Triage Cancer Materials Request Form

Please complete the following request form to order educational materials from Triage Cancer. Please allow for 2 weeks for materials to arrive. For questions, please email info@triagecancer.org

Please note: the materials listed below are currently available for shipping. You can also print copies of these materials from our website. See the full library of resources at: TriageCancer.org/resources.

If you would like fewer than 25 copies of a resource, consider printing them from the website, to help us save on shipping costs. Thanks!

First Name: _____ **Last Name:** _____

Title: _____

Hospital/Organization: _____

Shipping Address for Materials: _____

City: _____ **State:** _____ **Zip:** _____

Email Address: _____

Phone Number (for questions): _____

Please share how these materials will be used: _____

_____

1. **Quick Guides and Checklists – Please identify the quantity that you are requesting, by topic. If you would like custom amounts, please note amounts below. *Check all that apply.***

	Quantity 25	Quantity 50	Quantity: Other (Indicate #)
Access to Medical Records	☐	☐	☐ _____
ADA & Reasonable Accommodations	☐	☐	☐ _____
Appeals: Individual & Employer Plans	☐	☐	☐ _____
Avoiding Financial Toxicity – Checklist	☐	☐	☐ _____
Caregiving	☐	☐	☐ _____
Chemo Brain	☐	☐	☐ _____
Crowdfunding	☐	☐	☐ _____
Disability Insurance	☐	☐	☐ _____
Disclosure, Privacy, & Medical Certification	☐	☐	☐ _____
Estate Planning	☐	☐	☐ _____
Finding Financial Help - Checklist	☐	☐	☐ _____
FMLA Extended	☐	☐	☐ _____

Quick Guides – *Continued*

	Quantity 25	Quantity 50	Quantity: Other (Indicate #)
Getting & Paying for Prescription Drugs	☐	☐	☐ _____
Getting Organized – Checklist	☐	☐	☐ _____
Health Insurance Basics	☐	☐	☐ _____
Health Insurance Marketplaces	☐	☐	☐ _____
Health Insurance Options	☐	☐	☐ _____
Health Insurance Comparison Worksheet	☐	☐	☐ _____
How the FMLA Works with Other Benefits	☐	☐	☐ _____
Legal Assistance	☐	☐	☐ _____
Life Insurance	☐	☐	☐ _____
Managing Medical Bills	☐	☐	☐ _____
Medicaid	☐	☐	☐ _____
Medicare 2024	☐	☐	☐ _____
Medicare Basics	☐	☐	☐ _____
Medicare Savings Programs	☐	☐	☐ _____
Medigap Plans	☐	☐	☐ _____
Medicare Plan Comparison Worksheet	☐	☐	☐ _____
Navigating SSDI & SSI	☐	☐	☐ _____
Options When Losing Employer-Sponsored Health Insurance	☐	☐	☐ _____
Reasonable Accommodations Checklist	☐	☐	☐ _____
Returning to Work	☐	☐	☐ _____
SSI	☐	☐	☐ _____
Timing of SSDI & Medicare Benefits	☐	☐	☐ _____

2. Spanish Quick Guides and Checklists – Please identity the quantity that you are requesting, by topic. If you would like custom amounts, please note amounts below. *Check all that apply.*

	Quantity 25	Quantity 50	Quantity: Other (Indicate #)
Disability Insurance	☐	☐	☐ _____
Estate Planning	☐	☐	☐ _____
FMLA Expanded	☐	☐	☐ _____
Finding Financial Help	☐	☐	☐ _____
Health Insurance Basics	☐	☐	☐ _____
Managing Medical Bills	☐	☐	☐ _____

Spanish Quick Guides – *Continued*

	Quantity 25	Quantity 50	Quantity: Other (Indicate #)
Options When Losing Employer-Sponsored Health Insurance	☐	☐	☐ _____
Reasonable Accommodations – Checklist	☐	☐	☐ _____

3. Practical Guides to Cancer Rights – Please identify the quantity that you are requesting, by topic. If you would like custom amounts, please note amounts below. *Check all that apply.*

	Quantity 25	Quantity 50	Quantity: Other (Indicate #)
Practical Guide to Cancer Rights	☐	☐	☐ _____
Caregivers: Practical Guide to Cancer Rights	☐	☐	☐ _____
Young Adults: Practical Guide to Cancer Rights	☐	☐	☐ _____
Seniors: Practical Guide to Cancer Rights	☐	☐	☐ _____
Spanish - Practical Guide to Cancer Rights	☐	☐	☐ _____
Spanish - Caregivers: Practical Guide to Cancer Rights	☐	☐	☐ _____

4. Flyers – Please identify the quantity that you are requesting, by topic. If you would like custom amounts, please note amounts below. *Check all that apply.*

	Quantity 25	Quantity 50	Quantity: Other (Indicate #)
Information Sheet on Triage Cancer	☐	☐	☐ _____
2024 Webinar Flyer	☐	☐	☐ _____
2024 Conference Flyer	☐	☐	☐ _____
Triage Health Flyer	☐	☐	☐ _____
Spanish - Information Sheet on Triage Cancer	☐	☐	☐ _____

5. Postcards – Please identify the quantity that you are requesting below.

	Quantity 25	Quantity 50	Quantity: Other (Indicate #)
CancerFinances.org	☐	☐	☐ _____
Animated Videos (English & Spanish)	☐	☐	☐ _____
MyHealthCareFinances.com	☐	☐	☐ _____

6. Drug Discount Cards – Please identify the quantity that you are requesting below.

	Quantity 25	Quantity 50	Quantity: Other (Indicate #)
Drug Discount Cards	☐	☐	☐ _____

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