow-up mammogram or ultrasound recommend in 6 months – call _____ to schedule
 - Abnormal – Biopsy is schedule on _____ at _____
 - Exam not yet interpreted; your final results will be sent to the address you provided

Depending on the results of all of your tests, we will recommend either further testing or a repeat screening in 1, 3 or 5 years. We will let you know when you should follow up when all of your testing is complete.

Questions: Please contact us at:

APPENDIX 13 - SAMPLE ACTIVITY CARD AND PROGRAM EVALUATION

Visit Health Education; Participate and Get a Stamp – turn in the Activity Card and Program Evaluation when completed and receive a gift card.

Name: _____ Appointment Times(s) _____

| Health Activities | Stamp Here |
|--|------------|
| View slides under a microscope with a pathologist or health care worker | |
| Talk with a nurse and view flip charts featuring mammogram and pap smear education | |
| See, touch and feel anatomic breast and cervix models | |
| Watch a video to learn more about cervical health | |
| "Tell a friend" about cervical health presentation | |
| Spin the wheel to learn more about nutrition | |
| Learn why and how to quit smoking | |

Program Evaluation

Thank you for participating in today's See, Test & Treat® program and Health Education. Please complete the following program evaluation.

1. How did you hear about this event? (circle all that apply)
 - a. During a visit to a hospital or clinic
 - e. Radio
 - b. Flyer
 - f. Friend or family member
 - c. TV
 - g. Do not remember
 - d. Newspaper
 - h. Other (please specify): _____

2. Who is with you today? (circle all that apply)
 - a. I came alone
 - e. Adult daughter/son
 - b. Friend
 - f. Spouse
 - c. Mother
 - g. Partner
 - d. Sister
 - h. Child/children

3. How would you rate the information provided in the following health education: (Rate all – note Did Not Participate for activities you did not participate in)

| | | | | |
|---|-----------------|------------|----------------|------------------------|
| a. Education presented was easy to understand | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |
| b. Viewing slides under a microscope | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |
| c. Learning about pathologists | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |
| d. Flip chart education (breast/cervical) | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |
| e. Anatomic models (breast/cervical) | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |
| f. HPV video | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |
| g. Poster board/HPV: Tell a friend | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |
| h. Nutrition wheel | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |
| i. Smoking cessation/prevention | 4. Very Helpful | 3. Helpful | 2. Not Helpful | 1. Did Not Participate |

4. The health education programs increased my understanding of the following: (circle all that apply)

- | | |
|----------------------------------|---|
| a. Cervical cancer | e. Importance of regular health screenings |
| b. Breast cancer | f. Role of pathologists in diagnosing disease |
| c. HPV | g. Importance of health insurance coverage |
| d. Health nutrition and exercise | |

5. As a result of the information/education I received today, I will: (circle all that apply)

- | | |
|------------------------------|--|
| a. Perform self-breast exams | g. Eat more health foods |
| b. Get regular Pap tests | h. Schedule a follow-up visit with a doctor |
| c. Get HPV immunization | i. Share information with friends and family |
| d. Get regular mammograms | j. Make no changes to my behavior |
| e. Start an exercise routine | k. Other _____ |
| f. Reduce or stop smoking | |

6. Do you currently have health insurance? Yes or No

a. If **YES**, do you understand how to use your health insurance? Yes or No

b. If **No**, have you ever had health insurance? Yes or No

7. Did you receive information today about available health coverage/insurance options? Yes or No

8. Did you enroll in or apply for any of the following: (circle ONE response)

- a. Financial Aid or Charity Program
- b. State or Federal Program (women’s cancer screening program)
- c. Health Care Insurance Marketplace Exchange

Tell us what you liked and did not like about this event.

APPENDIX 14 – POST-PROGRAM DEBRIEF / VOLUNTEER SURVEY

Name: _____

Date: _____

1. Why did you volunteer:
2. What was your role/responsibility (please describe)?
3. Please rate the following:

| | EXCELLENT | GOOD | FAIR | POOR |
|-----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Program Planning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communication | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Organization | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Program Location/Facilities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

4. Describe three program strengths:

-
-
-

5. Describe three program weaknesses:

-
-
-

6. List three program opportunities:

-
-
-

7. If you were going to volunteer again; what would you do differently?

APPENDIX 15- PATIENT OUTCOMES WORKSHEET (DRAFT- FINALIZED VERSION WILL BE PROVIDED BY STAFF)

See, Test & Treat® is building momentum thanks to your efforts. Your dedication will bring more women vital cancer screenings.

Please help us evaluate the program and demonstrate its impact by supplying us with the following information:

Note: In the planning stages of your program please take a moment to review the requested data (General outcomes, Patient Demographics and Patient Knowledge/Attitude changes) prior to developing your data collection plan. Work with your team to identify where and how you can collect this data. We have suggested sources of each data point but this can be changed depending on what works best for your institution. It is suggested that for your patient data you work with IS personnel or your software vendor to determine how this information can best be retrieved from the patient’s EMR or EHR.

Program Host: _____

Program Location: _____

Date(s) of See, Test & Treat Program: _____

| GENERAL OUTCOMES OF SEE, TEST & TREAT PROGRAM | Where to collect this information from | DATA |
|---|---|-------------|
| # of registrations prior to event | Screening/Registration | |
| # walk-ins | On-site registration | |
| # of no shows | On-site registration | |
| Please list the top 5 places that clients heard about your program from: (Choices vary based on individual site’s survey) | Screening/Registration | |
| Total # of women screened for cervical or breast cancer at the event | Patient record | |
| Total # of individuals attending the event | Screening/Registration | |
| # Utilizing Transportation services (if applicable) | Program coordinator | |
| # Meeting with pathologists to look through microscope at cells | Resident pathologists conducting education | |
| # Health Education Topics offered at the program (please attach list) | Program coordinator/ Exhibitor registration | |
| # Exhibitors present at the program (please attach list) | Program coordinator/ Exhibitor registration | |
| # Other health care screenings offered (please attached list) | Program coordinator/ Exhibitor registration | |
| # Utilizing On-site Children’s Activities | Children’s activities coordinator | |
| # Non-Pathologist Volunteers participating in the program | Volunteer list | |
| # Non-Pathologist Volunteer hours | Volunteer feedback sheet, self-reported | |
| # Pathologist Volunteers participating in the program | Volunteer list | |
| # Pathologist Volunteer hours | Volunteer feedback sheet, self-reported | |
| # Women signed up for health insurance through a navigator at the See, Test & Treat program | Health Insurance Navigator report | |

| | | |
|---|---|---|
| # Women connected to a primary care provider at the See, Test & Treat program | Health Insurance Navigator | |
| PATIENT DEMOGRAPHICS | | |
| OF THE WOMEN WHO RECEIVED BREAST OR CERVICAL CANCER SCREENINGS AT YOUR EVENT: | Where to collect this information from | Data (enter N/A if not applicable) |
| # Who have never attended your hospital or clinic | Screening/Registration | |
| # Who have never attended a See, Test & Treat Event | Screening/Registration | |
| # Who are Underinsured (those who have some sort of health insurance but have still found that they cannot afford to go to the doctor in the past year) | Screening/Registration | |
| # Who have No Insurance | Screening/Registration | |
| # Who have not gone to a doctor in the last 12 months | Screening/Registration | |
| # Women receiving mammograms who have never had a mammogram | Screening/Registration | |
| # Who have never had a pap test | Screening/Registration | |
| # Women receiving mammograms who have not had a mammogram in 5 or more years | Screening/Registration | |
| # Women receiving pap tests who have not had a pap test in 5 or more years | Screening/Registration | |
| # of women counseled after receiving their cancer screening results | Patient record | |
| AGE OF WOMEN RECEIVING SCREENINGS | | |
| <20 | Screening/registration | |
| 21 to 29 | Screening/registration | |
| 30 to 39 | Screening/registration | |
| 40 to 49 | Screening/registration | |
| 50 to 59 | Screening/registration | |
| 60 to 69 | Screening/registration | |
| 70+ | Screening/Registration | |
| RACE/ETHNICITY OF WOMEN RECEIVING SCREENINGS | | |
| African American | Screening/registration | |
| American Indian | Screening/registration | |
| Asian/Pacific Islander | Screening/registration | |
| Hispanic | Screening/registration | |
| White | Screening/registration | |
| Other (specify) _____ | Screening/registration | |
| Other Unknown | Screening/registration | |
| >1 Race | Screening/registration | |
| EMPLOYMENT STATUS OF WOMEN RECEIVING SCREENINGS | | |
| # Unemployed | Screening/Registration | |
| # Full-time Employed | Screening/Registration | |
| # Part-time Employed | Screening/Registration | |
| # Self Employed | Screening/Registration | |

| PATIENT OUTCOMES | | |
|--|--|------------------------------------|
| PATIENT OUTCOMES | Where to collect this information from | Data (enter N/A if not applicable) |
| BREAST CANCER SCREENINGS | | |
| # Women receiving Clinical Breast Exam | Patient records | |
| # Women receiving Screening Mammogram | Patient records | |
| # Screening Mammograms with BIRAD 1 or 2 (all normal results) | Patient records | |
| # Screening Mammograms BIRAD 0 (all abnormal screening mammograms recommended for additional imaging) | Patient records | |
| OF THE MAMMOGRAMS INITIALLY CLASSIFIED AS BIRAD 0 | | |
| # Additional mammograms resulting in BIRAD 1 or 2 | Patient records | |
| # Additional mammograms resulting in BIRAD 3 | Patient records | |
| # Additional mammograms resulting in BIRAD 4 or 5 | Patient records | |
| # Benign Biopsies | Patient records | |
| # Malignant Biopsies | Patient records | |
| # of women with malignant biopsies connected to treatment | Patient records | |
| CERVICAL CANCER SCREENINGS | | |
| # Women receiving Pelvic Exams | Patient records | |
| # Women receiving Pap tests | Patient records | |
| # Women receiving a HPV Test | Patient records | |
| # Women with abnormal pap tests | Patient records | |
| # Women with high risk HPV tests | Patient records | |
| # Women connected to treatment | Patient records | |
| PATIENT KNOWLEDGE/ATTITUDE CHANGES | Where to collect this information from | Data |
| # Women Who feel more comfortable going to the doctor because of See, Test & Treat | Follow-up patient questionnaire | |
| # Women who feel confident that they will go to the doctor every year to receive a check up | Follow-up patient questionnaire | |
| # Women Who feel that they understand how often they should get screened for cervical and breast cancer because of See, Test & Treat | Follow-up patient questionnaire | |

APPENDIX 16- BUDGET MODIFICATION FORM

If it is necessary for your organization to make a significant modification to your budget (over \$1,000) please use the following worksheet to request approval for the budget modification and then provide a justification for the request.

| Budget Item Description | Current Budget | Current budget change requested (Date:) | New Proposed Budget | Reason for reallocating funds |
|--|----------------|--|---------------------|-------------------------------|
| Medical Equipment | | | | |
| Exam, Laboratory and Testing Supplies | | | | |
| Temporary Program Coordinator | | | | |
| Support Personnel | | | | |
| Marketing/Promotion | | | | |
| Translation Services (print materials and on-site) | | | | |
| Transportation | | | | |
| Children's' Activities | | | | |
| Meals | | | | |
| Other | | | | |
| Totals | | | | |

APPENDIX 17- GRANT RECONCILIATION FORM

Please return this form to your program manager with details (receipts/supporting documentation) regarding the actual expenditures associated with each line item. This is due 30 days after your See, Test & Treat Event.

Note that all funds not used by the end of your grant award period to be returned to the CAP Foundation. The total amount should not exceed the amount awarded by CAP Foundation.

| Host Site Name and Location: | | | |
|--|---------------------------------------|---------------------|----------|
| Program Date: | | | |
| Budget Item Description | Amount budgeted (as of last revision) | Actual Expenditures | Comments |
| Medical Equipment | | | |
| Exam, Laboratory and Testing Supplies | | | |
| Temporary Program Coordinator | | | |
| Support Personnel | | | |
| Marketing/Promotion | | | |
| Translation Services (print materials and on-site) | | | |
| Transportation | | | |
| Children's' Activities | | | |
| Meals | | | |
| Other | | | |
| Total amount: | | | |

APPENDIX 18- ADDITIONAL IN-KIND/DONOR SUPPORT FORM

Please summarize any additional funding/donations received in support of your See, Test & Treat Event. You may list any in kind donations that your institution provided for this program as well:

| Host Site Name and Location: | | |
|------------------------------|----------------------------|---|
| Program Date: | | |
| Donor Name | Amount given/Items donated | Are they a potential donor for next year? |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |