



## Cuff Kit Data Quarterly Report

Thank you for taking the time to provide us with a quarterly report. The reporting periods and due dates are as follows:

April 1, 2020 - June 30, 2020	<b>DUE: July 8, 2020</b>
July 1, 2020 - September 30, 2020	<b>DUE: October 7, 2020</b>
October 1, 2020 - December 31, 2020	<b>DUE: January 8, 2021</b>
January 1, 2021 - March 31, 2021	<b>DUE: April 7, 2021</b>

**Please ensure to implement ways of tracking data that will allow you to answer the following questions quarterly.** The survey will be emailed to you each quarter. **Do not use this form to submit your report.**

How many Cuff Kits did you distribute this reporting period? \_\_\_\_\_

Report the number of Cuff Kit recipients that were in each of the below age groups.

< 20		30-34	
20-24		35+	
25-29			

Report the number of Cuff Kit recipients that were in each of the below race groups. (Can go over total number of recipients if patients belong to more than one group)

White		Native Hawaiian or Other Pacific Islander	
Black		Native American	
Hispanic or Latino		Asian	

Report the number of Cuff Kit recipients that were in each of the below gestational periods.

1 <sup>st</sup> Trimester		3 <sup>rd</sup> Trimester	
2 <sup>nd</sup> Trimester		Postpartum	

How many Cuff Kit recipients presented a blood pressure log during visits?

	More than half		Less than half
	About half		None

Did the Cuff Kit influence patient care?

	Significantly influenced
	Somewhat influenced
	Did not influence

You will also be given an opportunity to report any challenges you have had implementing the Cuff Kit program and any additional feedback.