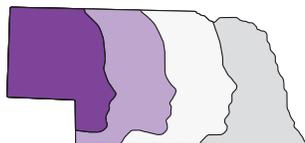


Every Woman Matters



NEBRASKA OFFICE OF WOMEN'S HEALTH

1-800-532-2227

EVERY PROVIDER MATTERS

(Every Woman Matters Provider Education)

Nebraska Health & Human Services' Every Woman Matters Program

Volume 8, No. 1 Spring/Summer 2008

What You Need to Know About Changes Related to EWM!

Our sincere thanks to you, our clinical providers for making over 17,000

WISEWOMAN screening encounters available to Nebraska women since 2002!

This information was made available to all EWM Program contracts via postal mail at the end of May.

In 2002, the Every Woman Matters Program (EWM) was one of twelve in the nation to receive the WISEWOMAN (Well-Integrated Screening and Evaluation for Women Across the Nation) grant. Funding has allowed the EWM Program to integrate screening exams for cardiovascular disease and diabetes as well as education aimed at making lifestyle changes that reduce the risk for heart disease.

Funding received in 2002 for a 5 year period was granted by the Centers for Disease Control and Prevention to fulfill "Demonstration Project" activities. "Phase I" activities required the EWM Program to complete specific goals and objectives related to screening and education for cardiovascular disease, risk factors and diabetes under the WISEWOMAN component. As Phase I funding comes to an end June 30, 2008; activities related to these funds also come to a close.

Effective Immediately:

- **Currently enrolled clients in the EWM Program will continue to be eligible for breast and cervical screening exams;** as indicated by the screening card presented to you by the client at their clinic visit.
- As the Program closes out current Demonstration Project activities, only those clients who present a screening card with WISEWOMAN cardiovascular and diabetes screening exams listed on the card will be eligible for those services. The Program will not be offering WISEWOMAN screening exams otherwise to women enrolled in the EWM Program. If a client presents an expired screening card, please call our office before providing screening services.

For the Future:

- Beginning July 1, 2008 only those newly enrolled clients into the EWM Program will be eligible to receive WISEWOMAN screening exams and coordinated lifestyle interventions. These clients will also be eligible for breast and cervical screening exams.
- Nebraska has successfully submitted a competitive application for an additional 5 years of WISEWOMAN funding. New grant activities, those under "Phase II" will begin July 1, 2008. Funds awarded will continue to help women receive screening and education for heart disease and diabetes. However "Phase II" project criteria will be slightly different. We will keep you updated.

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Professional Education/Continuing Education

Changes in the EWM Program (Continued from Page 1)

- You will know which screening services a client is eligible for by those listed on her screening card. As always, the Program will honor those exams listed on a screening card presented by the client at the time of their clinic visit.

Impact of WISEWOMAN:

Since 2002, the WISEWOMAN component within the Every Woman Matters Program has:

- Screened 17,326 women for heart disease and diabetes.
Screening includes: height/weight, blood pressure, cholesterol and blood glucose levels.
- Diagnosed 1,808 new cases of high blood pressure;
- Diagnosed 1,516 new cases of high cholesterol; and
- Diagnosed 350 new cases of diabetes.
- Provided more than 11,000 women with education and support for a heart healthy lifestyle.

Women who have received WISEWOMAN services have responded with poignant stories and overwhelming gratitude: *“Thanks to all of your help, I lowered my cholesterol from 250 to 215, went down two sizes in clothing, and my blood pressure was much better.” “I have lowered my cholesterol over 80 points and lost over 40 pounds.”*

Nebraska’s combined services approach within the Every Woman Matters Program is having an enormous effect on the lives of Nebraska women and their families. The Program looks forward to future WISEWOMAN funding to help in the fight against heart disease~ the # 1 killer of Nebraskans. If you have any questions about the changes occurring with the WISEWOMAN component of the Program please call 1-800-532-2227. **Active EWM clients have also been notified of these changes.**

*Thank you for your continued support
of the Every Woman Matters Program!!*

Education Sessions at Family Physician Conferences

Every Woman Matters (EWM) was very pleased to sponsor three sessions at the Nebraska Academy of Family Physician (NAFP) conferences. The program appreciates that a large majority of family physicians in Nebraska participate in EWM. At their fall conference at Nebraska City in November 2007, Alan Thorson, MD, colorectal surgeon with Colon & Rectal Surgery, Inc. in Omaha spoke on “Colon Cancer: Can We Eliminate it in the Next Generation?”, while James Early, MD, Internist, Medical Director of Solutions for Life™ at the Via Christi Regional Medical Center in Wichita, KS presented “Behavioral Management of Lifestyle Related Chronic Illnesses”. Don Gibbens, OB/GYN with Milius, Gibbens, Friesen, Hattan, Martin in Lincoln discussed “HPV - 2008” at the NAFP annual meeting in Omaha in March 2008. All three physicians received very good ratings from their colleagues.



Alan Thorson, MD



Don Gibbens, MD



James Early, MD

Professional Education/Continuing Education

State of Nebraska Going Smoke-Free!

On February 26, 2008 Nebraska Governor, Dave Heineman signed LB 395 into law. The law amends the Nebraska Clean Indoor Air Act, requiring every Nebraska indoor workplace to be smoke-free. The purpose of the Nebraska Clean Indoor Air Act is to protect the public health and welfare by prohibiting smoking throughout public places and places of employment. The law is scheduled to be **effective June 1, 2009**.

The amended Nebraska Clean Indoor Air Act will eliminate smoking in enclosed indoor workspaces including restaurants, bars, keno establishments and other workplaces such as; retail/office space, manufacturing, car repair and indoor public places. The only exceptions are:

- Up to 20 percent of hotel rooms.
- Tobacco-only retailers defined as a “store that sells only tobacco and products directly related to tobacco. Products directly related to tobacco do not include alcohol, coffee, soft drinks, candy, groceries or gasoline.”
- Facilities researching the health effects of smoking.
- Private residences, except when a residence is being used as a licensed child care program.

Why does Nebraska need the Clean Indoor Air Act?

Surgeon General Richard Carmona issued a ground breaking report in June 2006 stating that “The debate is over. The science is clear: Secondhand smoke is not a mere annoyance, but a serious health hazard that causes premature death and disease in children and nonsmoking adults.” Secondhand smoke contains more than 4,000 chemicals, including at least 69 carcinogens. The Surgeon General found that secondhand smoke is a proven cause of lung cancer, heart disease, serious respiratory illnesses such as bronchitis and asthma, low birth weight and sudden infant death syndrome. The Surgeon General also found that secondhand smoke is responsible for tens of thousands of deaths in the United States each year. There is no safe level of exposure, and only smoke-free laws provide effective protection from secondhand smoke.

For further information on the Nebraska Clean Indoor Air Act, contact Tobacco Free Nebraska at 402-471-2101 or www.dhhs.ne.gov/tfn.

Nebraska Tobacco Quitline

TOLL-FREE
1-800-QUIT-NOW
(1-800-784-8669)

TOBACCO
FREE
NEBRASKA

for a great state of health

NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM

CBE Workshops Using Silicone & Live Models

Every Woman Matters (EWM) is excited to announce the great success of two workshops entitled “Breast Health Management and Enhancement of Clinical Breast Examinations (CBE) Skills through Practice on Silicone and Live Models”. The sessions were held at the annual Nebraska Nurse Practitioners Primary Care Conference in Lincoln in February 2008 and the annual Nebraska Academy of Physician Assistants Spring Conference in Kearney in April 2008. Marilyn Kile, APRN, AOCN, MammaCare Specialist led the workshops and was assisted by Marcia Stephens, RN-C, MSEd, PLMHP. Marilyn and Marcia both work at the Cancer Center at Good Samaritan Hospital in Kearney. EWM coordinated the development of the trainings, which have been offered at these conferences since 2002.

The workshop focused on how to improve skills in lump detection and discrimination on silicone models, which included pre and post assessments on the silicone models and techniques for conducting a CBE with hands on practice with live models. This incorporated coaching from instructors and constructive feedback from the trained models. Legal and risk management issues were also highlighted, since failure to diagnose breast cancer is a leading allegation in medical malpractice.

The participants gave the 3-hour workshops excellent ratings especially noting the importance of practicing with live models, as well as the significance of the positioning techniques. In previous six-month follow-up surveys of the nurse practitioners and physician assistants, who completed the same workshop, a very significant percentage of these clinicians reported making changes or improvements in the CBE technique. Survey results also indicated the participants having increased confidence in their CBE skills since taking the workshop, as well as reporting their patients being receptive to the more thorough exam.



Marilyn Kile, APRN, AOCN



Robert Gantz, APRN,
Surgical Associates, PC, Lincoln



Jeff Breitreutz, PA-C,
Valley County Health Systems/
Medical Clinics, Ord

Cultural Competency in Healthcare: A Clinical Review and Video Vignettes *(From the National Medical Association - CME/CE)*

Clinician-patient video vignettes on Medscape™ from WebMD™ demonstrate 3 areas of cultural challenges for healthcare providers:

1. Bias
2. Language Barriers
3. Communication Problems

Example of Video Vignette:

- First watch for missed opportunities in improving communication between healthcare provider and patient for a better outcome
- Then observe the strategies that will improve the encounter

2 Free CME credits - <http://cme.medscape.com>

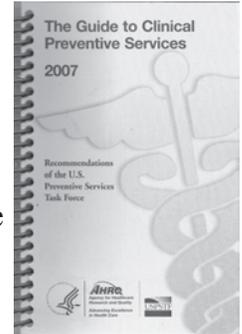
2 Free nursing contact hours - <http://medscape.com/nurses>



The 2007 Guide to Clinical Recommended Preventive Services Handy Pocket Reference Now Available

This handy pocket reference of recommendations from the U.S. Preventive Services Task Force (USPSTF) provides evidence-based “gold-standard” information in an easy to use format. A Summary of Recommendations is listed for each condition with a grade for each recommendation. The USPSTF grades its recommendations based on the strength of evidence and magnitude of net benefit (benefit minus harm). Grading is indicated by:

- A Strongly recommended to be provided to eligible patients
- B Recommended to be provided to eligible patients
- C No recommendation for or against routine provision of the service
- D Recommended against routinely providing the service to asymptomatic patients
- I Evidence is insufficient to recommend for or against routinely providing the service



The recommendation statements in the Guide are abridged. To view the full recommendation statements visit www.ahrq.gov/clinic/uspstf/usptopics.htm. Users can also search for recommendations by patient age, sex and pregnancy status at <http://epss.ahrq.gov>.

**To order a copy, send an e-mail to ahrqpubs@ahrq.hhs.gov
or view the website www.ahrq.gov**

Individual copies are free of charge.

What is the National Cancer Institute's Cancer Information Service?

The National Cancer Institute (NCI), the nation's lead agency for cancer research, established the Cancer Information Services (CIS) in 1975 to educate people about cancer prevention, risk factors, early detection, symptoms, diagnosis, treatment, and research. The CIS is an essential part of NCI's cancer prevention and control efforts.

To provide information about cancer to physicians and other health professionals, patients and their families, and the public, the CIS has a three-pronged approach:

1. Information specialists answer questions about cancer by telephone (1-800-4 CANCER), TTY, instant messaging, and e-mail. They can provide printed and electronic NCI publications. The CIS also operates the NCI's Smoking Quitline (1-877-44U-QUIT) to help smokers quit.
2. The Partnership Program seeks to reach those populations who may have limited access to health information, particularly minorities and those disproportionately affected by cancer.
3. The Research Program helps researchers advance health communication practices.

How can I as a health professional utilize CIS services?

Physician Data Query (PDQ)^R www.cancer.gov/cancertopics/pdq/cancerdatabase: PDQ is a comprehensive cancer information database that is updated regularly. PDQ is maintained by the NCI with the help of cancer experts from across the nation.

(Continued on Page 10)

Professional Education/Continuing Education

***It's Fast! It's Easy!
It's everything you need to know about Every Woman Matters!***

This website is a wealth of information for providers and clients.

www.dhhs.ne.gov/womenshealth/ewm

- Complete information regarding enrollment, program statistics, and health fact sheets for clients interested in the Every Woman Matters Program and the Nebraska Colon Cancer Screening Program.
- Click on the “Information for Providers” link to access:
 - The Provider Manual which includes Professional and Public Cancer Education and Information Resources
 - Claim Status Forms, Payment Status Forms, and Provider Materials Reorder Forms

The Office of Women’s and Men’s Health recently expanded its educational efforts to reach Nebraska men. More information will be available on this website regarding upcoming events and materials that will be beneficial to the men of Nebraska.

Be sure to bookmark this website for easy access from your computer.



Automated Telephone System

For the past year the Every Woman Matters (EWM) Program has been utilizing an automated phone system for all incoming calls. When you call you will get a menu of items from which to choose. The program has over 55,000 clients enrolled, over 700 providers statewide, and a large network of community partners. Having this automated system, not only allows our staff to use their time more efficiently, it also allows you as the caller to choose the most appropriate staff member for your questions. When clients call into the system and speak a language other than English, EWM uses the Language Line interpretation service to assist the client. Here is a helpful menu of numbers to assist you when calling:

“Thank you for calling the Office of Women’s & Men’s Health, Every Woman Matters Program and the Nebraska Colon Cancer Screening Program.”

Press 1 - For English

Press 2 - for Spanish

Then you will receive the following menu:

Press 1 - For an Enrollment or Screening Packet

Press 2 - For Billing Questions

Press 1 - For Providers

Press 2 - For Clients

Press 3 - To talk to a Nurse

Press 1 - For Providers

Press 2 - For Clients

Press 4 - For the Colon Cancer Screening Program

Press 5 - For the Office of Women’s & Men’s Health general questions

Press 6 - To speak to a Program Representative/Receptionist

Be assured that your phone message will always be answered within two business days, and often on the same day. Please do not hang up. Please be patient. Our office hours are Monday through Friday, 8:00 a.m.-5:00 p.m. Central Standard Time. If you call after hours you will not be able to leave a message.

Professional Education/Continuing Education

Educational Focus on Analog vs. Digital Mammography Issues

Mammography Technologists from several facilities in the state attended the annual mammography educational symposium at the Nebraska Society of Radiologic Technologists (NSRT) annual state conference held in Omaha in April 2008. Every Woman Matters (EWM) sponsored Andrea Pavlan Harley, RT (R)(M) from ABCs Digital Mammography, LLC, Fort Myers, Florida. Six hours of continuing education were offered. Among topics highlighted were digital mammography overview, positioning, analog vs. digital, and computer-aided detection (CAD), as well as quality control: analog vs. digital and patient communication. The participants also learned more about resources available to them and their clients at the EWM program exhibit display.

EWM would like to thank technologists across the state! Over 74,000 screening mammograms have been performed for the program.

EWM is funded through a federal grant administered by the Centers for Disease Control and Prevention (CDC). CDC does not reimburse for CAD. CDC reimburses for digital mammography at the rate of analog mammography. Therefore, EWM cannot pay for CAD and will reimburse for digital mammography at the same rate as analog mammography. When performing digital mammography, facilities should submit CPT billing codes for digital mammography.

Note: Mammography facilities should give clients the option to make an informed decision regarding the payment of CAD. Clients should be made aware, prior to CAD being performed, that it is not reimbursable by EWM.



Participants engaged in the speaker's presentation.

Six Successful Every Woman Matters Provider Conferences

"Everything was two thumbs up!", "Very good, excellent presenters with visuals and audience participation", "Excellent as usual, always enjoy Every Woman Matters programs, content is always pertinent", "Very good! Good information that can be shared with clients" were among the many positive comments received from the 323 participants at the 6 regional continuing education conferences. Every Woman Matters (EWM) offered the sessions in 6 cities across Nebraska in the fall of 2007. The target audience was nurses from clinics offering EWM services. 3.3 nursing continuing education hours were available. Thank you to the co-sponsors of the conference: American Cancer Society, NE Cardiovascular Health Program, NE C.A.R.E.S., NE Colon Cancer Screening Program and the Susan G. Komen for the Cure NE.

The presentations offered at the conference were:

- The Prevention and Early Detection of Colorectal Cancer: Screening for Life - Alan Thorson, MD, Colon & Rectal Surgery Inc. in Omaha
- The #1 Killer of Women: Your Role in Reducing the Burden of Cardiovascular Disease in NE - William Minier, MD, VP of Medical Policy & Medical Director for the Blue Cross Blue Shield of Nebraska in Omaha



Alan Thorson, MD



William Minier, MD

- Status of Breast Cancer in Nebraska: How Your Clinic Can Make a Difference in Nebraska - Panel Discussion with Melissa Leypoldt, RN, EWM Director, Bridget Rolenc, Susan G. Komen for the Cure NE, and a representative of the American Cancer Society.

(Continued on Page 8)

Six Successful EWM Provider Conferences (Continued from Page 7)

EWM utilized a new technology evaluation program to evaluate the effectiveness of the program content. Before each session the participants were given a keypad to participate in the electronic audience response system. The 12 knowledge assessment survey questions, related to the information in the speakers' presentations, were shown on the screen before the session and at the end of the session. Participants were then asked to use the keypads to enter their answers. 92% of the participants indicated by their pre and post test answers that their knowledge significantly improved after the educational presentations. Two significant improvements of knowledge were shown with the following questions:



Participants reviewing EWM & educational resources.

1. Evidence-based effective approach(es) for colorectal cancer screening are:

Response of Participants:

Answer options

An annual digital rectal exam (DRE) in the office
A single fecal occult blood test (FOBT) in the office
done once a year

Annual FOBT with multiple samples from different days

All of the above are effective
Total

Pre-test	Post-test
2.0%	0.0%
9.2%	2.1%
47.3%	92.0%
41.5%	5.9%
100.0%	100.0%

The digital rectal exam is no longer considered to be an accepted method for colorectal cancer screening. These are not evidence based and are omitted from all consensus guidelines. A single FOBT in the office is not sensitive enough to satisfy the requirements of a screening test. A single FOBT in the office done once a year does not provide the benefit offered by recommended FOBT screening practices. The annual FOBT take home multiple sample method is an evidence based effective method. Every positive FOBT should be followed by a complete diagnostic examination with colonoscopy.

Source: How to Increase Colorectal Cancer Screening Rates in Practice: A Primary Care Clinician's Evidence-Based Toolbox and Guide, 2006, www.cancer.org.

NOTE: The Nebraska Colon Cancer Screening Program is available to both **men and women 50 years of age and older**. All FOBT kits will be provided to clients by the program. Screening with FOBT or colonoscopy outside of the program makes a client ineligible for screening services.

(Continued on Page 9)

Professional Education/Continuing Education

Six Successful EWM Provider Conferences (Continued from Page 8)

2. Blood pressure readings should be taken how often during a patient visit?

Response of Participants:

Answer options	Pre-test	Post-test
Once-within 5 minutes of their arrival	18.2%	1.6%
Twice - one at the beginning and one at the end	40.1%	11.7%
Not at all if it was normal at the last visit	0.0%	0.5%
Twice - 5 minutes apart with both readings noted in their chart	41.8%	86.2%
Total	100.0%	100.0%

Blood Pressure In-Office Measurement Technique: 2 readings, 5 minutes apart, sitting in chair. Confirm elevated reading in contralateral arm. [The auscultating method of blood pressure (BP) measurement with a properly calibrated and validated instrument should be used. Person should be seated quietly for at least 5 minutes in a chair (rather than exam table) with feet on the floor, and arm supported at heart level. An appropriate sized cuff (cuff bladder encircling at least 80% of the arm) should be used to ensure accuracy. Clinicians should provide to patients, verbally and in writing, their specific BP number and BP goals.]

Source: Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNCVII), www.nhlbi.nih.gov

NOTE: When BPs are requested on the Every Woman Matters annual screening card, document 2 BPs. JNCVII and the program funder, Centers for Disease Control and Prevention require 2 BPs.

Let's Hear It for Every Woman Matters!!!

These comments come directly from some of the 2,000+ letters of support received from women who have been served by Every Woman Matters and the Nebraska Colon Cancer Screening Program. **You, the provider and clinic staff that assist women to participate in the program, are appreciated!**

"I just think this is a wonderful program, especially for someone like me. I have had no health insurance for 18 months and am overweight and diabetic. This program has encouraged me to make positive lifestyle changes which will hopefully help lessen illness related medical expenses."

"How grateful I am to know there is some type of help for us who work hard but just don't make enough money to afford the outrageous costs of health care."

"Thank you for helping me stay alive to take care of my children. You are very special people who care about me and other women who cannot afford healthcare or insurance."

"EWM is a Godsend, if not for this program, I would probably go most of my life without the medical attention I need. Otherwise, I would have debts of medical bills I couldn't pay. Thanks so much for being there!!"

"I was deemed eligible for the colonoscopy program and saw a surgeon in Grand Island, who did the procedure and found a polyp, which was removed and biopsied with good results. I cannot fully express the relief and hope this program gave me."

"I am so thankful that my general practitioner suggested that I check into the program to see if I would be a potential client. To be truthful, if I hadn't been enrolled in EWM, I really don't think I would have consented to all the extra testing."

What is the Cancer Information Service? (Continued from Page 5)

PDQ contains the following peer reviewed summaries:

- **Treatment Summaries for Health Professionals and Patients:** detailed staging and treatment information for more than 80 different types of adult and pediatric cancers.
- **Supportive Care Summaries for Health Professionals and Patients:** information on the assessment and management of problems and conditions commonly associated with cancer and its treatment.
- **Screening Summaries for Health Professionals and Patients:** summaries of the latest information about cancer screening for major cancer sites.
- **Prevention Summaries for Health Professionals and Patients:** summaries of the latest information about cancer prevention for major cancer sites.
- **Genetics Summaries for Health Professionals:** information on the genetics of selected cancers and inherited genetic factors that can influence cancer risk.
- **Complementary and Alternative Medicine (CAM) Summaries for Health Professionals:** summaries of the latest information about the use of CAM in the treatment of cancer.
- **Clinical Trial Protocols:** ongoing and closed clinical trials from around the world. Protocol abstracts are available in health professional and patient formats.
- **National Cancer Institute Fact Sheets:** A collection of fact sheets that address a variety of cancer topics. Fact sheets are frequently updated and revised in accordance with the latest cancer research. Fact sheets are available by the following categories: Cancer Type, Risk Factors and Possible Causes, Prevention, Detection/Diagnosis, Cancer Therapy, Support/Coping/Resources, Tobacco/Smoking Cessation, Information Sources, About NCI, Cancer Health Disparities, and Cancer Advances In Focus. (www.cancer.gov/cancertopics/factsheet)
- **What You Need to Know About™..:** A patient focused publication series provides information on many types of cancer. Each publication includes information about symptoms, diagnosis, treatment, emotional issues, and questions to ask your clinician.
- **Publications Locator and Catalog:** An online system for finding, viewing, and ordering NCI reports, publications, and other materials. It offers the options of searching by topic, audience, and language. A catalog of available items, updated daily, can be printed for off-line use. NCI publications are free. However, there is a shipping and handling fee of 15 cents per copy for orders of more than 20 items (bulk orders). To cover the basic accounting costs associated with processing payments for bulk orders, NCI requires an \$8 minimum charge (<https://cissecure.nci.nih.gov/ncipubs/>)

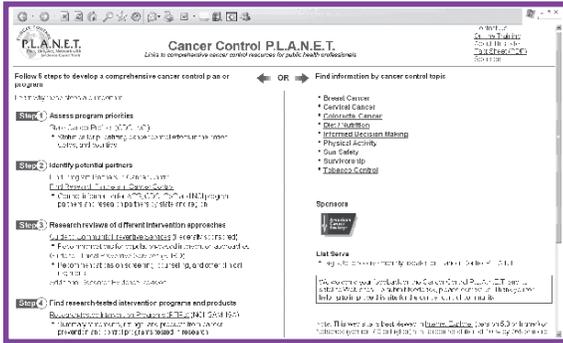
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Professional Education/Continuing Education

What is the Cancer Information Service? (Continued from Page 10)

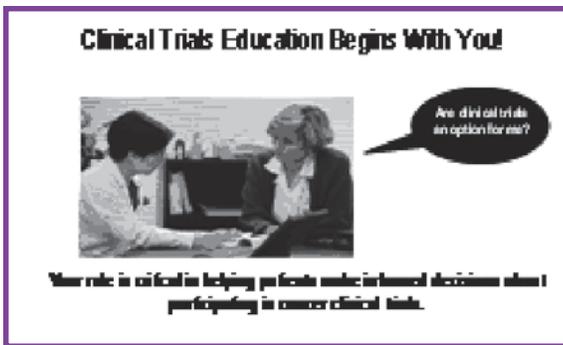
What resources are available through the CIS?

NCI/CIS provides training on evidence-based tools such as:



Cancer Control P.L.A.N.E.T. (Plan, Link, Act, Network with Evidence-based Tools), a website that provides access to data and research-tested resources that can help planners, program staff, and researchers to design, implement, and evaluate evidence-based cancer control programs.

(<http://cancercontrolplanet.cancer.gov/index.html>)



Clinical Trials Education Series, a program that engages participants in learning about clinical trials through case studies, computer-based training, and facilitated discussion.

(www.cancer.gov/clinicaltrials/learning/clinical-trials-education-series)



Understanding Risk.

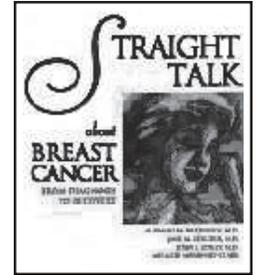
A new website from the National Cancer Institute, <http://understandingrisk.cancer.gov> cuts through the hype to help you understand the plain and simple truth about cancer risk. Interactive exercises, personal risk profiles, and information about risk for common cancers help put cancer risk into perspective.

If you have any questions or need further information about CIS products and services, contact Nebraska's Partnership Program Coordinator, Janelle Jacobson, MPH, CHES. She can be reached at (402) 471-1063 or via e-mail at janelle.jacobson@dhhs.ne.gov.

Resources

Does Your Clinic Have These Free Books to Give to Women Newly Diagnosed with Breast Cancer?

Straight Talk About Breast Cancer book was written by a Nebraska physician after her own treatment for breast cancer. The book is an excellent resource for English-language women that guides them through breast cancer, from diagnosis to recovery.



Guia Para la Mujer Sobre El Diagnostico Y El Tratamiento Del Cancer Del Seno (A Woman's Guide to Breast Cancer Diagnosis and Treatment) is a Spanish-language booklet about breast cancer that can serve as a valuable guide for women newly diagnosed with breast cancer.



It is the goal of Every Woman Matters, along with our partners, the Nebraska Medical Association and CIMRO of Nebraska (Medicare quality improvement organization) to make copies of both of these informative resources available **at no cost** to all Nebraska women recently diagnosed with breast cancer. Please call CIMRO at 1-800-458-4262 to order copies at no cost for your clinic today.

The Nebraska Department of Health and Human Services (NDHHS) is committed to affirmative action/equal employment opportunity and does not discriminate in delivering benefits or services.

Funds for this project were provided through the Centers for Disease Control and Prevention Breast and Cervical Cancer Early Detection Program, Well Integrated Screening and Evaluation for Women Across the Nation, and Colorectal Cancer Screening Demonstration Program Cooperative Agreements with the Nebraska Department of Health and Human Services System.
#U58/DP000811, #U58/DP001421, #U55/CCU725047

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www.dhhs.ne.gov/womenshealth/ewm



If you would like to see past issues of the provider newsletter "Every Provider Matters" please log onto our website at:
www.dhhs.ne.gov/womenshealth/ewm/ewmproviders.htm

If you would like to see past issues of the client newsletter "Healthy Ways...Healthy Days" please log onto our website at:
www.dhhs.ne.gov/womenshealth/ewm

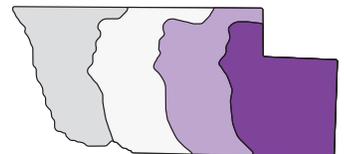
Please route to others in your clinic who may benefit from this newsletter:

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25-53-00

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NEBRASKA OFFICE OF WOMEN'S HEALTH



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