INSTRUCTIONS FOR REPORTER

The **REPORTER** for each facility will be responsible for maintaining completed forms and serving as the point of contact for the facility. The **REPORTER** will be contacted monthly by CDC for a status update. Forms should be mailed to CDC on a monthly basis following the schedule provided.

In addition to compiling the completed forms, the **REPORTER** is responsible for identifying any duplicate forms. Duplicate forms are defined as multiple forms completed for a single incident/injury. There are several ways the **REPORTER** will be able to identify duplicate forms:

- Similarities in demographic information
- Similarities in the nature of the injuries
- Similar forms that are completed within a short timeframe
- If the form indicates the inmate was referred to another clinician (Item E.3), there may be a completed form for the subsequent visit.
- If the method with which the inmate came in contact with the provider is through referral (Item F.2), there may be a completed form from a previous visit.
- If the form indicates that the inmate has been seen for this incident/injury in the past 30 days (Item F.3), there may be completed forms from previous visits.

When duplicate forms are identified, it will be necessary to resolve any discrepancies between the forms.

- If there are different dates listed, record earliest date.
- If there are differences in the level of training in the treating clinician, check all that apply.
- If there are differences in the method with which the inmate came in contact with the provider, check the method which occurred FIRST.
- Other differences should be reconciled through discussions with the providers.

If an inmate is being seen for persistent symptoms or chronic conditions, a form should only be completed for the first encounter. A new form should be completed only when new injuries occur.

Before sending forms:

- Verify that all forms contain your facility ID as the first two digits of the Form Identification Number.
- Ensure that all boxes are clearly checked and information is written legibly.
- Ensure that only ONE form is being submitted for a single incident/injury.
- Ensure that all potentially identifying information is removed from the form, including any inmate ID numbers or incident case numbers.
- Retain a copy of the form for your records before sending to CDC. DO NOT include this copy in the medical record of the inmate.

CDC POINTS OF CONTACT

Katie Salo, MPH Project Coordinator (404) 639-6110 hgi2@cdc.gov Alexandra Balaji, PhD Project Officer (404) 639-4336 <u>dvi7@cdc.gov</u>