

PREPARING FOR A NURSE'S VISIT

HELPFUL INFORMATION,
FREQUENTLY ASKED QUESTIONS,
AND TIPS ON HOW TO PREPARE
FOR YOUR MEDICAL EXAMINATION.

PROVIDED BY THE CHAMBERS OF
COMMERCE GROUP INSURANCE PLAN®



If you have any questions,
please contact your local
Chambers Plan Marketing Agent.



YOU WILL BE CONTACTED BY A SPECIALIZED SERVICE PROVIDER.

Additional information may be necessary to assess the insurance application you submitted to the Chambers of Commerce Group Insurance Plan. As a result, we may require a medical examination due to the insurance amount you requested, your age or your medical history. To conduct this examination, we use companies specializing in paramedical services.

If an exam is required to assess your insurance application, a representative from one such company will contact you to set up an appointment at a time that is convenient for you and at the location of your choice: your home, your workplace or the company's offices. If the visit is scheduled in your home, make sure the directions you give to the representative are as detailed and accurate as possible so that the nurse has no trouble finding you. During the visit, the nurse will identify themselves and ask you for a piece of identification.

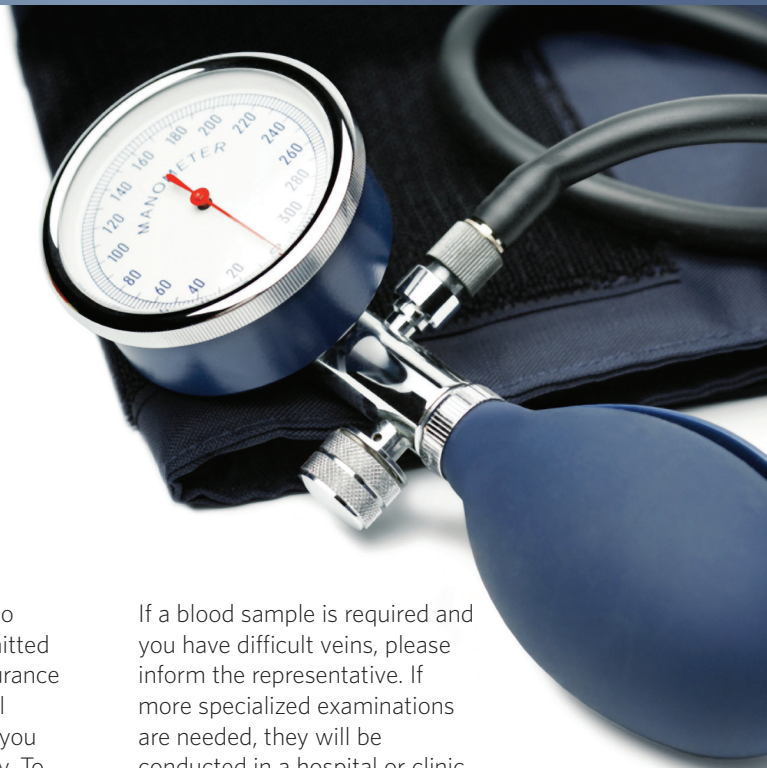
Contact name: _____

Phone number: _____

If a blood sample is required and you have difficult veins, please inform the representative. If more specialized examinations are needed, they will be conducted in a hospital or clinic. The paramedical company will schedule the appointment for you.

The cost of these exams will be covered by the plan. You have nothing to pay and you will not have to show your health card. We recommend that you be examined as quickly as possible to avoid any delays in the processing of your insurance application.

If you have to cancel your appointment with the nurse, please contact the representative who scheduled it with you as soon as possible. Make a note of their name and telephone number here.



PARAMEDICAL EXAM

The purpose of the paramedical examination is to assess your state of health and insurability. This involves measuring your height, weight, heart rate (pulse) and blood pressure (taken two or three times in a resting state and after mild exercise). You will also have to answer questions about your family and personal history and lifestyle.

IT IS IMPORTANT THAT YOU ANSWER ALL OF THE QUESTIONS CORRECTLY AND THAT YOU PROVIDE ALL OF THE INFORMATION REQUESTED. INCOMPLETE OR INACCURATE INFORMATION COULD PUT YOUR INSURANCE COVERAGE AT RISK.

PREPARATION

We suggest you have a list of your current medications on hand, and that you complete the checklist included in this brochure. Write down the names and addresses of the physicians you have consulted over the past five years. If you do not know their exact name or address, indicate the name of the clinic or hospital where you saw them. Prepare a list of the dates and reasons for your consultations so you do not forget anything during the nurse's visit. If you can not recall the exact dates, the months, seasons or years will suffice. If you do not fully understand a question, do not hesitate to ask for details.

QUESTIONS AND ANSWERS

HOW LONG DOES THE EXAM TAKE?

The exam takes 30 to 40 minutes.

WILL I HAVE TO DISROBE?

You will not have to disrobe. However, you should wear clothing with sleeves that can easily be rolled up to facilitate taking your blood pressure or a blood sample.

I'M AFRAID OF BLOOD TESTS. ARE THEY ABSOLUTELY NECESSARY?

If a blood test is requested, it is necessary. The person who collects the sample will be a highly qualified professional who will be able to put your mind at ease. The nurse will give you a document detailing the tests to be done and have you sign a consent form. They will also ask you for a urine sample. The material used is disposable and poses no danger of contamination.

WILL I HAVE TO SIGN ANY DOCUMENTS?

You will have to sign two documents. A consent form for the collection, use and disclosure of personal information and a statement certifying that the information provided by you has been recorded correctly on the paramedical exam form.

WHO WILL HAVE ACCESS TO THIS INFORMATION?

Only persons authorized by the Chambers Plan will have access to this information. It will be used strictly to establish your insurability and for the management and payment of your benefit claims.

PRE-EXAMINATION CHECKLIST

We suggest that you complete the following checklist to help you prepare for the nurse's visit.

MEDICATIONS:

Name of drug

Date of prescription

Name of physician

Reason

.....

Name of drug

Date of prescription

Name of physician

Reason

.....

Name of drug

Date of prescription

Name of physician

Reason

PHYSICIANS CONSULTED:

Name of physician

Address

Date of consultation

Reason

.....

Name of physician

Address

Date of consultation

Reason

.....

Name of physician

Address

Date of consultation

Reason

