

**ATTACHMENT D: ADOLESCENT BEHAVIOR AND COMMUNICATION SURVEY
INFORMATION LETTER**

{To be printed on practice letterhead}

{Date}

{Patient address}

Dear Parent or Parents of {Patient Name}:

I am writing to let you know about a new process our practice is adopting to improve the care of adolescent youth.

We're adopting a new process to improve the completeness of the care we provide to adolescents. Many youth engage in activities that put their health at risk, but too often these activities are never discussed in office visits. Based on guidelines for adolescent health from the American Medical Association and others, a questionnaire that takes about 12 minutes has been developed for adolescents to complete in the waiting room. Starting July 1, we'll be asking youth between 12 and 18 to complete the questionnaire on a system that will alert the doctor if health risks are identified. If you have any questions about the new system, please call our office at xxx-xxx-xxxx.

While we implement this system, researchers at the University of Colorado Department of Family Medicine are interested in finding out whether it actually improves youth health. They are conducting a study in which adolescents complete a survey before we start using the system, and again six months later. I have enclosed information about the study, and I encourage you to consider allowing your child to enroll. **Please note that the study is completely voluntary. Whatever decision you make about enrollment, your child's care will not be affected.** If you have questions about the study, please call Doug Fernald MA at 303-724-9705

Thank you for choosing us to provide your child's care.

Very truly yours,

{Practice Director Name}