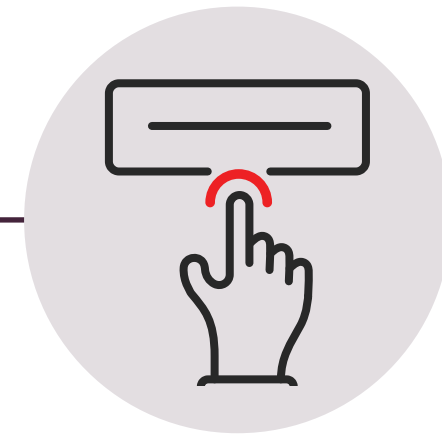
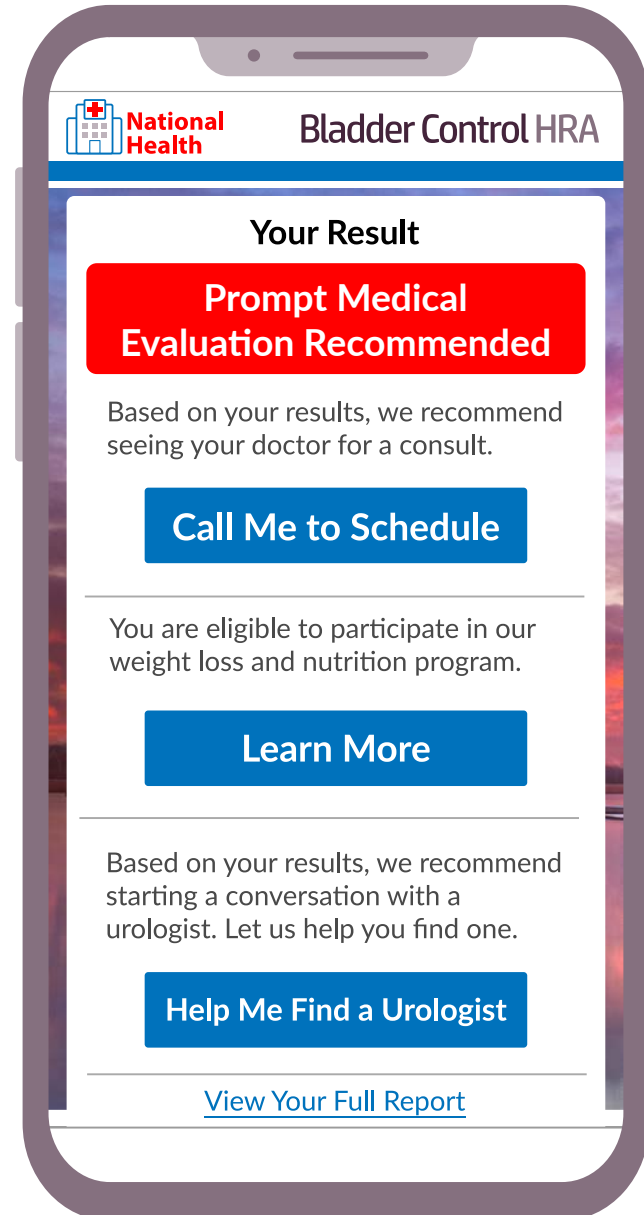




BLADDER CONTROL HRA

GOAL: PROMPT SYMPTOM EVALUATION VIA PRIMARY CARE



CUSTOMIZED CALL-TO-ACTION MESSAGES

Focus Call to Action (CTA) messaging in the follow-up section of portal on:

- Appointment scheduling with primary care.
- Health risk management programs.



FOLLOW UP

Follow up with the user as soon as possible to:

- Review the results report with them and inquire about previous urology assessments.
- Stress the importance of discussing their urinary symptom(s) with a health care professional to diagnose and treat the symptom(s).



NURTURING

Customize your nurturing content to explain:

- It's very important to talk to a health care professional to determine the cause of their urinary symptom(s) and treat the symptom(s).
- That ignoring urinary symptoms can lead to other health problems.



REFERRAL TO PRIMARY CARE

- Evaluation to determine the cause of urinary symptoms is needed. Subsequent referral to specialty service lines as needed.
- Refer current smokers and people with overweight or obesity to lifestyle modification programs or services as deemed appropriate.



PROMPT MEDICAL EVALUATION RECOMMENDED

People in this category report one or more of the following worrisome urinary symptoms:

- Visible blood in urine
- Pain with urination
- Pain in lower abdominal/genital area
- Trouble emptying the bladder

The presence of any one of these symptoms warrants a prompt evaluation by a health care professional.

These people are also told that any smoking (current or past history) in the presence of urine leaks is a risk factor for bladder cancer.

People in this category may report activity- and urgency-related leaks, frequent urination, and leaks not related to urgency or physical activity. However, their worrisome urinary symptoms take priority over any possible incontinence symptoms.

People in this category may report incontinence risk factors, including:

- Overweight or obesity
- Vaginal childbirth (women only)
- Post-menopause (women only)
- Surgery to pelvic area
- Chronic cough or sneezing
- High-impact activities over many years
- Regular consumption of bladder irritants
- Medications affecting bladder control



EXAMPLE PERSONA

Ricky is a 46-year-old man. He's experiencing fatigue because, for the past month, he's been getting up several times each night to urinate.

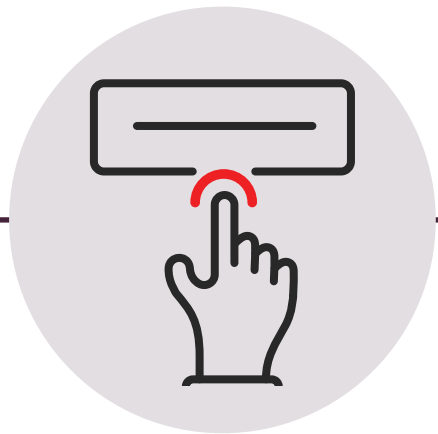
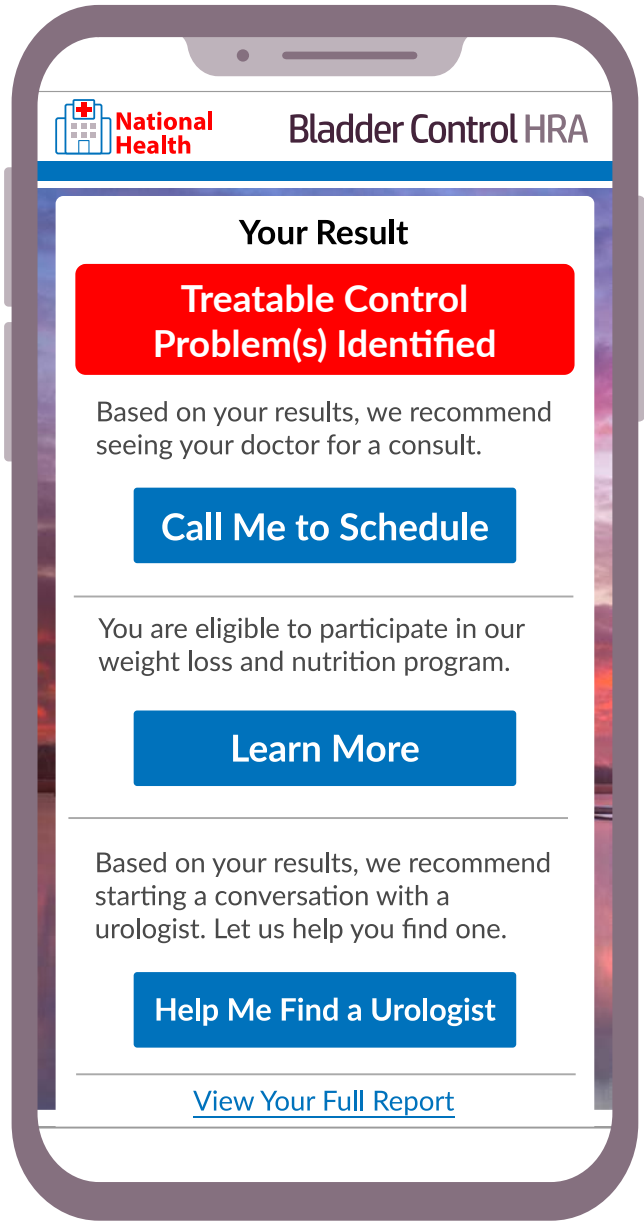
In addition to frequent urination, Ricky is having pain with urination, and he's seen blood in his urine several times.

Ricky is concerned enough about his ongoing symptoms to look into possible causes of frequent urination. Ricky thinks he has a urinary tract infection (UTI). He's unaware that these could also be symptoms of prostatitis, cancer, or several other health problems



BLADDER CONTROL HRA

GOAL: REFERRAL TO UROLOGY FOR EVALUATION



CUSTOMIZED CALL-TO-ACTION MESSAGES

Focus Call to Action (CTA) messaging in the follow-up section of portal on:

- Appointment scheduling with urology.
- Health risk management programs.



FOLLOW UP

Follow up with the user as soon as possible to:

- Review the results report with them and inquire about previous urology assessments.
- Reassure them that loss of bladder control is a treatable problem experienced by many people.
- Explain that urine leaks can happen for many reasons, and treatment depends on what's causing the bladder control problem.
- Explain that urologists have specialized training to diagnose and treat incontinence.



NURTURING

Customize your nurturing content to explain:

- It's important to talk to a health care professional about urine leaks to rule out a serious health problem as the cause.
- Ignoring urine leaks can result in infections or other health problems.
- People with a treatable type of incontinence can often completely control or greatly improve their symptoms.
- Symptoms may be treated or cured with lifestyle changes, non-invasive treatments, or surgery.



REFERRAL TO UROLOGY

- Evaluation to determine the cause of urine leaks is needed.
- These people may benefit from lifestyle changes (weight loss, dietary changes) in addition to non-surgical or surgical treatment options.
- Refer current smokers and people with overweight or obesity to lifestyle modification programs or services as deemed appropriate.



TREATABLE CONTROL PROBLEMS IDENTIFIED

People in this category report activity-related urine leaks that are greatly bothersome. Since these leaks may be due to stress urinary incontinence, people are urged to see a specialist to discuss their treatment options, including surgery.

In addition to activity-related leaks, people in this category may also report leaking with a sense of urgency and/or other leaks not related to urgency or physical activity.

These people do not report any of the worrisome urinary symptoms assessed in the HRA (see the Prompt Medical Evaluation Recommended category).

People in this category may report incontinence risk factors, including:

- Overweight or obesity
- Vaginal childbirth (women only)
- Post-menopause (women only)
- Surgery to pelvic area
- Chronic cough or sneezing
- High-impact activities over many years
- Regular consumption of bladder irritants
- Medications affecting bladder control

People are told that any smoking (current or past history) in the presence of urine leaks is a risk factor for bladder cancer. These leaks need a medical evaluation.

Worrisome urinary symptoms include blood in urine, pain with urination, pain in lower abdominal/genital area, or trouble emptying the bladder.



EXAMPLE PERSONA

Joy is a 33-year-old mother of 2 children. She started experiencing small urine leaks after the birth of her 1st child. Her leaks increased in frequency and quantity following the birth of her 2nd child.

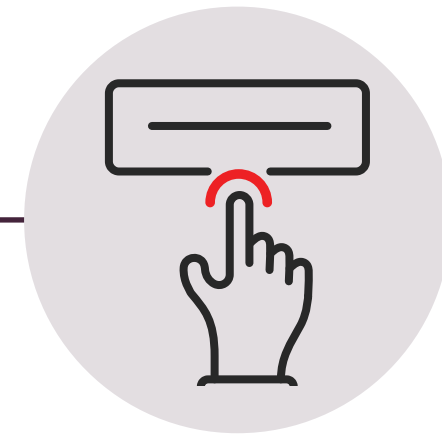
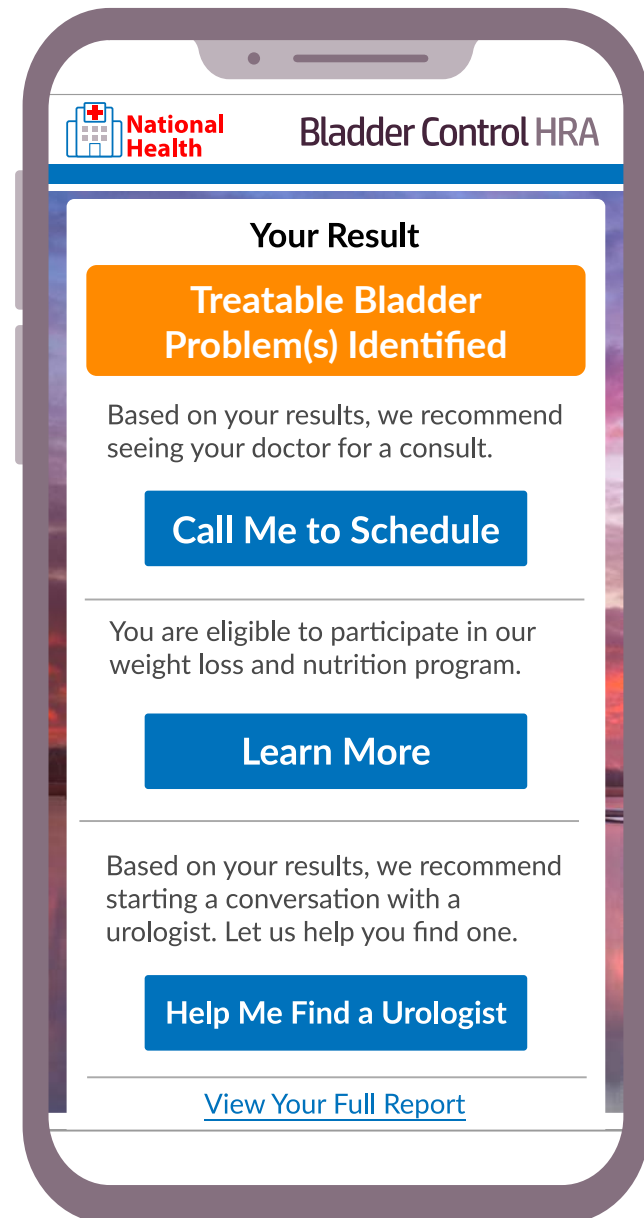
Joy is now wearing sanitary pads daily. She's had several embarrassing accidents while doing simple tasks like lifting her child. She finds herself afraid to engage in activities that might cause her to leak urine. Her quality of life has been greatly impacted by the loss of bladder control.

Since Joy's symptoms began after childbirth, she thought they were a normal part of motherhood. She also thought the leaks would eventually stop on their own. But her youngest child is almost 3 now, and Joy's leaks are getting worse. She desperately wants to regain her bladder control, so she's looking for treatment options.



BLADDER CONTROL HRA

GOAL: BLADDER CONTROL ASSESSMENT VIA PRIMARY CARE



CUSTOMIZED CALL-TO-ACTION MESSAGES

Focus Call to Action (CTA) messaging in the follow-up section of portal on:

- Appointment scheduling with primary care.
- Health risk management programs.



FOLLOW UP

Follow up with the user as soon as possible to:

- Review the results report with them and inquire about previous urology assessments.
- Reassure them that loss of bladder control is a treatable problem experienced by many people.
- Explain that urine leaks can happen for many reasons, and treatment depends on what's causing the bladder control problem.



NURTURING

Customize your nurturing content to explain:

- It's important to talk to a health care professional about urine leaks to rule out a serious health problem as the cause.
- Urine leaks can happen for many reasons, and treatment depends on what's causing the bladder control problem.
- People with a treatable type of incontinence can often completely control or greatly improve their symptoms.
- Ignoring urine leaks can result in infections or other health problems.



REFERRAL TO PRIMARY CARE

- Evaluation to determine the cause of urine leaks is needed.
- These people may benefit from lifestyle changes (weight loss, dietary changes) in addition to non-surgical or surgical treatment options.
- Refer current smokers and people with overweight or obesity to lifestyle modification programs or services as deemed appropriate.



TREATABLE BLADDER PROBLEMS IDENTIFIED

People in this category report one or more of the following:

- Leaks related to a sense of urgency
- Frequent urination
- Leaks related to activity

Symptoms of urge incontinence (top 2 bullets) and stress incontinence (3rd bullet) are individually rated by how much the person is bothered by the symptom (answers range from "not at all" to "greatly"). Exception: People greatly bothered by activity-related urine leaks are excluded from this category; please see the Treatable Control Problems Identified category.

People in this group may also report other leaks not related to urgency or physical activity.

They do not report any of the worrisome urinary symptoms. People in this category may report incontinence risk factors, including:

- Overweight or obesity
- Vaginal childbirth (women only)
- Post-menopause (women only)
- Surgery to pelvic area
- Chronic cough or sneezing
- High-impact activities over many years
- Regular consumption of bladder irritants
- Medications affecting bladder control

People are told that any smoking (current or past history) in the presence of urine leaks is a risk factor for bladder cancer. These leaks need a medical evaluation.

Worrisome urinary symptoms include blood in urine, pain with urination, pain in lower abdominal/genital area, or trouble emptying the bladder.



EXAMPLE PERSONA

Christine is a 62-year-old woman. She's had bladder control problems for a very long time, but they seem to have gotten worse since menopause. She still enjoys 3 cups of coffee every day, but otherwise doesn't consume bladder irritants.

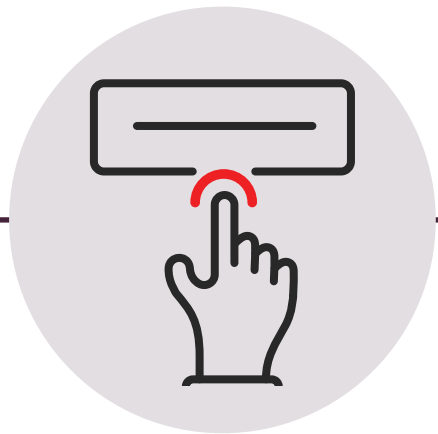
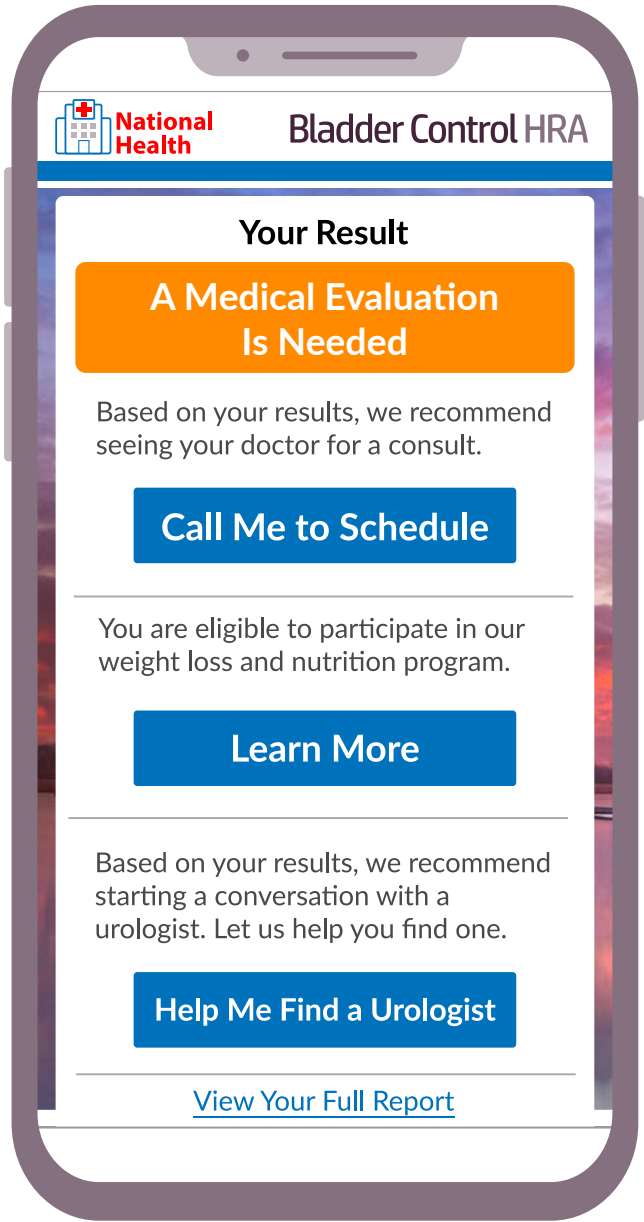
Christine makes over 8 visits to the bathroom daily and awakes twice each night to empty her bladder. In spite of frequent voiding, there are times Christine can't make it to the toilet in time. She's greatly bothered by frequent urination and urgency-related leaks.

Christine has always thought that loss of bladder control was an unavoidable, and untreatable, part of growing older. A recent advertisement she saw suggested that both of those beliefs were wrong, so she's looking into treatment options.



BLADDER CONTROL HRA

GOAL: HEALTH ASSESSMENT VIA PRIMARY CARE



CUSTOMIZED CALL-TO-ACTION MESSAGES

Focus Call to Action (CTA) messaging in the follow-up section of portal on:

- Appointment scheduling with primary care.
- Health risk management programs.



FOLLOW UP

Follow up with the user as soon as possible to:

- Review the results report with them.
- Stress that it's important to talk to a health care professional about urine leaks to rule out a serious health problem as the cause.
- Explain that urine leaks can happen for many reasons, and treatment depends on what's causing the bladder control problem.



NURTURING

Customize your nurturing content to explain:

- It's important to talk to a health care professional about urine leaks to rule out a serious health problem as the cause.
- Incontinence is often treatable.
- Ignoring urine leaks can result in infections or other health problems.



REFERRAL TO PRIMARY CARE

- Evaluation to determine the cause of urine leaks is needed. Refer to specialty service lines as needed.
- Refer current smokers and people with overweight or obesity to lifestyle modification programs or services as deemed appropriate.



A MEDICAL EVALUATION IS NEEDED

People in this category report experiencing leaks not related to urgency or physical activity. Since accidental urine leaks can happen for many reasons, these people are urged to see a health care professional for an evaluation of their incontinence.

These people do not report:

- Leaks related to a sense of urgency
- Frequent urination
- Leaks related to activity
- Any of the worrisome urinary symptoms assessed in the HRA

People in this category may report incontinence risk factors, including:

- Overweight or obesity
- Vaginal childbirth (women only)
- Post-menopause (women only)
- Surgery to pelvic area
- Chronic cough or sneezing
- High-impact activities over many years
- Regular consumption of bladder irritants
- Medications affecting bladder control

People are told that any smoking (current or past history) in the presence of urine leaks is a risk factor for bladder cancer. These leaks need a medical evaluation.

Worrisome urinary symptoms include blood in urine, pain with urination, pain in lower abdominal/genital area, or trouble emptying the bladder.



EXAMPLE PERSONA

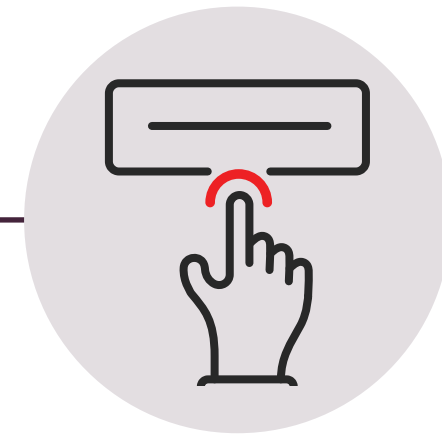
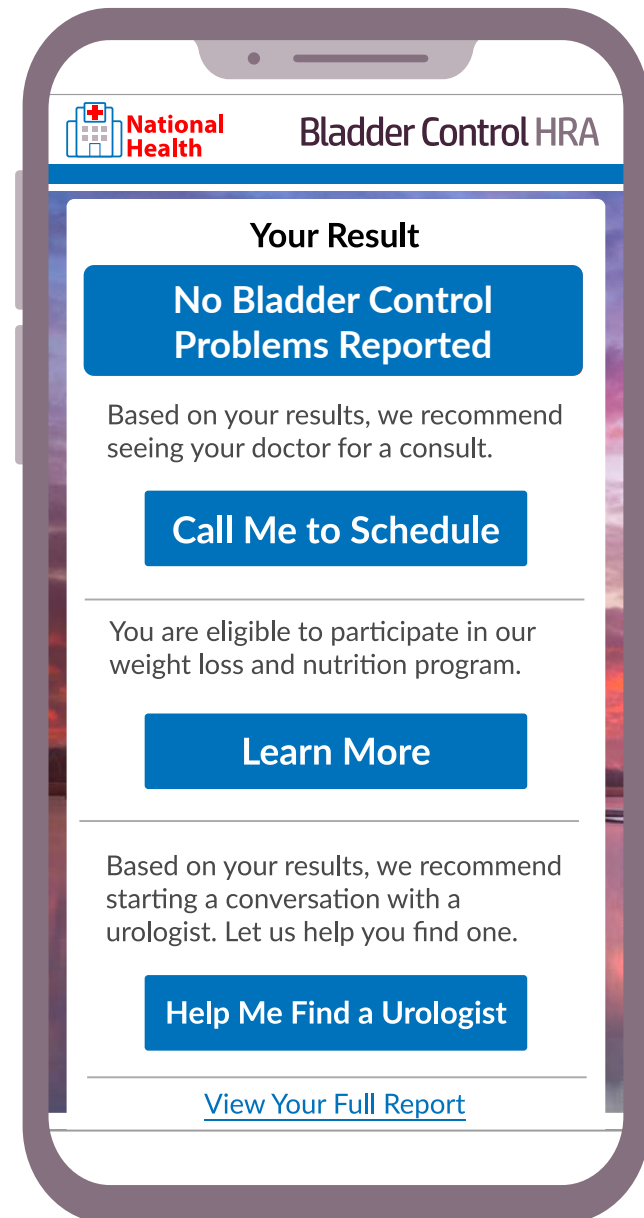
Ken is a 58-year-old man. He recently started randomly experiencing urine leaks. He has no other symptoms or bladder control issues.

Ken can't figure out why the leaks started. He's been waiting to see if the leaks would go away on their own. But things don't seem to be changing, so he's wondering if it's time to see a doctor.



BLADDER CONTROL HRA

GOAL: DISCUSS BLADDER CONTROL CONCERNS WITH PRIMARY CARE



CUSTOMIZED CALL-TO-ACTION MESSAGES

Focus Call to Action (CTA) messaging in the follow-up section of portal on:

- Appointment scheduling with primary care.
- Health risk management programs.



FOLLOW UP

Follow up with the user as soon as possible to:

- Review the results report with them and explain their results.
- Determine why they completed the Bladder Control HRA.
- Refer current smokers and people with overweight or obesity to lifestyle modification programs or services.



NURTURING

Customize your nurturing content to explain:

- Loss of bladder control is a treatable problem experienced by many people.
- They should tell a doctor of they if experience bladder control problems in the future.
- Certain lifestyle changes may lower the risk of future incontinence.



REVIEW BLADDER HEALTH WITH PRIMARY CARE

- People in this group should visit primary care to discuss any bladder control concerns they may have.
- Current smokers and people with overweight or obesity should be referred to lifestyle modification programs or services as deemed appropriate.



NO BLADDER CONTROL PROBLEMS REPORTED

People in this category report no urine leaks within the past 3 months and no frequent urination. These people may have experienced urine leaks in the more distant past (i.e., more than 3 months ago), or they may have none.

People in this category do not report any of the following worrisome urinary symptoms:

- Visible blood in urine
- Pain with urination
- Pain in lower abdominal/genital area
- Trouble emptying the bladder

For this group, follow-up inquiries about why they completed a bladder control assessment may uncover other urinary problems or concerns.

People in this category may report incontinence risk factors, including:

- Overweight or obesity
- Vaginal childbirth (women only)
- Post-menopause (women only)
- Surgery to pelvic area
- Chronic cough or sneezing
- High-impact activities over many years
- Regular consumption of bladder irritants
- Medications affecting bladder control

People are told that any smoking (current or past history) in the presence of urine leaks is a risk factor for bladder cancer. These leaks need a medical evaluation.



EXAMPLE PERSONA

Vanessa is a 24-year-old woman who leaked a small amount of urine while jumping on a trampoline about 6 months ago. Last week, she felt she was on the verge of a urine leak while running a 5K. Vanessa was able to control her bladder until she reached a toilet.

Vanessa had forgotten about the leak 6 months ago until she had the bladder control problem during last week's run. She's very active and doesn't want to start worrying about losing bladder control during physical activity.

She's researching possible causes of accidental urine leaks and available treatments.