

APPENDIX B

TABLE OF REPORTABLE PATIENT/RESIDENT INCIDENTS

INCIDENTS	CATEGORY I EXAMPLES
All Deaths: a) expected b) unexpected c) occurring within 7 days of discharge or elopement, if known	Suicides Violent Deaths Accidental Deaths
Loss of a limb or use of a limb, whether the loss is permanent or temporary: a) All amputations b) All fractures c) Joint dislocations d) Paralysis, paraplegia, quadriplegia	All except fingers and toes
	Compound or multiple fractures
	Requires emergency hospitalization or surgery
	Permanent or disabling; extensive recuperation and rehabilitation
Spinal cord or serious back injury	Permanent or disabling loss/impairment
Nerve injury or neurological deficit including loss or impairment to any sensory organ	Permanent or disabling loss/impairment
Brain damage or serious head injury	Permanent or disabling loss/impairment
Temporary or permanent disability or disfigurement (includes first, second, and third degree burns and other injuries)	Second or third degree burns; life threatening
Internal injuries (e.g., torn ligament, bruised or ruptured internal organs, internal bleeding)	Ruptured internal organs; life threatening emergency surgical repair
All serious wounds or lacerations requiring sutures	Emergency surgical repair; life threatening; disfigurement
Sexual violation of a minor or a non-consenting or incompetent adult	Forced encounter with injuries requiring acute medical treatment
Loss or impairment of a reproductive organ	Emergency surgical repair; permanent loss/impairment

U.S. v. Virginia



MR-VA-002-009

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INCIDENTS	CATEGORY I EXAMPLES
<p>Self-injury:</p> <ul style="list-style-type: none"> a) Category I and Category II level injuries b) Suicide attempts including those occurring 7 days after discharge or placement, if known 	<p>Emergency surgical repairs; emergency hospitalization; life threatening suicide attempts</p>
<p>Medication errors and drug reactions which require acute medical intervention. This includes, but is not limited to, episodes of drug toxicity, neuroleptic malignant syndrome, and overdose (prescription and non-prescription drugs)</p>	<p>Emergency hospitalization; stomach pump</p>
<p>All transfers for emergency medical care and all unexpected, unplanned inpatient hospitalizations for acute medical care</p>	<p>Emergency surgery; hospitalization resulting from violent injury</p>
<p>Other adverse patient/resident incidents, to be determined by the circumstances and degree of liability exposure</p>	

Guideline for Determining Severity of an Incident (Refer to Section 18.7 A and B.)

The facility director or risk manager must determine whether reportable incidents should be classified as Category I or Category II events to determine reporting procedures. It also must be determined whether an incident meets or might meet the four elements of a professional or medical malpractice cause of action.

Category I Incidents are major crises or events including, but not limited to, those which are life threatening or potentially life threatening; require emergency or surgery; require extensive recuperation; are permanently disabling or disfiguring; or, where there is, or is likely to be, significant adverse press. Decisions about the degree of seriousness of an injury or medical incident should be made with physician and risk manager input. Category I incidents must be reported promptly to the Associate Commissioner, Community/Facility Services by telephone/pager and also entered into the CIDB.

Category II Incidents are the other reportable, serious incidents listed above. These are generally serious (but non-life threatening or permanently disabling) patient or resident injuries and situations that require medical and/or clinical intervention. Category II incidents are also reportable and must be entered into the CIDB.