

MaineHealth
Learning Community

A Partnership of MaineHealth and the Maine Physician Hospital Organization

Request for an Educational Outreach Session

Please complete this form and FAX to (207) 541-7547, email to mhlc@mainehealth.org or mail to 465 Congress Street, Suite 301, Portland, ME 04101, ATTN: Paul Begin. Requests should be made at least 4 weeks prior to the desired meeting date.

Individual or group requesting meeting:

Date of request:

Key Contact Information:

→ Name

→ Address

→ City, State, Zip

→ Tel

→ Email

→ Fax

Please indicate Primary Care Practice(s) that will attend the session:

→ **Total participants expected** (*minimum 6-10*):

→ **Topic(s) or areas of interest to be addressed** (check and list specific topics of interest):

Remember to see the Educational Outreach Sessions Topics List for more ideas!

- | | |
|---|--|
| <input type="checkbox"/> Asthma:_____ | <input type="checkbox"/> Mental Health:_____ |
| <input type="checkbox"/> Cardiovascular disease:_____ | <input type="checkbox"/> NCQA Recognition Program:_____ |
| <input type="checkbox"/> Chronic Care Model:_____ | <input type="checkbox"/> Obesity:_____ |
| <input type="checkbox"/> CIR Support:_____ | <input type="checkbox"/> Tobacco Cessation:_____ |
| <input type="checkbox"/> COPD:_____ | <input type="checkbox"/> Self-management:_____ |
| <input type="checkbox"/> Diabetes:_____ | <input type="checkbox"/> Spreading and Sustaining Change:_____ |
| <input type="checkbox"/> Geriatrics:_____ | <input type="checkbox"/> Team Work:_____ |
| <input type="checkbox"/> Health Literacy:_____ | <input type="checkbox"/> Using Data for Improvement:_____ |
| <input type="checkbox"/> Other:_____ | |

Goals of the Session:

1. _____
2. _____

Please list three potential dates and times for your Educational Outreach Session:

1. _____
2. _____
3. _____

Requested duration of session (minimum 1hr – max 4 hrs): _____

**IF YOU NEED TO CANCEL FOR ANY REASON, PLEASE GIVE
48 HOURS ADVANCE NOTICE TO THE PROGRAM MANAGER.
THANK YOU!**