



TADVS NEWS IN-TAKE SHEET

The information you provide on this form may be featured on TADVS's web-site; www.TADVS.org and or other TADVS publications and marketing tools. While the essence of your article will be honored, due to space availability and publication guidelines, your article may be edited.

Please complete form, SAVE onto your computer and email to: Pgarcia@echd.org

Storyline / Title of Article (*what would you name this story?*)

Who is this article about? If it is a healthcare system, department /program/ event- what is name? What is the telephone number of person(s) so we can follow up on this story? Do we have permission to share their story?

What happened? Describe what happened that you felt compelled enough to share this information story?

When did it happen? What day of week, was it during the day, night, around what time?

Where did it happen?

Why? Do you know why this happened? Did you get the chance to talk to people involved? If so, what was said?

How? How did this happen? Were there many or only a few people involved? If you could view a DVD of what happened, what would you see? How will this help our membership and colleagues better understand our mission?

Submitted by:

Date Submitted:

Cell