

Client Participation Agreement

Client Name	(please print)	<u>:</u>
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The Every Woman's Life program encourages women to be screened for breast and cervical cancer. The goal of screening is to detect cancer in its earliest stage so that it can be treated. Screening for breast cancer involves a <u>free</u> breast examination and a breast X-ray called a mammogram. Screening for cervical cancer involves a <u>free</u> pelvic examination. During the pelvic exam some cells will be taken from your cervix and sent to a lab to see if they are normal.

As a participant in the program:

- You will get the breast and cervical screening tests that are right for you.
- If you need more tests, your case manager will help you get these tests. Most
 of these tests will be at no cost to you, but you may need to pay for some
 tests not allowed by the program. Your case manager will work with other
 clinics to make sure you get all the tests that you need.
- If you are diagnosed with breast or cervical cancer you may get your treatment paid by Medicaid.
- You should come to all of your screening and follow up appointments. If you
 cannot make an appointment or no longer want to be in the program, you
 should call your case manager.

Agreement:

- I agree to get the screening tests and any other tests that I may need.
- I agree to keep all appointments. If I cannot come to an appointment, I will call
 my case manager.
- I confirm that the personal information that I have given is correct.
- I understand that my personal information is private and will only be used to determine my eligibility for the program and by the case manager to help me get the tests that I need.
- I agree that my health information can be shared with the program.
- I understand that my participation is voluntary and that I may drop out of the program at any time.

Client Signature:	Date:
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Witness Signature:	Date: