NICU TRANSPORT LOG 2023

ELIGIBILITY LOGS INCLUDE PROTECTED HEALTH CARE INFORMATION FOR YOUR INTERNAL USE ONLY DO NOT SUBMIT TO CPQCC

Center Number	Center Name

NICU Record ID Number	Patient's Name	Birth Date (MM/DD/YY)	Birth Time (00:00) AM/PM	Transfer Date (MM/DD/YY)	Transfer Hospital Name	CPQCC Member? (Yes/No)	Items 61-63 Sent* (MM/DD/YY) Required for all Transfers	Items 64-65 Sent** (MM/DD/YY)	Items 66-67 Sent*** (MM/DD/YY)	Item 67 Sent**** (MM/DD/Y Y) Required for all Transfers

^{*}This form was adapted from a log developed by Vermont Oxford Network

^{*}Submit Items 61-63 for all transported infants when the Post Transfer Disposition is known.

^{**}Submit Items 64-65 for all readmitted infants when the Disposition After Readmission is known

^{***}Submit Items 66 and 67 for all infants who were transferred more than once when the Ultimate Disposition is known.

^{****}Submit Item 67 for all infants who were transferred when the Date of Final Discharge or Death is known.