



WISEWOMAN Lifestyle Counseling Contact Form

Date _____

Agency Name		MBCIS ID	
Last Name	First Name	Middle Initial	Birth Date

Type: Face to Face Telephone Call **Setting:** Individual Group

Introduction:

Open the conversation. Suggest time frame for conversation

Content: (Ask open-ended questions, use reflective listening, roll with resistance, express empathy)

Ask about progress made or willingness to make change (Listen and reflect)

Ask about barriers (Listen and reflect. Develop discrepancy)

Ask about support systems (Listen and reflect)

Work with client to identify solutions (Listen and ask permission to make suggestions)

Other Possible Topics to Cover:

Diagnostic exam, medications, referrals to free/low cost community resources, educational materials, goal changes

Notes

Counseling provided about: (Check at LEAST one box.)

Nutrition Physical Activity Smoking Cessation

During this contact, participant linked to community-based resources related to:

(Check all that apply)

Nutrition Physical Activity Smoking Cessation Quitline

Length of Contact: 15 minutes 30 minutes 45 minutes 60 minutes

Next Appointment _____ Face to Face Telephone

Lifestyle Counselor _____