



Dartmouth-Hitchcock Medical Center

General Internal Medicine

Decision Support Project, 2007
(603) 653-xxxx

Enclosed is a video we would like you to watch before coming to your annual physical exam. *Please check the appropriate box:*

- I viewed the video and completed the questionnaire.
- I viewed the video. I prefer NOT to complete the questionnaire and be a research participant.

I did not view the video. *Why not?*

- I have a personal history of prostate cancer.
- I have a family history of prostate cancer.
- I have been evaluated for an elevated PSA
- I have already seen the video. Year _____
- I have already made my decision about the PSA test.
- I do not have the equipment to view a video/DVD

- I am too busy

- I prefer not to
- This mailing is too impersonal

Other _____

Please bring this form, the DVD and all study materials to your appointment. Thank you. Mary Smith, RN

CSDM ID #: