

Provider NPI: _____ Office Visit Date: _____

Health Outcomes & Impact

1. In the past 12 months, have you visited the emergency room because of high blood pressure (hypertension)?
- Yes
 - No
- a. If you answered YES, when _____
2. In the past 12 months, have you been admitted to the hospital for any of the following? (Check all that apply)
- High blood pressure (hypertension)
 - Stroke
 - Heart attack
 - None

Medication Adherence

3. Are you currently prescribed any medications for blood pressure, cholesterol, diabetes, or heart disease?
- Yes
 - No
- If you answered YES, list all _____
4. How many medications do you take daily?
- 1-2
 - 3-4
 - 5-6
 - 6+
5. In the past 7 days, how often did you take your medications as prescribed?
- Every day
 - Most days (5-6 days)
 - Some days (2-4 days)
 - Rarely (0-1 day)
 - I am not prescribed medication

Follow-Up Care

6. In the past 12 months, have you seen a primary care provider or specialist for your blood pressure, cholesterol, diabetes, or heart health?
- Yes
 - No
7. Do you currently have a regular healthcare provider you see for your chronic conditions?
- Yes
 - No

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Lifestyle & Risk Reduction

8. In the past 30 days, how many days per week did you do at least 30 minutes of physical activity?
- 0 days
 - 1-2 days
 - 3-4 days
 - 5 or more days

Program Impact

9. Since enrolling in WISEWOMAN, have you made any of the following changes? (Check all that apply)
- Improved diet
 - Increased physical activity
 - Reduced or quit smoking
 - Improved medication use/adherence
 - Reduced stress
 - None of the above