

Ask “Rx”pert Underwriter (Ask Our Expert)

After reading the Rx for Success on Ulcerative Colitis, use this Ask “Rx”pert Underwriter for an informal quote.

Producer _____ Phone _____ Fax _____
 Client _____ Age/DOB _____ Sex _____

If your client has a history of Ulcerative Colitis, please answer the following:

1. Please list date of first diagnosis.

2. Please note the type of inflammatory bowel disease present:

- Chronic Ulcerative Colitis
 Chronic Proctitis (inflammation in rectum only)

3. Is your client on any medications?

- Yes. Please give details: _____
 No

4. Please check if your client has had:

- Hospitalizations for this disorder (list dates): _____
 Surgery for this disorder (list dates): _____
 Colonoscopy (list dates of most recent): _____

5. Please note client’s build:

Height. _____ Weight. _____

6. Has your client smoked cigarettes in the last 12 months?

- Yes No

7. Does your client have any other major health problems (e.g., heart disease, etc.)?

- Yes. Please give details. _____
 No