Application: STT21-0000000032

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See, Test & Treat 2021 Program Grant Application

Summary

ID: STT21-0000000032
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1 Month Post Program See, Test & Treat Outcomes Data Form

Incomplete

Within 30 days after your See, Test & Treat program, grantees are required to provide patient outcomes data using the form below. To ensure that CAP Foundation staff is kept up to date on the outcomes of any patients that require additional diagnostics , treatment and/or follow-up care, all grantees will be asked to complete a 3 month and a 6 month outcomes form - these forms will be added to your online account. To highlight the impact resulting from See, Test & Treat, we are requesting sites to track each patients' connection to care through treatment.

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STT Contact Information

Contact Name	(No response)
Email	(No response)
Phone Number	(No response)

STT Institution Information

Institution Name	(No response)
Program Date	(No response)

General Metrics

	Data
Total # of individuals attending the event (include women, family members, and children)	
Total # of Women Screened	
# of Women Regisitered prior to event	
# of Women walk-ins	
# of Women no shows	
# of Children participating in the onsite children's activities's Activities	
# of Women Needing Interpreters	
List the languages spoken by patients (other than English)	

STT Institution Information

Volunteers

Definition of volunteer categories:

Pathologist volunteers - include all pathologists and pathology residents

Physician volunteers - include all non-pathologist physicians

Medical Professional volunteers - include all non-pathologist medical professionals to include nurses, medical and nursing students, medical assistants, cytotechs, lab techs, mammography techs, etc.

Non-Medical Professional volunteers - include volunteers that do not fall in either of the above categories.

	Data
# of Pathologist Volunteers	
# of Pathologist Volunteer Hours	
# of Physician Volunteers	
# of Physician Volunteer Hours	
# of Other Medical Professional Volunteers	
# of Other Medical Professional Volunteer Hours	
# of Non-medical Personnel Volunteers	
# of Non-medical Personnel Volunteer Hours	

Volunteers

Patient Demographics

	Data
# of Women Who are not established patients of your hospital or clinic	
# of Women Who do not have a primary care physician	
# of Women Who do not have a medical home	
# of Women Who have not previously attended a See, Test & Treat Event	
# of Women Who have health insurance but who report being unable to see a doctor because of cost	
# of Women Who have no health insurance	
# of Women Who have not received a routine physical in the last three to five years	
# Women receiving mammograms who have never had a mammogram even if they were eligible	
# Women receiving mammograms who had a mammogram 5 or more years ago	
# Women receiving a Pap test who have never had a Pap test	
# Women receiving a Pap test who have not had a Pap test in 5 or more years	
# Women counseled after receiving their cancer screening results	

Age of Women Receiving Screenings

	Data
< 20	
21 to 29	
30 to 39	
40 to 49	
50 to 59	
60 to 69	
70+	

Race of Women Receiving Screenings

	Data
American Indian or Alaska Native	
Asian	
Black or African American	
Native Hawaiian or other Pacific Islander	
White	
Other (specify)	
Other Unknown	
>1 Race	

Ethnicity of Women Receiving Screenings

	Data
Hispanic/Latino/Spanish Origin	
Not Hispanic/Latino/Spanish Origin	

Short Term Patient Outcomes

Connection to Care

	Data
# Women who met with a health insurance navigator to explore health insurance options	
# Women signed up for health insurance through a navigator	
# Women connected with a primary care institution	

Breast Cancer Screenings

	Data
# Women receiving a CBE	
# Women receiving a screening mammogram	
# Screening Mammograms with BIRAD 1 or 2 (all normal results)	
# Screening Mammograms with BIRAD 0 (all abnormal screening mammograms recommended for additional screening)	

BIRAD 0 Screening Mammograms - Breakdown of additional screenings/services and findings

	Data
# of Diagnostic mammograms scheduled	
# of Diagnostic mammograms performed	
# Ultrasounds scheduled	
# Ultrasounds performed	
# Additional imaging resulting in BIRAD 1 or 2	
# Additional imaging resulting in BIRAD 3	
# Additional imaging resulting in BIRAD 4 or 5	
# Biopsies scheduled	
# Biopsies performed	
# FNAs scheduled	
# FNAs performed	
Total # of women scheduled for follow-up diagnostic testing for abnormal breast cancer results	

Diagnosis - Breast

	Data
# Benign Biopsies	
# Malignant biopsies / breast cancer Cases	
# women connected to breast cancer treatment	

Cervical Cancer Screenings

	Data
# of Women receiving Pelvic Exams	
# of Women receiving Pap tests	
# of normal Pap test results	
# of abnormal Pap test results	
# Women receiving a HPV test	
# of positive high risk HPV results	

Cervical Cancer Screenings - Breakdown of abnormal results

	Data
# ASCUS	
# ASCUS with high risk HPV	
# LSIL	
# ASC-H	
# HSIL	
# AGC	
Total # of women scheduled for follow-up diagnostic testing for abnormal cervical cancer results	

Abnormal Pap tests - Breakdown of additional screenings/services and findings

	Data
# Repeat Paps or cotests scheduled	
# Repeat Paps or cotests performed	
# Colposcopies scheduled	
# Colposcopies performed	
# Cone Excisions scheduled	
# Cone Excisions performed	
# LEEP Excisions scheduled	
# LEEP Excisions performed	

Diagnosis - Cervical

	Data
# LSIL on cervical biopsy	
# HSIL on cervical biopsy	
# Diagnosed with Cervical Cancer	
# Women connected to cervical cancer treatment	

Patients in Need of Diagnostic Procedures, Treatment and/or Follow-Up Services (Breast or Cervical)

	Unique Patient Identifier	Type of Follow-Up	Describe the follow-up services needed by the patient	Date of follow-up appointment scheduled

1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

Participant Knowledge/Attitude Changes

	Data
# of Women who completed the survey	
# of Women who feel more comfortable going to the doctor because of See, Test & Treat	
# of Women who feel confident that they will go to the doctor every year to receive a check-up because of See, Test & Treat	
# of Women who feel that they understand how often they should get screened for cervical and breast cancer because of See, Test & Treat Cervical Cancer	
# of Women who understand why they should get a Pap test because of See, Test & Treat	
# of Women who understand why they should get a screening mammogram because of See, Test & Treat	
# of Women who feel confident that they know how and where to access medical services in the future because of See, Test & Treat	

Additional Screenings and Supporting Partners

Please enter the name of all organizations who contributed to your program on the day of the event. If they provided additional screenings or social services, indicate what kind (e.g., a social service would be signing women up for health insurance or providing cancer prevention health education {list topic};additional screening could be blood pressure, Hepatitis B, STI, vision, dental, etc.).   Also list organizations that contributed to children's activities and transport.

For all listings, enter the # of individuals served and the outcomes of the service.

	Partner/Organization Name	Describe the service, screenings, and/or education provided	List any findings/outcomes	# of Individuals Served
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				