Care team call script – Prostate Cancer HRA

This script is part of Unlock Health's care team script library, created to give care teams a consistent, compassionate framework for follow-up calls. Each script aligns with the corresponding HRA's clinical review and risk pathways, helping teams confidently guide participants toward the right next step.

These scripts are designed to be used **alongside your Engagement Queue CTA strategy**. For a full overview of how engagement queue CTAs work — including setup, SLAs, and best practices — see the *Call Engagement Queue CTA Playbook*.

Purpose

The Prostate Cancer HRA follows American Cancer Society guidelines for early detection. It provides tailored recommendations based on:

- Age (average, high, or very high-risk thresholds)
- Ethnicity (higher risk for African American men)
- Family history of prostate cancer (earlier onset in first-degree relatives increases risk)
- Existing diagnosis of prostate cancer

Results help care teams recommend:

- Specialist follow-up for participants with an existing diagnosis
- Screening discussions with primary care based on age, family history, or ethnicity
- Preventive education for younger participants not yet at screening age

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Pre-call checklist

Before calling, care teams can open the participant's risk report from the **Actions** column of the engagement queue dashboard.

Within the report, review:

- Primary result (for example: follow your doctor's recommendation, follow your existing plan, discuss screening, discuss screening options at age 40, discuss screening options at age 45, discuss screening options at age 50)
- Age and ethnicity risk (for example: age 50 or older, African American men age 45 or older, strong family history age 40 or older)
- Family history (number and age of relatives diagnosed with prostate cancer)

Combine this report review with a quick EMR lookup, if available, to ensure the call is informed, compassionate, and action-oriented.

Additional resources

- *Clinical Review Document – Prostate Cancer HRA*
- *Follow-up Strategy Guide – Prostate Cancer HRA*
- *Sample Prostate Cancer HRA Report*
- *Logging Follow-up Calls with Engagement Queue CTAs*

CARE call flow

C – Connect

- "Hello, this is [Name] from [Health System]. Thank you for completing the Prostate Cancer Health Risk Assessment. Who do I have the pleasure of speaking with today?"
- Verify identity using date of birth or another approved identifier.

A – Assess

- "I'd like to review your results with you. Based on your responses, here's what we found…"
- Highlight age, family history, ethnicity, or existing diagnosis. Then ask:
  "Have you ever had a prostate cancer screening test, such as a PSA or DRE, before?"

R – Recommend (based on result category)

- **Follow your doctor's recommendation** (existing prostate cancer diagnosis) → "You reported a prostate cancer diagnosis. It's important to stay in close contact with your specialist and follow your treatment plan. Would you like help scheduling your next appointment?"
- **Follow your existing plan** (previously screened or discussed with provider) → "You've already been screened or discussed options with your provider. Continue following your care plan. Would you like me to help confirm your next visit?"

- **Discuss screening** (age 50 or older, or high family/ethnicity risk at younger ages) → "Your results suggest you should discuss prostate cancer screening with your doctor. This may include PSA testing or other evaluations. Can I help you schedule a primary care visit?"
- **Discuss screening options at age 40** (multiple family members with prostate cancer before age 65) → "Because of your family history, we recommend you begin discussions about screening around age 40. Would you like resources to prepare for that conversation?"
- **Discuss screening options at age 45** (African American men, or one close family history before age 65) → "You may need to begin prostate cancer screening earlier, around age 45. Would you like me to help schedule an appointment with your provider?"
- **Discuss screening options at age 50** (average risk, no family history, not African American) → "Screening discussions typically begin at age 50 for men at average risk. Would you like reminders or resources to help you plan for that conversation?"

E – Enable

- Offer to schedule, transfer, or provide resources.
- "Can I help you book an appointment now?"

Documentation guidance

Log each call attempt in the engagement queue dashboard:

- Date and time of call
- Disposition — scheduled appointment, voicemail, no answer, scheduled, callback later, not eligible, referral sent, etc.
- Notes — symptoms discussed, concerns, next steps

Why documentation matters
Consistency in documentation ensures reliable reporting and continuous improvement. It also guarantees that another care team member can seamlessly continue the conversation if needed.

For detailed steps, see: *How to Log a Call in Engagement Queue*

Voicemail example

“Hello, this is [Name] from [Health System], calling regarding your recent Prostate Cancer Health Risk Assessment. We’d like to review your results and discuss next steps for your health. Please call us back at [Phone Number].”

Need help?

Your Client Success Director can help walk through engagement queue CTAs – from training to overall strategy.

Email: hrasupport@unlockhealthnow.com