

The following is a description of each field and what should be entered.

<b>Field Name</b>	<b>Values Expected</b>	<b>Description</b>
<b>First Name</b>	Given	First Name of the Woman
<b>Last Name</b>	Given	Last Name of the Woman
<b>Consumno</b>	Given	Group Health Consumer Number
<b>Main Phone</b>	Given	Main Contact Number for the Woman
<b>Phone Ext</b>	Given	Main Contact Phone extension for the Woman
<b>Due Date</b>	Given	Based on Last Mammogram plus 760 days
<b>Attempt1 Date</b>	mm-dd-yy or mm/dd/yy	Date of first attempt to contact
<b>Attempt1 Time</b>	h:mm am or pm	Time of first attempt to contact
<b>Attempt2 Date</b>	mm-dd-yy or mm/dd/yy	Date of second attempt to contact
<b>Attempt2 Time</b>	h:mm am or pm	Time of second attempt to contact
<b>Contact Made?</b>	x or blank	Signifies that contact was made with this woman or she was excluded by a relative.
<b>Outside Mammo Date</b>	mm-dd-yy or mm/dd/yy	Date of a self reported mammography
<b>BCSP Exclude</b>	x or blank	The woman wants to exclude herself from BCSP.
<b>Appointment?</b>	x or blank	Did you make a mammography appointment for this woman?
<b>Referred to Provider</b>	x or blank	This is used anytime the woman is referred to her primary-care provider, whether it is to get a clinical question answered, or because she has volunteered that she has a symptom.
<b>Resistant</b>	x or blank	This is used when the woman is resistant to being called
<b>Complaint</b>	x or blank	This is used when the woman has any sort of complaint about the program. Include in this category if the woman feels she has been harassed by too many reminders--cards, letters, etc.
<b>Deceased</b>	x or blank	Hopefully there will not be calls to family of members who are deceased, but it may happen if the death is recent or not captured on our computer records yet.
<b>Other</b>	x or blank	Comments that do not fall in the above categories
<b>Comments</b>	text	Any text comments you want



Y 2 1 2