

Coloplast® Care Program - Patient Enrollment Form

Additional ways to enroll your patients in the program:

Email: ClinicianCare@coloplast.com Website: www.ColoplastCareConnect.us

Call: 1-855-863-3912

∠ Click here to email this form**

Fax form to: 1-800-501-8533

1. Patient Information	
First Name*:	Last Name*:
Address*:	Apt#:
City*:	State*: Zip Code*:
Phone*: Email†:	to the receipt of personalized support through Coloplast® Care Online.
2. Optional Patient Information	
Date of Birth:/	
Date of Surgery: Type of Surgery: Colostomy Ileostomy Urostomy Stoma size: (Determines educational material in Care Kit)	
Preferred Supplier (optional)	
Primary Insurance Provider	Secondary Insurance Provider
Patient will transfer to: City City	
What product was worn at the time of patient discharge? Coloplast Hollister ConvaTec Other	
3. Sample*** Request Check product options below Adult Pouching Systems	w or write in Coloplast product numbers: Pediatric Pouching Systems Supporting Products Protective Seal
SenSura® Mio 1-Piece or 2-Piece Pouch Closure □ Flat □ 1-Piece □ Closed	Age (Older than 4? Refer to adult section) ☐ Belt ☐ XL Belt ☐ Regular ☐ Neonate (<6 months) ☐ Elastic Barrier Strip ☐ Wide
☐ Soft Convex ☐ 2-Piece Click ☐ Drainable	☐ Toddler/Child (up to 4 years) ☐ Y-shape ☐ Extra-Wide
☐ Convex Light ☐ 2-Piece Flex ☐ Urostomy ☐ Deep Convex ☐ High Output	☐ Curved ☐ Convex ☐ Christian ☐ Convex ☐ Straight ☐ Paste (alcohol-free)
☐ Convex Flip Cut Style Filter	☐ 1-Piece ☐ XL ☐ Strip Paste
SenSura® (standard) □ Cut-to-fit □ Yes □ Flat □ Pre-cut □ No	Pouch Closure Wipes Skin Barrier Wipes
Convex Light Pouch Color	☐ Drainable ☐ Lubricating Deodorant
SenSura Xpro ☐ Opaque (extended) ☐ Transparent	☐ Urostomy ☐ Living Well DVD ☐ Educational materials only
☐ Flat	Pouch Color Other Notes
☐ Convex Light	☐ Transparent
4. Clinician Name [#] :	
Facility Name*:	
Facility Address:	
City:	State: Zip Code:
Clinician Signature: Date:	
^{#1} I acknowledge that I have read the Coloplast [®] Care Program Description and Terms of Enrollment (found on the back of this page) to the patient and the patient consented.	

^{*}Indicates required field.

^{**}We recommend encrypting emails and forms if sending over email.

^{***}Limitations apply.

Coloplast® Care Program Description and Terms of Enrollment: Coloplast Care is a free product and lifestyle educational program designed to support patients with intimate healthcare needs. The program includes individualized product and lifestyle support which may include a welcome kit, and on-going phone, online and/or email support. Coloplast Care includes direct phone support with information and guidance about proper use of Coloplast products or these categories of products (Ostomy pouches and supporting products, Continence catheters, and Bowel Management). Patients do not need to use Coloplast products to receive support. Education also includes support in locating a product supplier, general reimbursement information, product types, proper use and troubleshooting of products, as well as on-going self-assessments. Personalized emails contain Coloplast Care website links to articles, advice, inspirational stories, and answers to lifestyle questions that may be of interest.

When you enroll in Coloplast® Care, Coloplast will use your information to provide you with education and support, product and lifestyle information, and helpful tips about living with your condition. If you request samples from us, we'll use your information to send, track and deliver your items. We may also call you to check you've received your order and answer any questions you may have about your order. We may let you know about Coloplast and its affiliated companies' current and future products and services, share inspirational stories from other customers, tell you about upcoming events. We may contact you by phone (including your cell phone if that is the number you provide), text message, e-mail, and mail. We also use the information you share with us to help us understand our customers, their medical conditions, and their needs when treating them. We also use your information to conduct research and data analytics. This helps us to improve our products and services and to develop new ones. We will only process this data on an aggregated level. If you provide photos, we may use these for the above purposes. We may also share your information with legitimate third parties if it is required to fulfill your request. For example, we share information with the health care provider who referred you to us, or to medical equipment companies from whom you can order supplies. We may share your information with Coloplast's affiliated companies, who may reach out regarding related products and services. Under very rare circumstances, we might be legally obligated to share your data with public authorities. We do not sell data to third parties. By enrolling in Coloplast Care, independently or through your health care provider, you agree that Coloplast may collect, use, transfer, and process your information for the purposes listed above. You also give Coloplast permission to interact with your health care provider or product supplier. You may withdraw your consent at any time, or unsubscribe from communications fro

