



WISEWOMAN Life Style Intervention Reporting Form

Interventionist: _____

1. Intervention Date: ____/____/____
MM DD YYYY

2. Visit Type: Face to Face Material Mailed, Evidence Opened & Reviewed
 Phone

3. Name _____ 4. Date of Birth ____/____/____
Last First MM DD YYYY

5. SSN: _____ - _____ - _____

A. Interventions

6. Setting: Individual Nutrition
 Group Physical Activity
 Unknown

7. Type of Counseling (check all that apply)

8. Was the client linked to any of the following community based resources?
 Nutrition Resources
 Physical Activity Resources
 Proactive Tobacco Quit Line
 Tobacco Cessation Resources

B. Comments

**WISEWOMAN (WW)
Lifestyle Intervention Data Form
Instructions for Completing DHEC 1090**

Purpose: to provide a form for reporting WISEWOMAN Lifestyle Intervention data.

PLEASE PRINT CLEARLY

- 1) COMPLETE & SUBMIT THIS FORM AFTER EACH LIFE STYLE INTERVENTION ENCOUNTER.**
- 2) FAX OR MAIL THE COMPLETED FORM AS DIRCTED ON THE BOTTOM OF THE PAGE.**

Interventionist: Print the name of the staff member proving the intervention service

1. Intervention Date: Enter the date the service is provided.

2. Visit Type: Check the type of service provided.

3. Name: Enter the client's legal name. Enter the last name followed by the first name.

4. DOB: Enter the client's date of birth

5. SSN: Enter the client's Social Security Number.

A. Interventions

6. Setting: Check the box that is appropriate for the setting of the encounter. Check only one.

7. Type of Counseling: Check all boxes that apply to the topics discussed during the encounter.

8. Was the client linked to any of the following community based resources. Check all boxes that apply.

B. Comments: Use this space to enter additional, related intervention or follow-up information.

Mail Completed form to :
SC DHEC -WISEWOMAN
PO BOX 1987
COLUMBIA SC 29202

Or Fax to 866-297-6814

Retention Schedule: The form is designed for the reporting of CDC required WISEWOMAN data and is not intended as documentation of encounters. The form will be destroyed after data entry.