Participant Welcome Guide

Pacific Hub
University of Washington Medicine
MS Center

Gloria von Geldern, MD
ECHO MS Medical Director and Clinic Facilitator
vgeldern@uw.edu

Annette Wundes, MD
ECHO MS Medical Director and Clinic Facilitator
awundes@uw.edu

Darren Ball, M.Ed.
ECHO MS Shared Services Hub Coordinator
darren.ball@nmss.org
OVERVIEW

What is Project ECHO?

Project ECHO (Extension for Community Healthcare Outcomes) is a guided-practice model that aims to increase the workforce’s capacity by sharing knowledge. Specialist at the "hub" site meet regularly with providers in local communities via videoconferencing to increase knowledge, skills, and confidence in the delivery of specialty care services.

The ECHO model™ developed at the University of New Mexico Health Sciences Center does not actually provide care directly to patients. Instead, it provides front-line clinicians with the knowledge and support they need to manage patients with complex conditions in the patient’s own communities. This dramatically increases access to specialty treatment, particularly in rural and underserved areas.

Since the start of Project ECHO in 2003, the model has greatly expanded and has been implemented by over 400 hub sites in nearly 900 programs - both in the U.S. and internationally.

For more information, please visit: https://echo.unm.edu/

Core Principles of Project ECHO

The ECHO model develops knowledge and capacity for community clinicians through ongoing telementoring and education. The Project ECHO core principles are:

- Use technology to leverage scarce resources
- Share “best practices” to reduce disparities
- Use case-based learning to master complexity
- Monitor outcomes using a web-based database

How Does it Work?

A teleECHO session is essentially virtual grand rounds; provider participants from multiple locations connect at regularly scheduled times with a specialist or team of specialists through video conferencing. During teleECHO sessions, providers present de-identified patient cases to a specialist or expert teams who mentor the providers to manage patients with complex conditions. These case-based discussions are supplemented with short didactic presentations to improve content knowledge and share evidence-based practices.
As a participating healthcare provider in ECHO MS, you may:

- Present and discuss your challenging cases
- Enhance your ability to extend specialty care to your patients
- Reduce your patients' travel time and wait time for specialty care

How a Typical ECHO MS Session is Structured

- TeleECHO sessions take place via real-time, interactive videoconferencing, using a PC/Mac, laptop, tablet, or smart phone equipped with a webcam, and a versatile, user-friendly, HIPAA-complaint, cloud-based software application called Zoom. Zoom is available at no cost to participants.
- Pacific Hub Sessions are held twice a month on the 1st and 3rd Tuesdays from 11:30 a.m.-12:30 p.m. PT. The first session is on Tuesday, September 15. The final session will be on Tuesday, March 2, 2021.
- To view the schedule, please visit https://www.nationalmssociety.org/NationalMSSociety/media/MSNationalFiles/Professionals/Schedule-ECHO-MS.pdf
- Each session begins with introductions of all participants. Participant providers then present pre-submitted cases for discussion by the entire group, using de-identified information only. Use of PHI is not permitted either verbally or in writing. A Case Presentation Form is used for entering pertinent medical information. All participants are encouraged to contribute actively to the case discussion.
- Recommendations are summarized verbally at the end of a case presentation and transcribed and forwarded in writing to the provider participant whose case was discussed.
- At some point during the session, there is a short 15-20 minute didactic presentation on a scheduled topic. To view the curriculum please www.nationalmssociety.org/ECHOMS

Curriculum and CE

The didactic curriculum for ECHO MS was developed by the National MS Society Clinician Curriculum Workgroup and the three hub teams at Duke University, University of Washington, and Washington University in St. Louis.

Target Audience

This activity has been designed to meet the educational needs of physicians, nursing professionals, pharmacists, and other members of the healthcare team who manage patients with MS.
**Learning Objectives**
At the conclusion of this program, participants will:

- Increase their knowledge about multiple sclerosis management
- Improve their skills for accurate diagnosis and will decrease the time from initial exam to diagnosis
- Report an improvement in skills and confidence in treating and managing symptoms of MS
- Identify and explain specific clinical practice behavior changes related to knowledge, skills, and confidence in the diagnosis and management of MS

**Faculty**

**Pacific Hub Team at The University of Washington**

<table>
<thead>
<tr>
<th>Hub Team Member</th>
<th>Hub Team Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloria von Geldern, MD</td>
<td>Medical Co-Director and Clinic Facilitator</td>
</tr>
<tr>
<td>Annette Wundes, MD</td>
<td>Medical Co-Director and Rehabilitation</td>
</tr>
<tr>
<td>Kevin Alschuler, PhD</td>
<td>Psychology</td>
</tr>
</tbody>
</table>

**Accreditation Statement and Credit Designation**
In support of improving patient care, this activity has been planned and implemented by the Consortium of Multiple Sclerosis Centers (CMSC) and the National Multiple Sclerosis Society (NMSS). CMSC is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

**Physician Credit Designation Statement**
The CMSC designates this live activity for a maximum of 1.0 *AMA PRA Category 1 Credit(s)*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**Nursing Credit Designation Statement**
The CMSC designates this live activity for a maximum of 1.0 contact hours of continuing nursing education.

**Pharmacist Credit Designation Statement**
This knowledge-based activity qualifies for 1.0 contact hour of continuing pharmacy education credit.

**Physician Assistant**
The CMSC has been authorized by the American Academy of PAs (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with AAPA CME Criteria. This activity is designated for 1.0 AAPA Category 1 CME credits. PAs should only claim credit commensurate with the extent of their participation.
Certificate of Attendance for Other Healthcare Professionals
A Certificate of Attendance will be given upon completion of course requirements enabling attendees to register their credit with the appropriate licensing boards or associations. Attendees may apply for other accreditations using procedures established by specific organizations.

Commercial Support Acknowledgement
This continuing education activity is supported by an educational grant from Biogen, EMD Serono, and Genentech.

Disclosure of Financial Relationships
It is the policy of CMSC and the NMSS to ensure balance, independence, objectivity, and scientific rigor in all educational activities. All faculty, activity planners, content reviewers, and staff participating in this activity have disclosed any relevant financial relationships they or their spouse/life partner have within the previous 12 months with manufacturers of any commercial products/devices and/or providers of commercial services included in this educational activity. The intent of this disclosure is not to prevent a person with a relevant financial relationship from participating in the activity, but rather to provide participants with information on which they can base their own judgments. All presentations were reviewed by an independent clinician with no relevant financial relationships for the purpose of resolution of any identified conflict of interest and a determination of evidence-base and fair balance.

Faculty Disclosures
The program faculty reported the following relevant financial relationships that they have with commercial interests:

<table>
<thead>
<tr>
<th>Hub Team Member</th>
<th>Hub Team Role</th>
<th>Disclosures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloria von Geldern, MD</td>
<td>Medical Co-Director and Clinic Facilitator</td>
<td>No disclosures</td>
</tr>
<tr>
<td>Annette Wundes, MD</td>
<td>Medical Co-Director and Rehabilitation</td>
<td>No disclosures</td>
</tr>
<tr>
<td>Kevin Alschuler, PhD</td>
<td>Psychology</td>
<td>No disclosures</td>
</tr>
</tbody>
</table>

Staff Disclosures
The planners, reviewers, editors, staff, or other members at CMSC who are in a position to control content have no relevant financial relationships.

The planners, reviewers, editors, staff, or other members at the NMSS who are in a position to control content have no relevant financial relationships.

Disclosure of Unlabeled Use
CMSC and the NMSS require faculty to disclose to the attendees when products or procedures being discussed are off-label, unlabeled, experimental, and/or investigational (not FDA approved); and any limitations on the information that is presented, such as data that are preliminary or that represent ongoing research, interim analyses, and/or unsupported opinion. Faculty in this activity may discuss information about pharmaceutical agents that is outside of US Food and Drug Administration approved labeling. This
information is intended solely for continuing education and is not intended to promote off-label use of these medications. If you have questions, contact the medical affairs department of the manufacturer for the most recent prescribing information.

Disclaimer
CMSC and NMSS present this information for educational purposes only. The content is provided solely by faculty who have been selected because of recognized expertise in their field. Participants have the professional responsibility to ensure that products are prescribed and used appropriately on the basis of their own clinical judgment and accepted standards of care. CMSC and NMSS, and the commercial supporters assume no liability for the information herein.

If you have any questions about this activity, please contact the NMSS at 800-344-4867.

Participants will be able to view the PowerPoint slides onscreen during the didactic presentation and will receive a copy of the presentation.

Please note that the teleECHO session may be recorded for educational and quality improvement purposes. By participating in a teleECHO session, you are consenting to being recorded.

Evaluation Process

It is critically important for us to evaluate the effectiveness of our curriculum and program; thus, we ask ECHO participants to complete outcome surveys.

In addition, at the completion of the cohort you will be interviewed to measure outcomes related to practice behavior change.

CASE PRESENTATIONS

What Cases Should I Present?

You do not need to present a case to participate in an ECHO session. However, the submission of cases for presentation and discussion is a key component in the Project ECHO model and critically important for knowledge-building and sharing, and it is therefore strongly encouraged. We welcome cases that involve clinical management decisions to complex and challenging diagnosis scenarios.
What Information Should Be Included in a Case Presentation?

The Case Presentation Template will solicit demographic and relevant clinical information about the patient, including medical history, laboratory results, and relevant MRI findings.

- It is absolutely critical to preserve patient confidentiality at all times during case presentations. **No protected health information may be mentioned or shown during case presentations.** In addition, no other information that might identify the patient, such as social history details that may identify a patient residing in a small community, may be mentioned.
- Complete the Case Presentation Template with as much information as you can to help the ECHO MS community address your concerns/questions.

How do I sign-up to present a case?

- Please send a case presentation request email to echoms@nmss.org and include the session date you prefer to present. The presentation of your case will be scheduled on a first-come, first served basis.
- You will be provided a Microsoft Power Point template for your case presentation. We request that you use the template so that case presentations follow a consistent format during each ECHO session.

How to Present a Case

- Complete the Power Point Case Presentation Template and send to echoms@nmss.org
- An ECHO ID# will be assigned to your case, and this ECHO ID#, as well as the date of your scheduled case presentation, will be confirmed with you via email.
- During the teleECHO session, the session Facilitator will call on you to present your case. The presenter or the Clinic Coordinator at the NMSS will scroll through your Case Presentation Template on screen as you present your case. All videoconferencing participants will be able to see the Case Presentation Template.
- The session Facilitator will then promote discussion among all participants, starting with clarifying questions for the case presenter. At the conclusion of the discussion, the session Facilitator will summarize recommendations from all participants.
- The Hub Team will email the summarized recommendations back to the presenter within two days of the teleECHO session.
UNM's Project ECHO has created the following short videos on The Correct and Incorrect Ways to Conduct an ECHO Patient Presentation. Please take a few minutes to view these.

❖ The Correct Way to Conduct an ECHO Patient Presentation: https://www.youtube.com/watch?v=IUKGkoevTso&feature=youtu.be

LOGISTICS

How Do I Get Zoom?

• You may download the free version of the Zoom client for PC or Mac by visiting https://zoom.us/download and selecting Zoom Client for Meetings.
• You can also join a Zoom meeting if you use a hardware-based videoconferencing equipment.
• Instructions for downloading and the basic operations of Zoom are also included in this Participant Welcome Guide.

Connecting to a TeleECHO Session

• You will receive an email notification from the Clinic Coordinator at the NMSS several days before the start of each teleECHO session announcing the date, time, and title of the topic for that week's didactic presentation.
• One the date of the session, please join the session a few minutes prior to the scheduled start time using Zoom. This will give you enough time to confirm you have a stable internet connection, test your audio, and video, and get comfortably situated at your site locations. The Clinic Coordinator at the NMSS will open the Zoom session approximately 10 minutes prior to the start time.
• The ECHO MS schedule is available here

How Can I Receive Technical Support?

• For questions about Zoom, preparing for a teleECHO clinic session, or to schedule a time for testing, please contact our ECHO Clinic Coordinator, Darren Ball at: darren.ball@nmss.org
**ECHO MS CONTACT INFORMATION**

- Website: [www.nationalmssociety.org/ECHOMS](http://www.nationalmssociety.org/ECHOMS)
- Email: echo.ms@nmss.org
- ECHO MS Shared Services Hub Coordinator:
  Darren Ball
  darren.ball@nmss.org
  (804) 591-3043 direct
- Pacific Hub Clinic Co-Directors and Facilitators
  Gloria von Geldern
  vgeldern@uw.edu
  Annette Wundes
  awundes@uw.edu
ATTACHMENTS:
RESOURCE INFORMATION AND MATERIALS

• Videoconferencing Equipment
• Videoconferencing Etiquette
• Zoom Instructions for Joining a Meeting (Project ECHO)
• HIPAA Identifiers Sheet (Project ECHO)
• Case Presentation Content
• MS Navigator
• Using the National MS Society Referral Form
Videoconferencing Equipment

- **Camera**
  - Most computers have a built-in camera
  - If your computer doesn’t have a built-in camera and microphone, a simple USC webcam, such as a Logitech HD Pro Webcam C920, is all you need.
  - The NMSS has grant funding to purchase ECHO MS hardware for participants. Contact the Clinic Coordinator for equipment needs, Darren Ball at darren.ball@nmss.org

- **Microphone / Headset**
  - Most computers have a built-in microphone
  - You may also use a headset, depending on your needs or preferences, instead of your devices’ speakers and/or microphone. A headset may improve your overall audio experience, particularly if there are background noises in your local environment.
  - The NMSS has grant funding to purchase ECHO MS hardware for participants. Contact the Clinic Coordinator for equipment needs, Darren Ball at darren.ball@nmss.org

- **Conference room participation**
  - You may participate from a conference room
  - The NMSS has grant funding to purchase ECHO MS hardware for participants. Contact the Clinic Coordinator for equipment needs, Darren Ball at darren.ball@nmss.org

Video Teleconferencing Etiquette

- Join the video call from a quiet location with minimal background/ambient noise and little or no chance of interruption during the teleECHO session.
- Position yourself and your video camera so that you are well lit. Avoid backlighting situations, such as having a bright light source or window behind you.
- Keep in mind that others on the video call will be able to see everything that is your camera’s field of view. Ideally, position your camera to minimize any potential visual distractions. A solid background is optimal, though this is not always possible to achieve.
- Positioning your PC/Mac/smartphone/tablet in a stationary location, such as on a table or desk (using props, if needed), will give other viewers the best viewing experience of you and your locations, unless you specifically need to move the camera around to show something to the group. This will also generally provide better audio performance. Subtle movements generated by a hand holding even a smaller device, such as a smart phone or tablet, while on a videoconference call can be distracting.
- Position your device’s camera as close to eye level as possible.
- If you are videoconferencing as a solo participant, position yourself relative to your device’s camera so that the camera is capturing a relatively close-up view of you. Center yourself within the camera frame so that the area from the top of your head to around mid-chest level can be seen.
• If feasible, look toward the camera when speaking. This gives the other callers the best view of you while you are communicating with them and gives the appearance that you are making eye contact.

• Please fill in your name when joining the call via Zoom. You can do this by viewing the participant list at the bottom of the screen and editing your name. Your entry in the list will have "me" next to it and options for Mute/Unmute and Rename will appear. You can also right-click on your name in the box where your self-image is and edit from there. This is the name that the group will see. You can also add your healthcare center or location if you so choose (Example: Jane Doe - Yuma Regional).

• Test your audio and video prior to the start of the session.

**Recommended Practices:**

**For the attendee/participants:**

• Eliminate or reduce environmental distractions (i.e. turn off cell phones, avoid paper shuffling, turn off loud fans or other obtrusive noise, etc.)

• Join the meeting with your video and leave only one speaker unmuted to avoid feedback

• Make eye contact with the camera when you are speaking

• Speak clearly and in a conversational tone; start with your name to identify you as the speaker

• Provide adequate time for other people to respond to questions

• Try to take part in the discussion; use respectful and appropriate language

• Limit distracting body movements and broad gestures

• Dress professionally and appropriately; avoid bright colors and "loud" clothing

• Excuse yourself and leave the room if you need to have a side conversation or take a phone call

• If someone is speaking, let them finish, or signal your wish to talk to the facilitator

**Avoid…**

• Disclosing protected health information (PHI) or personally identifiable information (PII)

• Criticizing or reprimanding participants, even if they are incorrect

• Engaging in side conversations

• Talking over other people and not waiting for your turn

• Rude comments, behavior, and gestures

• Making extraneous noise such as rustling papers; conference microphones are very sensitive
Joining a meeting with Zoom

Downloading Zoom

You can download Zoom by going to https://zoom.us/download and download the Zoom Client for Meetings. Once Zoom is downloaded, please click on Join a Meeting.

Joining a meeting

Please enter the clinic’s meeting ID (provided by your clinic coordinator) and click Join.
Connecting Audio

Once you join the meeting, a window will appear asking you to **Join Audio by Computer**.

- Check the box for Automatically Join audio by Computer when joining a meeting in the bottom left corner of the Audio window.

  *Selecting “Automatically Join audio by Computer when joining a meeting” allows your audio connection to be automatically established the next time you join a Zoom meeting from your computer.*

- Click the Join Audio Computer button.

- After clicking on "Join Audio by Computer", you will see a message confirming that you're using the audio connection on your computer.
Testing Audio

Before the clinic begins, please test your microphone and speakers by clicking on the arrow pointing upward to the right of the microphone and selecting **Audio Options**.

Click on **Test Computer Audio** on the next Screen.

The **Test Speaker** button plays a sound to let you know the speaker is working. If you don’t hear anything, make sure your speakers are turned on. You can also select different speakers by clicking on the field next to the **Test Speaker** button.
The **Test Mic** button starts recording once you click it. It records a few seconds of audio and will play back the recording to let you know the microphone is working. If you don't hear anything, try selecting a different microphone by clicking on the field next to the **Test Mic** button.

![Test Mic button](image)

**General reminders**

- Remember to mute your microphone when you're not speaking. You can mute yourself by clicking on the microphone icon in the bottom left corner of the screen.
- Adjust your camera accordingly
  - Make sure your face is visible
  - Use front lighting instead of backlighting to prevent appearing as a shadow
- Zoom has two viewing options that can be toggled in the top right corner
  - **Gallery view** allows you to see all participants in the meeting
  - **Speaker view** allows you to view only the person that is speaking
HIPAA (Health Insurance Portability and Accountability Act) IDENTIFIERS

Regarding the safeguarding of protected health information (PHI) whether written, orally stated, or in electronic format, ECHO complies with State and federal guidelines.

When presenting your patient, please use the ECHO ID number you're provided and refrain from providing information containing names, initials, living location, place of work, birth date, or any specific information about the patient that helps identify them as this is considered "protected health information." It is our responsibility to ensure that protected health information is not disclosed.

HIPAA PHI: List of 18 Identifiers and Definition of PHI

1. Names;
2. All geographical subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes, except for the initial three digits of a zip code, if according to the current publicly available data from the Bureau of the Census: (i) The geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people and (ii) The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people is changed to 000.
3. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older;
4. Telephone numbers;
5. Vehicle identifiers and serial numbers, including license plate numbers;
6. Fax numbers;
7. Device identifiers and serial numbers;
8. Electronic mail addresses;
9. Social Security numbers;
10. Medical record numbers;
11. Health plan beneficiary number
12. Account numbers;
13. Certificate/license numbers; Vehicle identifiers and serial numbers, including license plate numbers; device identifiers and serial numbers;
14. Web Universal Resource Locators (URL);
15. Internet Protocol (IP) address numbers;
16. Biometric identifiers, including finger and voice prints;
17. Full-face photographic images and any comparable images; and
18. Any other unique identifying number, characteristic, or code (NOTE: this does not mean the unique code assigned by an investigator to code the data).
There are also additional standards and criteria to protect an individual's privacy from re-identification. Any code used to replace the identifiers in data sets cannot be derived from any information related to the individual and the master codes, nor can the method to derive the codes be disclosed. For example, a subject's initials cannot be used to code their data because the initials are derived from their name.

Case Presentation Content

Send an email to echoms@nmss.org to request to present a case. Cases will be presented using a Power Point template.

DO NOT INCLUDE PATIENT NAME OR OTHER PHI

1. Your Name:
2. Your Practice Location:
3. Topic for ECHO discussion:
   - Differential Diagnosis
   - DMT
   - Symptom management
   - Family Planning
   - COVID-19 and MS
   - Other: please list
4. Diagnosis:
   - Known:
   - Unknown
5. Patient’s Age: (Numerical answer)
6. Sex assigned at birth: ☐ Male ☐ Female
7. Gender Identity: ☐ Male ☐ Female ☐ Nonbinary
8. Race:
   - ☐ White
   - ☐ Black or African American
   - ☐ Asian
   - ☐ American Indian, Alaska Native
   - ☐ Native Hawaiian/Pacific Islander
   - ☐ Other
   - ☐ Unknown
Ethnicity:
☐ Hispanic or Latino
☐ Not Hispanic or Latino
☐ Unknown
☐ Other

9. Please provide brief history of present illness (DO NOT INCLUDE PATIENT NAME OR OTHER PHI)

10. Significant medical history (check all that apply):
☐ EBV
☐ Cancer
☐ Vascular disease
☐ Headache
☐ Diabetes Mellitus
☐ Hypertension
☐ Obesity
☐ Rheumatological disease
☐ Immunodeficiency disease
☐ Other, please list:

11. Relevant family history (please list diagnosis and family member):
☐ MS
☐ Cancer
☐ Vascular disease
☐ Headache
☐ Diabetes Mellitus
☐ Hypertension
☐ Obesity
☐ Rheumatological disease
☐ Other, please list:

12. Current or past substance use (check all that apply):
☐ Alcohol
☐ Smoking/inhaled
☐ Drug

13. Allergies:

14. Current medications:

15. Prior DMTs
   List name, dates used, response to treatment
16. Relevant labs completed and results:

17. Significant MRI findings:

18. Questions for ECHO MS:

**MS Navigator**

MS Navigators — highly skilled, compassionate professionals — connect you to the information, resources and support needed to move your life forward. These supportive partners help navigate the challenges of MS unique to your situation, providing:

- **Information and education** to help people with MS and their support teams powerfully advocate for what you need, when and how you need it
- **Emotional support resources** for people with MS as well as family and carepartners, including support groups and ways to connect with others living with MS
- Help through the complexities of finding a healthcare provider, benefits, insurance and access to coverage, and employment
- Resources to face financial challenges and plan for the future
- **Wellness strategies** that can make an impact on quality of life with MS including diet, exercise, emotional well-being, and connection to local wellness resources
- Assessment for personalized case management through the Edward M. Dowd Personal Advocate Program
- Crisis intervention in times of need

**Call, contact us online or join the discussion**

- 1-800-344-4867
- Contact Form
- Email: ContactUsNMSS@nmss.org
- MSconnection.org community discussions (including MS Navigators)
Using the National MS Society Referral Form

The secure online form authorizes the Society to contact the person who needs information/resources/services. The form is located here: [www.nationalmssociety.org/referral](http://www.nationalmssociety.org/referral)

BEFORE COMPLETING THE FORM

- **Please report concerns about possible abuse** and/or neglect of a patient to Adult Protective Services (APS). Locate the nearest APS office using the following link: napsa-now.org/get-help/help-in-your-area/
- **Explain the purpose of the form, and what the patient can expect.** It is important s/he understands that the form authorizes the Society to contact him/her directly.

COMPLETING AND SENDING THE FORM

- **Complete and submit the form.** All information on the form must be completed, particularly the name and contact information of the person being referred, and your name and email in order for us to process the referral.
- **Indicate which services you believe the individual needs to access.** Provide as much details as possible to aid us in understand the full scope of need.
- **The person being referred must give permission before you submit the form.** If there are any concerns about leaving a message indicating that we are the National MS Society, it needs to be noted on the form. They are also agreeing to the Society providing you a status update.
- Individuals will only start to receive mail from the Society if they check the box indicating they would like to be on the mailing list.
- Indicate who in the household, besides the patient, also has permission to speak to the Society staff person who calls.
- Complete online at [nationalmssociety.org/referral](http://nationalmssociety.org/referral)

WHAT HAPPENS AFTER YOU SEND THE FORM?

- **The form will be received by one of our** highly trained MS Navigator professionals equipped to respond to questions about living with MS and provide access to information about all types of resources and services available nationwide.
- An MS Navigator will make two attempts to contact an individual. If contact is not made, a message will be left with the MS Navigator’s name and contact information encouraging them to call the MS Navigator back.
- An initial email will be sent to the provider informing them of who the assigned MS Navigator is with their contact information and an invitation to provide more details or ask questions. A summary of how identified needs were addressed will be sent to the provider when service navigation work is complete.