EP 1.26 Appendix A

Request Form for Outbound Mass Communication

Type of request:

Text: _______  E-mail: _______  Voice (call) ______

Source: Clinic: ______________________

Campaign purpose:

_____ Appointment and exam confirmations/reminders
_____ Wellness checkups – vaccination or preventative information
_____ Hospital pre-registration instructions
_____ Pre-operative instructions
_____ Lab results
_____ Post-discharge follow-ups meant to prevent readmission
_____ Prescription notifications
_____ Home healthcare instructions

Script for campaign (must have approval by Institutional Advancement and Spanish version must be translated by requesting department):

Target recipients (criteria for campaign): ________________________________

Frequency of campaign: ________________________________

Duration of campaign: ________________________________