



City Health Information

June 2004

The New York City Department of Health and Mental Hygiene Vol. 23(3):11-18

A Policy for a Healthier New York City

Take Care New York is a comprehensive health policy that sets an agenda of 10 key areas for intervention.

- It recommends coordinated action on evidence-based interventions by health care providers, City agencies, businesses, public-private partnerships, and individuals.
- It could save thousands of lives and prevent hundreds of thousands of illnesses each year.
- Its success depends greatly on the power of the clinical setting and on the influence of physicians and other providers such as yourself.



The Challenge for Physicians and Other Health Care Providers

By some measures, the health of New Yorkers has never been better. New Yorkers are living longer, infant mortality is declining, and many communicable diseases are under control.

But with focused effort, we can do much better.

Take Care New York sets specific goals in 10 key areas selected both for their importance and their amenability to evidence-based intervention and improvement. Many of the activities focus on the clinical care encounter as a critical opportunity for prevention. (The complete document is available at www.nyc.gov/html/doh/pdf/tcny/tcny-policy.pdf.)

Recent issues of *City Health Information* touch on many of the 10 areas (Treating Nicotine Addiction; Diabetes Prevention and Management; Detecting and Treating Depression; Preventing Colorectal Cancer; Prevention and Control of Influenza and Pneumonia; Contraception). Future issues will address more areas in detail.

This issue offers interventions in each of the 10 areas that are easily incorporated into everyday practice. They are simple, they are inexpensive, and they work. *They are the least we can do!*

I know that many of you are already doing some of these things, and that many of you are doing more. ***But imagine what could happen in New York City if all of us provided this care to all of our patients.*** We could save thousands of lives and prevent hundreds of thousands of illnesses every year.

We have begun to introduce Take Care New York to all New Yorkers, and some of your patients may ask you about it. I hope you will use our "Passport to Your Health," the personal health record that is key to our public education efforts. Please distribute it to all your patients so they can keep track of their blood pressure, weight, lipid testing results, vaccinations, and other critical health information. (Call 311 for copies of this and other patient education materials.)

I want to know what you think of Take Care New York and how to make it work in your practice. ***Please e-mail me with questions or comments at commissioner@health.nyc.gov.***

Sincerely,

Thomas R. Frieden, MD, MPH

Commissioner of Health and Mental Hygiene

10 STEPS to a LONGER and HEALTHIER LIFE

Key Interventions for Everyday Practice

1. HAVE A REGULAR DOCTOR OR OTHER HEALTH CARE PROVIDER

Get regular medical care to help stay healthy.

Having a primary care physician reduces deaths and lowers health care expenditures. But approximately 1.5 million adult New Yorkers say they do not have a regular doctor. Our data tell us that they are less likely than those with a doctor to be screened for cancer, less likely to be effectively treated for heart disease, and much less likely to be vaccinated.

Millions of New Yorkers also lack regular care because they don't have health insurance. In 2002, nearly a third of all adult New Yorkers without insurance said they were not able to obtain needed care — a rate twice that of publicly insured New Yorkers and 6 times that of privately insured people.

What Providers Can Do

- Reinforce the importance of having a primary care provider and promote and monitor the continuity of care among your patients.
- Prominently display the insurance plans in which you participate.
- Encourage patients without health insurance to enroll in public insurance plans.

More Information

- Patients can call 311 for information on public insurance programs, including Family Health Plus, Child Health Plus, and the Prenatal Care Assistance Program, or visit: www.nyc.gov/html/doh/html/stat/plus2.html

All URL's mentioned in this issue are available at:
www.nyc.gov/html/doh/pdf/chi/chi23-3-res.pdf

2. BE TOBACCO-FREE

Quit smoking and avoid second-hand smoke to prolong your life and protect those around you.

Smoking is the #1 cause of preventable death in New York City, killing 10,000 people a year. Second-hand smoke also kills and causes illness. For smokers ready to quit, counseling, nicotine replacement therapy, and bupropion can each *double* quit rates.

What Providers Can Do

- Ask every patient about smoking at every visit, and assess exposure to second-hand smoke.
- Advise every smoker to quit at every clinical visit. Be firm, positive, and clear, and tailor your advice to *this* patient.
- Prescribe nicotine replacement therapy and/or bupropion for all smokers who are trying to quit, unless contraindicated. (*Contraindications are very rare.*)
- Recommend that all patients establish a smoke-free household.

More Information

- Treating nicotine addiction: www.nyc.gov/html/doh/pdf/chi/chi21-6.pdf
- Free help quitting: Patients can call 311 and ask for the Smokers' Quitline

3. KEEP YOUR HEART HEALTHY

Keep your blood pressure, cholesterol, and weight at healthy levels to prevent heart disease, stroke, diabetes, and other diseases.

Risk factors for cardiovascular disease (in addition to smoking) are highly prevalent among adult New Yorkers: 74% get no regular physical activity; 26% have hypertension; 26% have elevated cholesterol, and 18% are obese.

What Providers Can Do

- **Screen patients 18 and older for hypertension.**
Provide lifestyle modification counseling to patients with systolic values greater than 120 or diastolic values greater than 80. Consider drug therapy and ensure adequate control for those with systolic blood pressure greater than 140 or diastolic blood pressure greater than 90.
- **Screen patients for high cholesterol.**
Screen all men 35 and older, and all women 45 and older with nonfasting total cholesterol and high-density lipoprotein (HDL-C). Begin screening at age 20 for patients with other risk factors for coronary heart disease. Treat if indicated and ensure adequate control. The lower the LDL cholesterol, the better.
- **Encourage physical activity.**
Recommend that all patients get at least 30 minutes of moderate-to-vigorous physical activity (such as a brisk walk) at least 4 days per week. Specific prescriptions for physical activity may help.

- **Weigh all patients and calculate the body mass index.**
Develop a treatment plan for patients with a BMI of 25 or higher (see Table 1). Advise overweight and obese patients to increase physical activity, cut calories, limit consumption of non-diet sodas and fast food, and avoid eating while watching TV.
- **Measure fasting plasma glucose in all overweight persons 45 and older.** Patients have “pre-diabetes” if fasting glucose is 101 to 125 mg/dL, and diabetes if the level is 126 mg/dL or higher. Provide intensive lifestyle modification advice for persons with pre-diabetes. Fully evaluate and effectively control the **ABC’S** for persons with diabetes: **A**1C below 7; **B**lood pressure below 130/80; **C**holesterol (LDL) below 100; and **S**moke-free.

More Information

- Clinical guidelines for blood pressure control: www.nhlbi.nih.gov/guidelines/hypertension/index.htm
- Clinical guidelines for cholesterol control: www.nhlbi.nih.gov/guidelines/cholesterol/index.htm
- Clinical guidelines for diabetes: www.nyc.gov/html/doh/pdf/chi/chi22-3.pdf

TABLE 1. BODY MASS INDEX (BMI) FOR ADULTS

Locate height and weight range. The number at the top of the column is the BMI. Maximum healthy weight is defined as BMI < 25.

BMI	Healthy Weight						Overweight					Obese										Extremely Obese					
	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Weight in Pounds																											
4'10"	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167	172	177	181	186	191	196	201	205	210	215
4'11"	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173	178	183	188	193	198	203	208	212	217	222
5'	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179	184	189	194	199	204	209	215	220	225	230
5'1"	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185	190	195	201	206	211	217	222	227	232	238
5'2"	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191	196	202	207	213	218	224	229	235	240	246
5'3"	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197	203	208	214	220	225	231	237	242	248	254
5'4"	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204	209	215	221	227	232	238	244	250	256	262
5'5"	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210	216	222	228	234	240	246	252	258	264	270
5'6"	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216	223	229	235	241	247	253	260	266	272	278
5'7"	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223	230	236	242	249	255	261	268	274	280	287
5'8"	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230	236	243	249	256	262	269	276	282	289	295
5'9"	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236	243	250	257	263	270	277	284	291	297	304
5'10"	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243	250	257	264	271	278	285	292	299	306	313
5'11"	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250	257	265	272	279	286	293	301	308	315	322
6'	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258	265	272	279	287	294	302	309	316	323	331
6'1"	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265	272	280	288	295	302	310	318	325	333	340
6'2"	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272	280	287	295	303	311	319	326	334	342	350
6'3"	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279	287	295	303	311	319	327	335	343	351	359
6'4"	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287	295	304	312	320	328	336	344	353	361	369

Source: National Heart, Lung and Blood Institute (www.nhlbi.nih.gov/guidelines/obesity/bmi_tbl.htm). To calculate exact BMI: weight in pounds ÷ height in inches squared X 703.

BMI is a general measure and healthy limits may vary for some groups.

4. KNOW YOUR HIV STATUS

Get tested for HIV. Reduce risky behaviors and use condoms to protect yourself and others.

Too many New Yorkers living with HIV (1 in 4 of those infected) do not even know they have it. Only 26% of New Yorkers age 18 to 64 report a recent HIV test. Learning your patient's HIV status is key to counseling about preventive measures for both HIV-positive and HIV-negative persons. Early diagnosis of HIV infection prolongs the patient's life and helps stop the epidemic.

What Providers Can Do

- Ensure routine, voluntary HIV testing for all patients.
- Counsel all patients on safer sex and condom use.
- Counsel all patients who are unable or unwilling to stop injection drug use on safer injection practices, including the importance of using sterile needles and the dangers of needle-sharing.

More Information

- The Department's public clinics offer free and confidential HIV testing, and testing and treatment for sexually transmitted diseases: www.nyc.gov/html/doh/html/std/std2.html
- A list of syringe exchange programs: www.harmreduction.org/usnep/newyork/hours.html

5. GET HELP FOR DEPRESSION

Depression can be treated. Talk to your doctor or a mental health professional.

Depression is common. In 2002, 6% of adult New Yorkers reported experiencing nonspecific psychological distress in the past 30 days. Medication and psychotherapy, alone or in combination, can help 70% of people with depression.

What Providers Can Do

- Screen all patients for depression with a 2-question tool (*see Table 2*).
- Comparing depression to other chronic

TABLE 2. SCREEN FOR DEPRESSION

During the past month, have you been bothered by:

1. Little interest or pleasure in doing things?
2. Feeling down, depressed, or hopeless?

If the answer to either question is "yes," follow up with the PHQ-9, a 9-item, self-administered questionnaire (*see More Information*).

illnesses may help patients feel less stigmatized. Prescribe antidepressants when necessary.

- Screen all depressed patients for suicidal ideation. Refer to specialty mental health services patients who express suicidal ideation, who fail to improve, or who are otherwise at high risk or require specialty services.

More Information

- 9-item, self-administered PHQ-9 screen for depression: www.depression-primarycare.org/clinicians/toolkits/materials/forms/phq9/questionnaire
- A clinical guide for the recognition and treatment of depression: www.nyc.gov/html/doh/pdf/chi/chi23-1.pdf
- Treatment referrals for providers and patients for depression and other mental health problems: 1-800-LIFENET (1-800-543-3638) or call 311

6. LIVE FREE OF DEPENDENCE ON ALCOHOL AND DRUGS

Get help to stop alcohol and drug abuse. Recovery is possible.

Problem drinking is defined as either "heavy drinking" (an average of more than 2 drinks per day for men, and more than 1 for women) or "binge drinking" (consuming 5 or more drinks at one sitting for men and more than 4 drinks for women). Among adult New Yorkers, 22% of men and 11% of women reported problem drinking in 2002. One in 30 New York City adults is addicted to heroin or opiate derivatives.

What Providers Can Do

- Screen for alcohol dependence using the acronym **CAGE** (see Table 3).
- If screening suggests problem drinking, provide brief counseling, feedback, and strategies to reduce drinking. Effective interventions generally include feedback on personal risk and setting specific goals to help reduce drinking. Provide follow-up, ongoing support, and, if necessary, treatment referrals.
- Speak openly with your patients about drug use; addiction is an illness, and treatment works. Help reduce harm to those who can't or won't stop using by stressing the importance of clean, unshared needles, preventing overdose, and treating medical conditions. Referrals for treatment and medications may also be appropriate, including methadone, buprenorphine, or abstinence approaches.
- Consider becoming certified to prescribe buprenorphine, a new oral medication for heroin and other opiate addiction that can be dispensed routinely in pharmacies.

More Information

- Brief counseling for alcohol dependence: www.niaaa.nih.gov/publications/aa43.htm
- Becoming a certified buprenorphine provider: http://buprenorphine.samhsa.gov/bwns/waiver_qualifications.html

TABLE 3. SCREEN FOR ALCOHOL WITH 'CAGE'*

Have you ever:

- Thought you should **C**ut down on your drinking?
- Become **A**nnoyed when people criticize your drinking?
- Felt bad or **G**uilty about your drinking?
- Taken an **E**ye-Opener drink to feel better in the morning?

*CAGE is an international assessment instrument for identifying alcoholics.

Adapted from: Ewing JA. Detecting alcoholism: the CAGE questionnaire. *JAMA*. 1984; 252: 1905-1907.

- Referrals for providers and patients for alcohol and drug treatment: 1-800-LIFENET (1-800-543-3638) or call 311
- Alcoholics Anonymous: 212-647-1680 or www.nyintergroup.org

7. GET CHECKED FOR CANCER

Colonoscopy, Pap smears, and mammograms save lives.

In 2002, 50% of New Yorkers 50 years and older reported never having undergone sigmoidoscopy or colonoscopy. Last year, more than 1,500 New Yorkers died from colon cancer. Similarly, cervical cancer is completely preventable but still kills 150 women every year. One out of 4 New York City women 40 and older do not get regular mammograms.

What Providers Can Do

- Ensure that all patients 50 and older, and others at high risk for colon cancer, get a colonoscopy every 10 years.
- Ensure that all women 18 to 64, and others at high risk for cervical cancer, receive Pap smears according to the recommended schedule.
- Ensure mammography for all women 40 and older, and others at high risk for breast cancer.

More Information

- Colon cancer screening: www.nyc.gov/html/doh/html/cancer/cancercolon_actionkit.html
- Cervical cancer screening: www.ahcpr.gov/clinic/uspstf/uspsscerv.htm
- Mammography screening: www.ahcpr.gov/clinic/uspstf/uspssbrca.htm

8. GET THE IMMUNIZATIONS YOU NEED

Everyone needs to be vaccinated, regardless of age.

More than half a million New Yorkers get the flu every year, and more than 2,000 die from both influenza and pneumonia. Only 63% of New Yorkers 65 and older received influenza immunization in the 2002-03 season and only 50% have ever been immunized against pneumococcus. Persons 65 and older who are not immunized against influenza are *twice as likely to die* during influenza season.

What Providers Can Do

- Provide annual influenza vaccination to all patients 50 and older, children 6 to 23 months, and others at high risk of complications from the flu.
- High-risk individuals include pregnant women; those with underlying renal, cardiac, or pulmonary disease; and people with asthma, diabetes, or immunocompromised systems.
- Provide pneumococcal vaccine to all patients 65 and older and others at high risk.
- Ensure that all patients receive all indicated immunizations (e.g., tetanus/diphtheria boosters for adults and all recommended childhood vaccines).
- Establish mechanisms to reach 100% of patients, for example:
 - Post the immunization history/record prominently in the chart.
 - Implement standing orders for immunizations if a nurse is available.
 - Use a tracking system with built-in patient reminders to improve immunization coverage levels.
- Implement a refusal form, requiring patient signature, for all patients who refuse vaccination.

More Information

- Immunization information for providers: www.nyc.gov/html/doh/html/imm/immpinf.html

9. MAKE YOUR HOME SAFE AND HEALTHY

Have a home that is free from violence and free of environmental hazards.

Domestic Violence

Domestic violence is the leading cause of serious injury to women, and contributes to child abuse and poor pregnancy outcomes. In 2002, 30% of all women murdered in New York City were killed by intimate partners. Most victims are women, but men can be victims, too. Domestic violence occurs in all groups, regardless of race/ethnicity, income, age, education, religion, immigration status, or sexual orientation. Recent national surveys indicate that only 8% of abused women tell a doctor about the abuse, *but that many more would if asked.*

What Providers Can Do

- Screen all adolescent and adult women for domestic violence, document it in the medical record, and provide referrals.
- Be alert for ambiguous signs of abuse, including unexplained injuries, frequent use of pain medications, and the constant or overbearing presence of a male partner.
- **Safety first.** While many abused women may eventually benefit from mental health treatment, what they need most urgently is physical safety and help with logistics.

More Information

- Help for patients: Domestic Violence Hotline: 1-800-621-HOPE (1-800-621-4673)
- Recognizing and treating victims of domestic violence (brief guidelines from the American Medical Association): www.opdv.state.ny.us/health_humsvc/health/deskref.html

Lead Poisoning

In 2002, almost 4,000 young children in New York City were identified with elevated blood lead levels. In violation of New York State law, 1 in 7 children has not been tested for lead at age 1 and 2 years.

What Providers Can Do

- Advise families with young children living in old, deteriorated housing that landlords are required by law to fix peeling and chipping paint at no cost to families. Families can call 311 if the landlord does not fix the problem.
- Screen all children for lead poisoning at ages 1 and 2 years.
- Provide lead poisoning prevention guidance to all families with children younger than 6 years. Assess the child's risk of lead poisoning and test if the risk is high.

More Information

- Legally mandated childhood blood lead screening, risk assessment, and risk reduction education: www.nyc.gov/html/doh/pdf/chi/chi17-2.pdf (*A new issue is in press.*)
- Report a blood lead level of 10 ug/dL or higher in a child: call 212-676-6158
- Consult with a physician on the management of a child with an elevated blood lead level: call 212-676-6100

**Continuing Medical Education/
Continuing Nursing Education Activity**

**Take Care New York:
A Policy for a Healthier New York City**

SPONSORED BY THE NEW YORK CITY DEPARTMENT
OF HEALTH AND MENTAL HYGIENE

CITY HEALTH INFORMATION
Vol. 23 No.3 June 2004

Objectives:

At the conclusion of this CME, participants should be able to:

1. Delineate the 10 priority areas for TCNY.
2. Describe action items for each priority area.
3. Discuss the impact on New Yorkers of the preventable causes of premature morbidity and mortality discussed in the issue.
4. Access resources for professional education on the preventable causes of morbidity and mortality discussed in the issue.
5. Access resources for patient education and referral.

Accreditation:

The continuing medical education (CME) activity is open to physicians (MDs, DOs) and physician assistants. The New York City Department of Health and Mental Hygiene is accredited by the Medical Society of the State of New York to sponsor continuing medical education for physicians. The New York City Department of Health and Mental Hygiene designates this continuing medical education activity for a maximum of 1.5 hours in Category One credit toward the AMA/PRA (Physician's Recognition Award). Each physician should claim only those hours of credit that he/she actually spent on the educational activity.

Participants in CME activities sponsored by the NYC DOHMH are required to submit their name, address, and professional degree. Such information will be maintained in the

Department's CME program database. If participants in CME activities so request, the information will be used by the CME Program to verify whether a professional participated in an activity and, if the activity was associated with an exam, passed the exam.

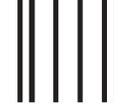
The Department will not share information in the CME database with other organizations without permission from persons included in the database, except in certain emergencies or disasters where public health agencies deem communication with all health care providers to be essential or where required by law.

Participants who provide e-mail addresses upon registration for an activity may receive electronic announcements from the Department about future CME activities as well as other public health information.

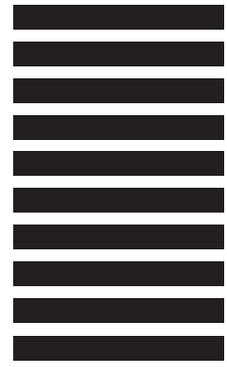
The Continuing Nursing Education (CNE) activity is open to nurses. The NYC DOHMH is an approved provider of continuing education by the New York State Nurses Association, which is accredited as an approver of continuing education in nursing by the American Nurses Credentialing Center's Commission on Accreditation. A total of 1.2 contact hours will be awarded to nurses for participation in this activity.

Participants must submit the accompanying exam by June 30, 2005.

CME/CNE Faculty: Henning KJ, Bassett MT, Silver L, Sederer LI, Lyman A. The Faculty have no financial arrangements or affiliations with commercial entities whose products, research, or services may be discussed in this issue.



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10. HAVE A HEALTHY BABY

Planning pregnancy helps ensure a healthy mother and a healthy baby.

Unintended pregnancy is associated with poor maternal and infant outcomes. In 2002, fewer than half of New York City pregnancies were planned.

What Providers Can Do

- Discuss pregnancy planning, birth control options, and where to obtain services such as emergency contraception, if not available at your office.
- Ensure that all women, including adolescents under 18, receive confidential birth control and abortion information and services without parental consent, spousal consent, or proof of citizenship.

- Prescribe a folic acid supplement (400 mcg/day) for all women of child-bearing age. A daily multivitamin preparation may be a convenient option.
- Offer HIV counseling and testing.
- Advise safer sex practices and the avoidance of second-hand smoke, alcohol, and other drugs, especially during pregnancy.

More Information

- Folic acid:
www.cdc.gov/doc.do/id/0900f3ec800523d6
- Emergency contraception:
www.nyc.gov/html/doh/html/ms/ms6.html
- Patients can call the Women's Healthline at 311

This issue of *City Health Information*, including the continuing education activity, can be downloaded from the publications section at nyc.gov/health. To access *City Health Information* and Continuing Medical Education online, visit www.nyc.gov/html/doh/html/chi/chi.html

Instructions

Read this issue of *City Health Information* for the correct answers to questions.

To receive continuing education credit, you must answer 4 of the first 5 questions correctly.

If you would like to participate in this activity by submitting the response card:

1. Complete all information on the response card, including your name, degree, mailing address, telephone number, and e-mail address. PLEASE WRITE CLEARLY.
2. Select your answers to the questions and check the corresponding boxes on the response card.
3. Return the response card or a photocopy of the card postmarked no later than June 30, 2005. Mail to: CME Administrator, NYC Department of Health and Mental Hygiene, 125 Worth Street, CN-29C, New York, 10013.

1. Preventive screening is indicated for:

- A. Patients 18 and older for hypertension.
- B. All men 35 and older and all women 45 and older for hyperlipidemia by measuring a total cholesterol and high-density lipoprotein.
- C. All adult patients for overweight and obesity using the body mass index.
- D. All overweight patients 45 and older for pre-diabetes or diabetes by obtaining a fasting blood glucose.
- E. All of the above.

2. The following should receive an annual influenza vaccine:

- A. All patients 50 and older.
- B. Children 6 to 23 months.
- C. Persons who are immunocompromised.
- D. Pregnant women.
- E. All of the above.

3. The following statements about domestic violence are true EXCEPT:

- A. 30% of all homicides among New York City women are a result of domestic violence.
- B. Men can be victims, too.
- C. Domestic violence increases the risk of child abuse and poor pregnancy outcomes
- D. Many women would talk to their doctors about abuse if they were asked.
- E. What abused women need first is mental health treatment.

4. Providers should offer all women of child-bearing age information on the following EXCEPT:

- A. Pregnancy planning and birth control options.
- B. Vitamin B12.
- C. Where to obtain emergency contraception, if not available in your office.
- D. Safer sex practices.
- E. HIV counseling and testing.

5. All patients should be screened for alcohol and drug abuse, depression, and HIV status. CAGE is a test for:

- A. Depression.
- B. Homelessness.
- C. Alcohol abuse.
- D. HIV infection.
- E. Hypertension.

6. How well did this continuing education activity achieve its educational objectives?

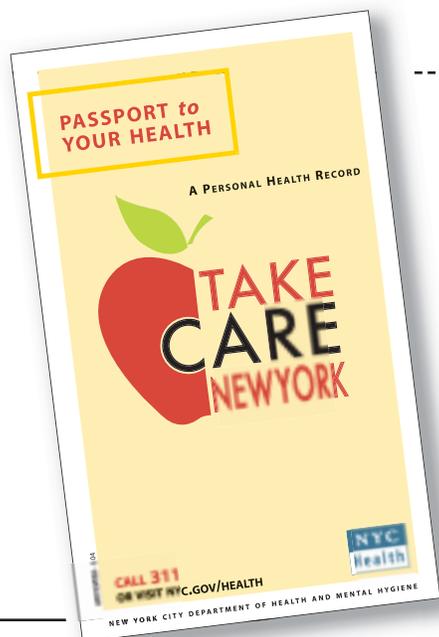
- A. Very well
- B. Adequately
- C. Poorly

Name _____ Degree _____

Address _____

Date _____ Telephone _____

E-mail address _____



CALL 311

For free Passports and other patient education materials

Visit nyc.gov/health for more information

Sources

This issue was drawn in large part from Take Care New York: A Policy for a Healthier New York City and from findings of the New York City Community Health Survey, a population-based telephone survey that collects important health information from adults in New York City. In 2002, approximately 10,000 New Yorkers age 18 and older were interviewed about health status, use of preventive services, access to health care, and behaviors that affect health over the previous 12 months. Participants represent the age, sex, and race/ethnicity distribution of adult New Yorkers. Methods are described at www.nyc.gov/health/survey.



City Health Information



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