

****Complete and attach to the related Event Report Form****

MUST BE COMPLETED IF YOU ANSWERED YES TO "Did Health IT cause or contribute to this event?":

Which Health IT Systems Cause or Contributed to the Event?

Administrative/Billing or Practice Management System (check all that apply):

- Coding/billing system
- Registration/appointment scheduling system
- Other (specify) _____
- Master patient index
- Unknown

Electronic health record (EHR) or component of EHR (check all that apply):

- Clinical decision support (CDS) system
- Computerized provider order entry (CPOE) system
- Pharmacy system
- Other (specify) _____
- Clinical documentation system (e.g., progress notes)
- Electronic medication administration record (e-MAR)
- Unknown

Miscellaneous (check all that apply):

- Automated dispensing system
- Laboratory information system (LIS)
- Unknown
- Human Interface device
- Radiology/diagnostic imaging system
- Other (specify) _____

HIT Contributing Factors:

Equipment/Device function (check all that apply):

- Image measurement/corruption issue
- Incorrect or inadequate test results
- Incorrect software programming calculations
- System returns or stores data that does not match patient
- Other (specify) _____
- Image orientation incorrect
- Incorrect or inappropriate alert
- Loss or delay of clinical data
- Unknown

Ergonomics, including human/device interface issue (check all that apply):

- Alert fatigue/alarm fatigue
- Hardware location issue
- Unknown
- Data entry or selection issue
- Information display or interpretation issue
- Other (specify) _____

Miscellaneous (check all that apply):

- Equipment/device maintenance
- Hardware failure or problem
- Security, virus, or other malware issue
- Unknown
- Failure of wired or wireless network
- Incompatibility between devices
- Unexpected software design issue
- Other (specify) _____

Device Identifier(s):

Device/Application Name: _____

Manufacturer: _____

MUST BE COMPLETED IF YOU ANSWERED YES TO "Was this event related to a telehealth visit?":

Details of Telehealth Related Event:

Telehealth Issue Type (select all that apply):

- provider-patient clinical issue such as insufficient assessment, inadequate treatment or misinterpretation of diagnostic tests/studies
- equipment such as remote monitoring (e.g., wireless devices, wearable devices – blood pressure, blood glucose)
- technology issue such as video/audio connection during consultation
- communication such as patient education or provider to provider communication
- consent issue such as inadequate consent
- credentialing or scope of practice such as issues with licensing, competency/training, practicing beyond scope of specialty
- provider to provider issue
- other

Was the telehealth visit via: physician nurse practitioner midwife

Who was involved in the telehealth visit (select all that apply): physician nurse practitioner midwife physician assistant

Was the patient in the same state as the provider? Yes No

Did this event require an in-person follow-up visit? Yes No