Medical Center Policy 300 – Attachment D

Reportable Unusual Occurrence Form

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Title 22 requires general acute care hospitals and acute psychiatric hospitals to report occurrences such as an epidemic outbreaks, poisonings, fires, major accidents, disaster, other catastrophe, or unusual occurrence which threaten the welfare, safety, or health of patients, personnel, or visitors, as soon as reasonably practicable, to the California Department of Health Services. The hospital shall furnish other pertinent information related to the occurrence as may be requested by the State Department of Health Services. [Title 22, California Code of Regulations, Section 70737 (general acute care hospital) and 71535 (acute psychiatric hospital)]

Directions: This form MUST be reviewed and approved by your Department Manager and submitted to the Office of Regulatory Affairs (ORA) [IRD, Room 936] via e-mail to orareporting@dhs.lacounty.gov					
Patient/personnel/visitor Information					
Last Name		First Name			
Medical Record Number	Sex	Age		Date of	Birth
Admission Date	Discharge Date		Date of	Death	
Primary Diagnosis(es) /Patient under treatment for:					
Event Information					
Date Event Discovered	Date Event Occurred		Time Event Occurred		
Location:	ation:			SI Number:	
Summary description of unusual occurrence (include precipitating factors)					
Describe action taken to prevent further occurrence with specific date(s) of corrective action/counseling:					
Reported by:			Ext: Date		Date:
Approved by:			Ext:		Date:

Note: Please attach additional pages as necessary.

DO NOT PLACE IN THE PATIENT'S MEDICAL RECORD

EORA1 (Rev. 3/09, 12/13, 2/14, 10/20, 2/23; 4/8/24)