

## Session Notes: Targeted Outreach for Patients Due for Care

with a Focus on Three PoFs: Chronic Conditions, Preventive Care Needs, and Children

PHMI Statewide Learning Session, March 6, 2025 with Population of Focus SMES Gena Lewis, Fiona Donald and Margaret Franckhauser

### Overview: Components of a Successful Targeted Outreach Strategy



#### 1. Segment your population.

Who do you want to reach and why?



#### 2. Balance access & scheduling.

How soon can you schedule these patients?



#### 3. Assess resources for outreach.

What resources do you have available for outreach?  
How do you know when to give up?



#### 4. Enhance equitable, person-centered care.

How can you further increase access and improve the patient experience?



#### 5. Communication and Buy-in

How can you encourage buy-in and ownership from others on the team?



#### 6. Documentation and Sustainability

Where will you document your outreach efforts?  
How will you track if outreach was successful?

| Component of a Targeted Outreach Strategy                              | Notes/Considerations                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| <b>1. Segment your population</b><br>Who do you want to reach and why? | <ul style="list-style-type: none"> <li>- Review HEDIS/UDS data for your population of focus</li> <li>- Inequities based on race, language or ethnicity</li> <li>- People who are at higher risk</li> </ul> <p><i>In the example from Clinica Sierra Vista, they looked at the total population and numbers. In order to get to something manageable, they continued to sub-segment that into something that was achievable. They took the first 10 calls, then re-assessed.</i></p> |
| <b>Chronic conditions</b>                                              | <p><b>Example: Patients with uncontrolled HTN who haven't been seen in last 3 months</b></p> <p><b>Potential segmentation:</b><br/>           Geriatrics patients w A1C&gt;8<br/>           Patients with DM and last A1C&gt;9 and no upcoming appointment<br/>           A1C&gt;9 with not visits in the last 8 months</p>                                                                                                                                                         |

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|                         | <p>A1C&gt;9 due for care and identify as Hispanic/Spanish speaking<br/>Diabetic patients not seen in the last year<br/>Patients w DM and no visit or no A1C in the last year, missed or cancelled their last visit and/or no DM visit in last 3 months.</p> <p><b>What to consider for geriatric patients for targeted outreach?</b></p> <ul style="list-style-type: none"> <li>• Are they able to get to the appointment (Mobility, transportation)</li> <li>• Do they have food needs?</li> <li>• Are they struggling with hearing or vision?</li> </ul> <p>Importance of pre-visit planning - When they come in, then we do BP check, CRC, breast cancer screening</p>                                                                                                                                                                                                                                                                     |
| <b>Children</b>         | <p><b><i>Example: Children under 24 months who have missed several appointments and are overdue for care</i></b></p> <p>Potential segmentation:</p> <ul style="list-style-type: none"> <li>• Immunizations in the first 2 years for life—</li> <li>• <i>or</i>, WCV in the first 2 years where they can then get their immunizations.</li> <li>• Adolescent vaccine care gap.</li> </ul> <p>Consider for high-risk pediatrics:</p> <ol style="list-style-type: none"> <li>1. Children with medical complexity who are overdue for an influenza vaccine.</li> <li>2. A teen with depression who has not yet had a follow-up visit to address this high-risk problem.</li> <li>3. Children who have missed several appointments and are overdue for care-may imply transportation, housing insecure or other social risks.</li> <li>4. Families who are new immigrants, or patients who don't speak English as their first language.</li> </ol> |
| <b>Adult Prevention</b> | <p><b><i>Example: African American men over 50 who haven't been screened for CRC</i></b></p> <p>Potential segmentation for prioritization:</p> <ul style="list-style-type: none"> <li>• Superimpose where the complication &amp; death rate is high w/ who they're currently reaching/not reaching in their population <ul style="list-style-type: none"> <li>○ Often the hardest group to reach – race, ethnic background</li> </ul> </li> <li>• Highest death rate for CRC is African American men over 50</li> <li>• White women are more likely to get breast cancer, but black women are more likely to die from it</li> <li>• Cervical cancer – Patients here for another reason <ul style="list-style-type: none"> <li>• Sneak pap – during chart prep</li> </ul> </li> </ul>                                                                                                                                                          |

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|                                                                                         | <ul style="list-style-type: none"> <li>• Add cervical cancer screenings to the summary sheet</li> <li>• Medical patients: Segmentation by population <ul style="list-style-type: none"> <li>• Patients furthest away/most rural</li> <li>• By provider or site</li> </ul> </li> </ul> <p>How do you reach a specific population?</p> <ul style="list-style-type: none"> <li>- Hmong clinic – w/ provider who speaks the language</li> <li>- Bring a friend from your community</li> <li>- Campaigns for specific populations</li> <li>- Use faith-based communities</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>2. Consider access &amp; scheduling</b><br>How soon can you schedule these patients? | <p>Consider the backend and what you want them to achieve – do you want to get them into the clinic, schedule them for tests. How soon can we schedule these patients?</p> <p>This may affect the ideal number of patients for outreach each week or month.</p> <p>Consider:</p> <ul style="list-style-type: none"> <li>• PCP availability</li> <li>• Leveraging other members of the care team</li> <li>• Telehealth</li> <li>• Scheduling practices: What is the available schedule template; how far in advance to book appointments; overbooking; etc. <ul style="list-style-type: none"> <li>○ A lot of CHCs have residency programs and only schedule out 3 months at a time – may be a rate-limiting step that needs to be considered first.</li> </ul> </li> </ul> <p>Importance of pre-visit planning: When they come in, then we do BP check, CRC, breast cancer screening, vaccines</p> <p>More on scheduling practices:<br/> <i>One pediatric specialty clinic reduced no-shows from 49% to 25% with two interventions: confirming appointment time and offering to rebook, and filling in cancelled appointments with outreach (Mohamed et al., 2016)</i></p> <p><i>Overbooking helped mitigate the impact of no-shows on an endoscopy suite, and it had a lower expected cost of implementation. (Berg et al., 2013).</i></p> |
| <b>Chronic conditions</b>                                                               | <ul style="list-style-type: none"> <li>• RN-follow visits for people on automatic BP monitors (Valley)</li> <li>• "Max packing" a visit with preventive care needs</li> <li>• Telehealth for hypertension re-check, depression follow-up</li> <li>• Diabetes labs</li> </ul> <p><b>What are patient reasons (for missing appointments or not coming in)? How can we be sensitive to what they might need and want from a reach out?</b></p> <ul style="list-style-type: none"> <li>• Consider they may be in fear or denial</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

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|                 | <ul style="list-style-type: none"> <li>• Can't afford medications may be reason to avoid visit. Or don't like taking meds</li> <li>• They are afraid of what their provider will tell them: risks of complications</li> <li>• They want to mask symptoms</li> <li>• Lack of awareness of their disease</li> <li>• Competing priorities (other family members w medical needs, two jobs)</li> <li>• Fear of seeing provider due to the national environment</li> </ul> <p><b>How to consider methods/script that are sensitive to these targeted patients?</b></p> <ul style="list-style-type: none"> <li>• Ensure language concordance. Spanish/English speaking optimal. Or have a translator available for these reach outs.</li> <li>• Make a phone call (vs text).</li> <li>• make a connection with the person: start w statement/script that incorporates we are checking in with you, how are you, (rather than leading with 'you are due for care')</li> <li>• "We'd love to see you, how can we make that happen?"</li> <li>• "How are you feeling? Is everything ok?"</li> <li>• "How are your sugars?"</li> <li>• Consider social needs screening, esp food needs as this is key to A1C/</li> <li>• "We are a safe space"</li> </ul> |
| <b>Children</b> | <ul style="list-style-type: none"> <li>• Consider carve out clinic days or afternoons <ul style="list-style-type: none"> <li>○ Nurse-only vaccine clinic</li> <li>○ Adolescent special focus-after hours/saturdays</li> </ul> </li> <li>• Care gap focus <ul style="list-style-type: none"> <li>○ Pre-visit planning + "Max packing" a visit with preventive care needs – standing orders to cover vaccines</li> </ul> </li> <li>• Use health plan engagement with patient</li> <li>• Work force allocation - residency program</li> <li>• Reminder calls- need to consider timing/modality</li> <li>• Filling in no-shows in real time/using cancellation slots for outreach waitlist</li> <li>• Open up to walk ins</li> <li>• Double book acute visits</li> <li>• Telehealth as a strategy (Van Houten, 2021)</li> <li>• Develop templates for future appointments <ul style="list-style-type: none"> <li>○ Scheduling out a provider template (especially if residents involved) for more than 3 months:</li> <li>○ Better able to provide continuity and assure WCV and vaccines stay up to date, and</li> <li>○ Takes burden off the patient/family to remember the AAP/Bright Futures standards for best care</li> </ul> </li> </ul>     |

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| <p><b>Adult Prevention</b></p>                                                                                                                        | <p><b>Cervical cancer</b></p> <ul style="list-style-type: none"> <li>• Extending appointment times for paps</li> <li>• You may not have 45 min for a pap but you probably do have 15 min telehealth appointment for followup for results</li> <li>• Consider "carve out clinic" days <ul style="list-style-type: none"> <li>○ Papapaloosa, Papathon</li> <li>○ Women's days</li> <li>○ Saturday clinics for paps</li> </ul> </li> <li>• Double or triple book paps – since high no-show rate</li> <li>• Incentive and social help with gas cards, baby sitting</li> </ul> <p><b>Breast cancer</b></p> <ul style="list-style-type: none"> <li>• If you don't have a mobile mammography center, are you contracting with a mammography center; helping patients with transportation; make an appointment for them</li> <li>• Mammography van – maybe they can come in the evenings once a week instead of only coming on ondays, etc</li> </ul> <p><b>Colorectal cancer</b></p> <ul style="list-style-type: none"> <li>• Pre-visit planning &amp; "max packing" visits</li> <li>• No appointment needed for FIT</li> <li>• Bulk order and bulk send FIT so they send directly to the lab</li> </ul> <p>Access and Scheduling</p> <ul style="list-style-type: none"> <li>- Special clinic days for specific populations</li> <li>- Bulk orders and "stacking" sameness on a packed day (e.g., paps only)</li> <li>- Aligning getting people in and empanelment</li> </ul> |
| <p><b>3. Assess your resources for outreach</b></p> <p>What resources do you have available for outreach?</p> <p>How do you know when to give up?</p> | <p><b>What resources do you have available for outreach?</b></p> <p>Different care team models may:</p> <ul style="list-style-type: none"> <li>• put one person in charge of outreach, OR</li> <li>• share the responsibility amongst MAs/OAs</li> </ul> <p>Assessment of work and allocation of staff time:</p> <ul style="list-style-type: none"> <li>• Minutes per call – 20calls/week x 5 minutes per call =100 minutes</li> <li>• <i>What was the one person at Clinica able to accomplish in a single week. What's the number of patients you're trying to outreach, and does that equal the number of patients you're trying to outreach.</i></li> </ul> <p>Mode of outreach: Phone/ Text / Letter/ In the field:</p> <ul style="list-style-type: none"> <li>• What is a realistic number of patients that can be outreached to?</li> <li>• Leveraging the patient portal for those that use it – messaging with the patient, having patients schedule their own appointments</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

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|                                                                                                      | <p><b>How do you know when to give up?</b></p> <div data-bbox="565 289 854 552">  <p><b>A call AND a letter</b><br/>improved follow-through with diabetes monitoring, CRC and mammography by 5-20%.</p> </div> <div data-bbox="891 289 1180 552">  <p><b>Personalized outreach in addition to automated</b><br/>outreach improved WCV scheduling, visit completion, and FIT completion rates.</p> </div> <div data-bbox="1218 289 1507 552">  <p><b>Multiple reminders</b><br/>yielded 5% reduction in no-shows from high-risk patients.</p> </div> <p><b>Research supports combining modalities, personalized outreach and multiple reminders.</b></p> <p><small>Derose, <a href="#">Nakahiro</a>, and Ziel, 2009; Phillip et al., 2015; Berset et al., 2023; Coronado et al., 2019; Steiner et al., 2018</small></p> <ul style="list-style-type: none"> <li>• Consider time of the day: early morning and afternoon/evening may be the best chance to reach a patient.</li> <li>• Consider shifting the time you've allocated staff to this task. Do they really have uninterrupted time to make patient contact?</li> </ul> <p><b>A call AND a letter</b> improved follow-through with diabetes monitoring, CRC and mammography by 5-20%.</p> <ul style="list-style-type: none"> <li>• Increased compliance with diabetes monitoring tests from 18%-19% w/ no outreach to 21% for those who received a letter or a call and to 25% for a letter-call combination (Derose, Nakahiro, and Ziel, 2009).</li> <li>• Improved rates for CRC screening and mammography respectively from 19% and 17% for a letter and 14 and 22% for an automated call, to 24 and 37% for both (Phillip et al., 2015).</li> </ul> <p><b>Personalized outreach in addition to automated</b> outreach improved WCV scheduling, visit completion, and FIT completion rates .</p> <ul style="list-style-type: none"> <li>• Led to successful scheduling for well child care 29-31% of the time versus 12-15% with automated scheduling outreach, and the visit completion rate was also higher (Berset et al., 2023).</li> <li>• Increased fecal immunochemical test completion rates, especially for patients who preferred Spanish (Coronado et al., 2019).</li> </ul> <p><b>Multiple reminders</b> yielded 5% reduction in no-shows from high-risk patients.</p> <ul style="list-style-type: none"> <li>• Reduced primary care appointment no-shows from 25.0% to 20.5% for high-risk patients compared to patients who only received 1 automated appointment reminder. (Steiner et al., 2018)</li> </ul> <p>Consider text messages for youth, who may not answer phone calls, read letters or email.</p> |
| <p><b>4. Enhance equitable, person-centered care</b><br/>How can you further increase access and</p> | <p>This is about acknowledging lived experience &amp; pt needs and how we build this outreach strategy.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

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| <p>improve the patient experience?</p>                                                                        | <div data-bbox="578 205 1474 548" data-label="Diagram"> </div> <p>There may be incentives or resources from your health plan to assist with some of these</p> <p>As the person doing the outreach, patients do know you and trust you – you outreached to them, helped them access the appointment. You have a therapeutic relationship with the patient.</p> <p><b>Alignment check:</b> Consider opportunities to include the patient voice in your QI efforts</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <p><b>5. Communication and Buy-in</b><br/>How can you encourage buy-in and ownership from others on team?</p> | <p><b>Who should be involved in developing/executing an outreach strategy?</b><br/>It depends on who will be reaching out.... Developing scripts may need to be approved.</p> <ul style="list-style-type: none"> <li>• Scheduling team</li> <li>• Operations</li> <li>• Call center</li> <li>• Front desk</li> <li>• MA's</li> <li>• Marketing</li> <li>• Quality team</li> <li>• Care team</li> </ul> <p><b>1. Including a clinical manager in the QI/Population Health meetings where outreach is being planned</b></p> <ul style="list-style-type: none"> <li>• Easier to create a culture of change if the person responsible for implementation is involved in creating the plan.</li> </ul> <p><b>2. Empower staff with the why and how</b></p> <ul style="list-style-type: none"> <li>• Waiting to implement a PDSA until clinical manager can take the information to the staff meeting.</li> <li>• Educating empowers the staff to feel like this is an effort they feel and see value in supporting.</li> </ul> |



|                                                                                                                                                                                           | <div><div>Talking points<br/>for staff meeting:</div><div><ul style="list-style-type: none"><li>Our <u>outreach staff</u> <b>are crucial</b> to getting patients into the clinic through their communication efforts and relationship with the patient/family</li><li><u>Not meeting the metric has a real impact</u> to our patients and to the financial health of our CHC</li><li><u>We can do this!</u></li></ul></div></div> <ul style="list-style-type: none"><li>Public recognition at staff meetings, awards?</li></ul> <p>3. Ensure staff are supported with <b>training, protocols and scripts</b> for how to do each step of data segmentation, outreach and scheduling.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                      |                       |                     |                   |                     |                        |                |                        |                  |                      |                 |                |           |         |   |           |                 |                      |                 |                  |         |         |                   |            |                |                     |                    |                   |           |         |   |           |                  |                     |                      |               |           |               |               |           |                 |                      |           |                |          |         |             |         |
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| <p><b>6. Iteration and documentation</b></p> <p>How might you track effectiveness of the outreach?</p> <p>Where might you document the outreach protocols?</p> <p>Who is responsible?</p> | <ul style="list-style-type: none"><li>Where will you document your outreach efforts?<ul style="list-style-type: none"><li>Notes, huddle boards, internal leadership document, work queues?</li><li>Keeping files on a shared drive for everyone to access the latest version. We did have hard documents in case of an outage, but the shared drive was fine for our last site visit.</li></ul></li><li>How will you track if outreach was successful and resulted in completion of intended activity?<ul style="list-style-type: none"><li>Is the lead, manager responsible at end of each day/week/month?</li></ul></li></ul> <table><tr><th>Patient Name/ID</th><th>Appointment Date/Time</th><th>Appointment Type</th><th>Provider Assigned</th><th>Confirmation Status</th><th>Room/Location</th><th>Priority/Notes</th><th>Scheduled Successfully</th></tr><tr><td>John Doe, #12345</td><td>02/15/2025, 10:00 AM</td><td>Annual Check-up</td><td>Dr. Jane Smith</td><td>Confirmed</td><td>Room 3A</td><td>-</td><td>✅ (Green)</td></tr><tr><td>Mary L., #23456</td><td>02/15/2025, 12:00 PM</td><td>Follow-up Visit</td><td>Dr. Mark Johnson</td><td>Pending</td><td>Room 2B</td><td>Needs interpreter</td><td>⌚ (Yellow)</td></tr><tr><td>Sam W., #34567</td><td>02/15/2025, 3:00 PM</td><td>Blood Test Results</td><td>Dr. Lily Williams</td><td>Confirmed</td><td>Room 4C</td><td>-</td><td>✅ (Green)</td></tr><tr><td>Kevin P., #45678</td><td>02/16/2025, 9:00 AM</td><td>Surgery Consultation</td><td>Dr. Sarah Lee</td><td>Confirmed</td><td>Main Hospital</td><td>High-priority</td><td>✅ (Green)</td></tr><tr><td>Anna G., #56789</td><td>02/16/2025, 11:30 AM</td><td>Follow-up</td><td>Dr. Emma Clark</td><td>Canceled</td><td>Room 5D</td><td>Rescheduled</td><td>❌ (Red)</td></tr></table> <ul style="list-style-type: none"><li>Accountability for assuring outreach goals are achieved (daily, weekly, monthly)<ul style="list-style-type: none"><li>Elevating the role of each person and their role in the environment</li></ul></li><li>Onboarding and refresher training for staff</li><li>Scripts and protocols</li></ul> | Patient Name/ID      | Appointment Date/Time | Appointment Type    | Provider Assigned | Confirmation Status | Room/Location          | Priority/Notes | Scheduled Successfully | John Doe, #12345 | 02/15/2025, 10:00 AM | Annual Check-up | Dr. Jane Smith | Confirmed | Room 3A | - | ✅ (Green) | Mary L., #23456 | 02/15/2025, 12:00 PM | Follow-up Visit | Dr. Mark Johnson | Pending | Room 2B | Needs interpreter | ⌚ (Yellow) | Sam W., #34567 | 02/15/2025, 3:00 PM | Blood Test Results | Dr. Lily Williams | Confirmed | Room 4C | - | ✅ (Green) | Kevin P., #45678 | 02/16/2025, 9:00 AM | Surgery Consultation | Dr. Sarah Lee | Confirmed | Main Hospital | High-priority | ✅ (Green) | Anna G., #56789 | 02/16/2025, 11:30 AM | Follow-up | Dr. Emma Clark | Canceled | Room 5D | Rescheduled | ❌ (Red) |
| Patient Name/ID                                                                                                                                                                           | Appointment Date/Time                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Appointment Type     | Provider Assigned     | Confirmation Status | Room/Location     | Priority/Notes      | Scheduled Successfully |                |                        |                  |                      |                 |                |           |         |   |           |                 |                      |                 |                  |         |         |                   |            |                |                     |                    |                   |           |         |   |           |                  |                     |                      |               |           |               |               |           |                 |                      |           |                |          |         |             |         |
| John Doe, #12345                                                                                                                                                                          | 02/15/2025, 10:00 AM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Annual Check-up      | Dr. Jane Smith        | Confirmed           | Room 3A           | -                   | ✅ (Green)              |                |                        |                  |                      |                 |                |           |         |   |           |                 |                      |                 |                  |         |         |                   |            |                |                     |                    |                   |           |         |   |           |                  |                     |                      |               |           |               |               |           |                 |                      |           |                |          |         |             |         |
| Mary L., #23456                                                                                                                                                                           | 02/15/2025, 12:00 PM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Follow-up Visit      | Dr. Mark Johnson      | Pending             | Room 2B           | Needs interpreter   | ⌚ (Yellow)             |                |                        |                  |                      |                 |                |           |         |   |           |                 |                      |                 |                  |         |         |                   |            |                |                     |                    |                   |           |         |   |           |                  |                     |                      |               |           |               |               |           |                 |                      |           |                |          |         |             |         |
| Sam W., #34567                                                                                                                                                                            | 02/15/2025, 3:00 PM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Blood Test Results   | Dr. Lily Williams     | Confirmed           | Room 4C           | -                   | ✅ (Green)              |                |                        |                  |                      |                 |                |           |         |   |           |                 |                      |                 |                  |         |         |                   |            |                |                     |                    |                   |           |         |   |           |                  |                     |                      |               |           |               |               |           |                 |                      |           |                |          |         |             |         |
| Kevin P., #45678                                                                                                                                                                          | 02/16/2025, 9:00 AM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Surgery Consultation | Dr. Sarah Lee         | Confirmed           | Main Hospital     | High-priority       | ✅ (Green)              |                |                        |                  |                      |                 |                |           |         |   |           |                 |                      |                 |                  |         |         |                   |            |                |                     |                    |                   |           |         |   |           |                  |                     |                      |               |           |               |               |           |                 |                      |           |                |          |         |             |         |
| Anna G., #56789                                                                                                                                                                           | 02/16/2025, 11:30 AM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Follow-up            | Dr. Emma Clark        | Canceled            | Room 5D           | Rescheduled         | ❌ (Red)                |                |                        |                  |                      |                 |                |           |         |   |           |                 |                      |                 |                  |         |         |                   |            |                |                     |                    |                   |           |         |   |           |                  |                     |                      |               |           |               |               |           |                 |                      |           |                |          |         |             |         |



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