

MORBIDITY REVIEW

Do not copy completed report

Department of Medicine CQI/QA Confidential Patient Care Information

Note: Deliver completed form to C. Thomas Nuzum, MD, CB# 7080, 4152 Bioinformatics Bldg

Division _____

Patient Name _____ MR# _____ Age _____ Sex M F

Date of Complication _____

Complication (Explain briefly) (continue on back)

We have reviewed the above complication at a Division meeting on _____ (Date), paying particular attention to any possible actions, omissions, or equipment problems that could have contributed to the morbidity. We conclude:

- The complication was not preventable or modifiable in any important way by any reasonable actions by the UNCH care team.
- Possibly preventable actions, omissions, or defective equipment may have contributed to the morbidity. Explain (briefly): (continue on back)

Based on this case the following:

- Was done:_____ (continue on back)
- Will be instituted:_____ (continue on back)
- Is recommended:_____ (continue on back)

We recommend the following topic(s) for departmental educational program(s):

- This case for CPC
- Other: _____

Completed By: _____ Pager: _____ Date: _____

Questions: Contact C. Thomas Nuzum, Phone 6-0808, Pager 216-9624, Fax 6-6842, E-Mail tom_nuzum@med.unc.edu or his assistant Steve Kennedy, Phone 6-2514, Pager 216-3703, skennedy@med.unc.edu