

Participant ID: _____

Date: _____

Patient Navigator Checklist

How to use this checklist:

The patient navigator checklist is designed to guide you step-by-step through each contact with the participant. Fill out one checklist per participant. Keep the checklist on hand during each contact and check the tasks off as you go.

☐ Square boxes in the “Done” column are required for each participant. Check square boxes when the task is accomplished.

☐ Round boxes are for responses to questions that help you decide what to discuss next. For responses to questions with round boxes, check only ONE response.

First Contact (In Person)

*** Refer participant back to screening doctor for medical questions you can't answer.**

Done?	Task
1. Preparations	
<input type="checkbox"/>	Label Tracking Form and Common Concerns Checklist with ID; gather CRC ed materials
<input type="checkbox"/>	Start recorder and state participant ID, date and "First Contact"
2. Discuss the following from PN script:	
<input type="checkbox"/>	Describe PN role
<input type="checkbox"/>	Review colorectal cancer and CRC stats in AAs (<i>using educational materials</i>)
<input type="checkbox"/>	Discuss healthy behaviors, risk factors and symptoms
<input type="checkbox"/>	Describe colonoscopy procedure
<input type="checkbox"/>	Complete Common Concerns Checklist
<input type="checkbox"/>	Elicit reasons to have colonoscopy
<input type="checkbox"/>	Inform participant that a nurse from St. Luke's-Roosevelt will call him to make an appointment and give instructions about bowel prep. Mention: <ul style="list-style-type: none"> ➤ Change in some medications 5-7 days prior ➤ Change diet/take laxatives a day prior (<i>details during second contact</i>)
<input type="checkbox"/>	Devise escort plan
<input type="checkbox"/>	After your conversation, does participant express interest in getting a colonoscopy? <ul style="list-style-type: none"> <input type="radio"/> Yes, plans to make an appointment [<i>Skip to #3 "Wrap up"</i>] <input type="radio"/> No, but will try FIT <input type="radio"/> No, does not want colonoscopy or FIT
<input type="checkbox"/> N/A	2a. ONLY if participant requests FIT:
	<input type="checkbox"/> Give participant FIT cards <input type="checkbox"/> Discuss how to complete and return FIT cards <input type="checkbox"/> Inform participant that research team will notify PCP of results <ul style="list-style-type: none"> ➤ If no PCP, give participant Joe's clinic card

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3. Wrap Up	
<input type="checkbox"/>	Inform participant that you will call him one week before colonoscopy OR in two weeks to confirm he's completed FIT cards/scheduled alternate-site colonoscopy.
	Tentative follow-up call date (<i>if known</i>): _____ Best time to call: _____
<input type="checkbox"/>	Stop recorder and finish Tracking Form and Common Concerns Checklist

Second Contact (Telephone Call)

*One week before colonoscopy **OR** two weeks after first contact for those doing FIT or alternate-site colonoscopy*

Done?	Task
1. Preparations:	
<input type="checkbox"/>	Review Common Concerns Checklist from previous contact
<input type="checkbox"/>	Start Tracking Form
<input type="checkbox"/>	Place call and start recorder
2. Follow PN Script for Second Contact:	
<input type="checkbox"/>	Identify yourself and inform participant call is being recorded and/or supervised
<input type="checkbox"/>	What is participant's status? <ul style="list-style-type: none"> <input type="radio"/> Participant has made an appointment for colonoscopy that they plan to keep [Go to 2a.] <input type="radio"/> Participant made an appointment for colonoscopy but cannot make the appointment [Go to 2b.] <input type="radio"/> Participant was contacted but does not want to make colonoscopy appointment [Go to 2c.] <input type="radio"/> Participant requested FIT [Go to 2d.]
<input type="checkbox"/> N/A	2a. If participant can make colonoscopy appointment:
	<input type="checkbox"/> Confirm appointment date, time, and location <input type="checkbox"/> Discuss bowel prep (<i>see St. Luke's Colonoscopy Preparation Instructions and Colonoscopy Countdown in manual</i>) <input type="checkbox"/> Confirm escort/transportation plans <input type="checkbox"/> Review Common Concerns Checklist from first contact <input type="checkbox"/> Address new questions <input type="checkbox"/> Encourage participant to follow up on colonoscopy results <input type="checkbox"/> Inform participant that research staff will contact him in about six months to ask follow-up questions, confirm completion of colonoscopy, and arrange payment for his participation (\$25) <p style="text-align: center;">[GO TO #3 "WRAP UP"]</p>
<input type="checkbox"/> N/A	2b. If participant cannot make colonoscopy appointment:
	<input type="checkbox"/> Remind participant to reschedule (St. Luke's Nurse Drake 212-523-3681) <input type="checkbox"/> Inform participant that you will call him again one week before colonoscopy OR in two

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	weeks if getting alternate-site colonoscopy
<input type="checkbox"/> N/A	2c. If participant contacted by nurse but refused colonoscopy appointment:
	<input type="checkbox"/> Explore Common Concerns Checklist again.... After your discussion, have participant's plans changed? <input type="radio"/> Yes, participant has decided to make an appointment for a colonoscopy [Go to 2c1.] <input type="radio"/> No, participant still does not want to have a colonoscopy [Go to 2c2.] <input type="checkbox"/> N/A 2c1. If participant decides to make colonoscopy appointment: <input type="checkbox"/> Remind participant to schedule an appointment <input type="checkbox"/> Inform participant that you will call him one week before colonoscopy OR in two weeks if getting alternate-site colonoscopy <input type="checkbox"/> N/A 2c2. If participant still declines colonoscopy appointment: <input type="checkbox"/> Describe and offer FIT option Does participant accept FIT? <input type="radio"/> Yes <input type="radio"/> No [skip to "If participant declines FIT"] If participant accepts FIT: <input type="checkbox"/> N/A <input type="checkbox"/> Confirm participant's address is same as at first contact <input type="checkbox"/> Inform participant research team will mail him FIT cards <input type="checkbox"/> Discuss how to complete/return FIT cards <input type="checkbox"/> Inform participant you will call him in two weeks to confirm he's returned FIT cards If participant declines FIT: <input type="checkbox"/> N/A <input type="checkbox"/> Inform participant that research staff will contact him in about six months to ask follow-up questions and arrange payment for his participation (\$25) <p style="text-align: right;">[GO TO #3 "WRAP UP"]</p>
<input type="checkbox"/> N/A	2d. If participant requested FIT previously:
	<input type="checkbox"/> Confirm participant received, completed and returned FIT Has participant returned their FIT? <input type="radio"/> Yes, participant received, completed and returned FIT [Go to 2d1.] <input type="radio"/> No, participant has not returned FIT [Go to 2d2.] <input type="checkbox"/> N/A 2d1. If FIT returned: <input type="checkbox"/> Explore Common Concerns Checklist to encourage colonoscopy <input type="checkbox"/> If participant decides to make colonoscopy appointment, see steps above <input type="checkbox"/> If participant declines colonoscopy, inform him that research staff will contact him in about six months to ask follow-up questions and arrange payment for his participation (\$25) <p style="text-align: right;">[GO TO #3 "WRAP UP"]</p>

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	<input type="checkbox"/> N/A 2d2. If FIT not returned: <ul style="list-style-type: none"> <input type="checkbox"/> Explore Common Concerns Checklist to encourage colonoscopy <input type="checkbox"/> If participant decides to make colonoscopy appointment, see steps above <input type="checkbox"/> If participant has logistical problems, help resolve them and inform him you'll contact him in two weeks to confirm he's returned FIT cards <input type="checkbox"/> If participant declines colonoscopy and FIT, inform participant that research staff will contact him in about six months to ask follow-up questions and arrange payment for his participation (\$25) <p style="text-align: right;"><i>[GO TO #3 "WRAP UP"]</i></p>
3. Wrap Up	
<input type="checkbox"/>	Is a third contact needed? <ul style="list-style-type: none"> <input type="radio"/> No <input type="radio"/> Yes, tentative follow-up call date (<i>if known</i>): _____ Best time to call: _____
<input type="checkbox"/>	End call, stop recorder and complete Tracking Form
<input type="checkbox"/>	If no third call is needed, submit tracking form and Common Concern Checklist to RAs

Third/Final Contact (Telephone Call)

Done?	Task
<input type="checkbox"/>	Repeat steps in Second Contact for those who re-scheduled/cancelled/no-showed colonoscopy/changed mind to get colonoscopy OR who still haven't returned FIT/requested FIT at second contact
<input type="checkbox"/>	Inform participant this is last PN contact and research team will follow up in six months
<input type="checkbox"/>	Submit Tracking Form and Common Concern Checklist to RAs

****If participant has questions after this time, he can call Dr. Joseph Ravenell's number on the consent form.***