Post Chart Review Form:

Please use the correct form based on the target population you selected previously, either young women (between 21 and 26 years old) or on middle-aged women (between 50 to 65 years).

Women age 21–26 years old ONLY

Age: _____

Race: □ White □ Black/African American □ American Indian/Alaska Native
□ Asian □ Hawaiian Native/Pacific Islander □ Hispanic/Latino □ Multicultural

Dates of the patient's last two pap tests? __/_____ __/_____
□ Date 1 Unknown/Not Performed □ Date 2 Unknown/Not Performed
□ N/A due to age < 24

Has patient had a pap showing dysplasia? □ Yes □ No

Was pap interval discussed with patient/documented in the past 3 years? □ Yes □ No

How many dose of HPV vaccine has the patient received?
□ Unknown □ 0 □ 1 □ 2 □ 3 □ Refused

If you answered one or two doses above, has the patient had an HPV vaccine in the last 6 months?

□ Yes □ No

Has the patient had a screening HPV test? □ Yes □ No

Women age 50–65 years old ONLY

Age: _____

Race: □ White □ Black/African American □ American Indian/Alaska Native
□ Asian □ Hawaiian Native/Pacific Islander □ Hispanic/Latino □ Multicultural

Date of the patient's last two pap tests? __/_____ __/_____
□ Date 1 Unknown □ Date 2 Unknown
□ N/A (hysterectomy due to benign cause) □ N/A (hysterectomy due to benign cause)

Has patient had a pap showing dysplasia? □ Yes □ No

Was pap interval discussed with patient/documented in the past 3 years? □ Yes □ No

When were that patient's last two mammograms? __/_____ __/_____
□ Date 1 Unknown □ Date 2 Unknown

Is the patient at increased risk of breast cancer due to personal or family history? □ Yes □ No

Mammography interval discussed with patient/documented in the past 3 years? □ Yes □ No