

2007 FAX Product Order Form

Practitioner's Name: _____

Date: _____

Mailing Address: _____

To: Sharyn Griese, RHIT

Department: Quality Management

City, State and Zip: _____

FAX (810) 720-7788

Phone: (810) 230-2117

Attn: _____

Please send my office the following products:

HEALTH AND LIFESTYLES					
	Product	Quantity		Product	Quantity
1.	♦ HANDS Depression Questionnaire 50 questionnaires per pad	__ Pads	2.	Alcohol Screening Questionnaire (AUDIT TOOL) 50 questionnaires per pad. One quick guide screening tool. Physician Guide for Alcohol Mgt and KAP Keys.	__ Pads
3.	♦ FAX Back Referral Forms for Tobacco Cessation and Weight Management Programs*		4.	Tobacco Cessation Counseling Fact Sheet*	
5.	SMOKER Identification Stickers 250 per roll.	__ Rolls	6.	NON-SMOKER Identification Stickers 250 per roll.	__ Rolls
7.	Thinking about quitting – HealthPlus resources to help smokers who want to quit		8.	Motivating tobacco users unwilling to quit*	
9.	♦ Pediatric Preventive & Screening Guidelines **		10.	♦ Adult Preventive & Screening Guidelines **	
11.	♦ Pregnancy Health Detection & Screening Guidelines**		12.	♦ EPSDT Pediatric Preventive & Screening Guidelines **	
FORMS/PATIENT EDUCATION					
13.	Advance Directive Stickers 250 per roll	__ Rolls	14.	♦ Advance Directive Form *	
15.	Adult Immunization/Health Cards 250 per package	__ Pkgs	16.	Adult Immunization Record for charts (Stickers) 250 per package	__ Pkgs
17.	♦ Pediatric History Form *		18.	♦ Pediatric Well Child Exam/Information Forms *	
19.	♦ Adolescent History Form *		20.	♦ Pediatric Health Maintenance Flow Sheet *	
21.	♦ Adolescent Health Maintenance Flow Sheet *		22.	♦ Adolescent Well Child Exam/Information Form	
23.	♦ Adult Complete Physical Form *		24.	♦ Adult History Form *	
25.	♦ Problem List *		26.	♦ Adult Health Maintenance Flow Sheet *	

* One will be provided. Office may copy as required.

** Most recent at time of order. For exam rooms. Please indicate number of rooms.

♦ Items available on our website (www.healthplus.org/providers.html)

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FORMS/PATIENT EDUCATION					
	Product	Quantity		Product	Quantity
27.	◆ Medication List *		28.	Member Referral Information Sheets 50 per pad	__ Pads
29.	◆ Patient Vitals and Medication List *		30.	Guide to Breast Self-Examination Limit 150	
31.	Patient Notification of Test Results 250 per package	__ Pkgs	32.	Reports Reviewed/Patient Notified Stamp One per Practitioner	
33.	On Anticoagulant Therapy stickers for charts Limit 100		34.	◆ Lead Screening Questionnaire *	
35.	Lead Risk Questionnaire (Chart sticker)				
DISEASE MANAGEMENT					
36.	◆ Asthma Action Plan - adult 25 per pad	__ Pads	37.	◆ Asthma Action Plan – child 25 per pad	__ Pads
38.	Children with asthma can exercise		39.	Sick Day Plan for Diabetes 50 per pad	__ Pads
40.	◆ 1200, 1500, 1800, 2200, 2400 Calorie Diabetic, Low Fat, Low Cholesterol Diet 25 in a package	__ 1200 __ 1500 __ 1800 __ 2200 __ 2400	41.	Diabetic Foot Exam Stamp One per Practitioner	
PHARMACY					
42.	Express Scripts Mail Order Form				
CLINICAL PRACTICE GUIDELINE (Laminated sheet for exam rooms) **					
43.	◆ Acute Bronchitis in Children and Adults		44.	◆ Acute Low Back Pain in Adults	
45.	◆ Acute Pharyngitis in Children and Adults		46.	◆ Acute Sinusitis	
47.	◆ Adult Hypertension		48.	◆ Asthma	
49.	◆ Cardiovascular Disease Prevention		50.	◆ Chronic Obstructive Pulmonary Disease (COPD)	

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CLINICAL PRACTICE GUIDELINE (Laminated sheet for exam rooms)**

	Product	Quantity		Product	Quantity
51.	◆ Community Acquired Pneumonia in Adults		52.	◆ Depression	
53.	◆ Diabetes		54.	◆ Domestic Violence	
55.	◆ End Stage Renal Disease (ESRD)/ Chronic Kidney Disease		56.	◆ Gastroesophageal Reflux Disease	
57.	◆ Heart Failure		58.	◆ Hyperlipidemia	
59.	◆ Lead Poisoning		60.	◆ Menopause	
61.	◆ Migraine		62.	◆ Obesity in Adults	
63.	◆ Osteoarthritis		64.	◆ Osteoporosis	
65.	◆ Otitis Media (Children)		66.	◆ Peptic Ulcer Disease	
67.	◆ Post Acute Myocardial Infarction		68.	◆ Postpartum Depression	
69.	◆ Stroke		70.	◆ Substance Use (Chemical Dependency)	
71.	◆ Tobacco Control		72.	◆ Treatment of DVT with low molecular weight Heparin	
73.	◆ Upper Respiratory Infection in Adults and Children		74.	◆ Urinary Incontinence	

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