



Attach patient identification label

URN:

Episode:

Patient Name:

Date of Birth: Sex:

Patient Details

DOCUMENTATION QUERY

Clinician: Speciality: Ward:

Admission date: ____ / ____ / ____ to ____ / ____ / ____

Your clinical judgement is required to clarify the following to support accurate and complete documentation, clinical classification, and reporting requirements.

Dear

Clinical documentation indicates that this patient was treated for

on ____ / ____ / ____ A was performed on

____ / ____ / ____ Qualifying terms such as 'intraoperative', 'postprocedural', or 'in the setting of' may indicate a causal relationship to a condition, or may simply refer to the timing of the condition that occurred during, or after, the procedure. Considering this, can you clarify whether the is considered: (confirmed or suspected)

- a. Secondary to the procedure
- b. Occurring in the postoperative period but NOT secondary to the procedure
- c. Other (please specify)
- d. Unable to clinically determine

Details / further comments:

Print Name:

Clinician Signature: Designation: Date: ____ / ____ / ____

HIM / CDS / Clinical Coder: Signature: Date: ____ / ____ / ____

Method of Contact: E-mail ☐ Phone ☐ Fax ☐ Meeting ☐

BINDING MARGIN - DO NOT WRITE IN THIS AREA

DOCUMENTATION QUERY