**Late Onset Sepsis/ Meningitis Event (LOS) Form R3-D4**

**(Planned for summer 2020)**

**Late Onset Sepsis/Meningitis Event (LOS) Report = <templateId root="….10.20.5.53" extension="2018-04-01" />**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | \*required for saving \*\*required for completion | | |
| \*Facility ID: Use facility OID | Event #: Auto-assigned upon import. | | | | |
| \*Patient ID: | Social Security #: ….883.4.1 | | | | |
| Secondary ID: | Medicaid #: root=”2.16.840.1.113883.10.20.5.9.28” | | | | |
| Last: | First: | | | | Middle: |
| \*Gender: F M Other (M. F, UN) | \*Date of Birth: | | | | |
| Ethnicity (Specify): 2135-2 Hisp 2186-5 non-Hisp | Race (Specify): 1002-5 Ind; 2028-9 Asn; 2054-5 Blk; 2076-8 Haw; 2106-3 Wht | | | | |
| \*Event Type: LOS 765107002 MEN 276674008 | \*Date of Event: <entry/> in “Details in Late Onset Sepsis Report Section” | | | | |
| \*Date Admitted to Facility: <encompassingEncounter> use low value | \*Select: □Inborn □Outborn 445087001   * if the negation indicator is true the infant was Inborn * If the negation indicator is false the infant was Outborn | | | | \*Location: in <encompassingEncounter> <location> |
| **Risk Factors** | | | | | |
| NICU | | | | | |
| Central line present prior to event, including umbilical catheter: Yes No 1006-6 | | | | | |
| \*Birth weight (grams): 364589006 | | | | | |
| \*Gestational age: weeks days 76516-4  Report as days in CDA. (will be converted to weeks and days on import) Also: nullFlavor=“UNK” may be used if data not know. | | | | | |
| **Event Details** | | | | | |
| \*Specific Event: (check one)  □ NLCBI 1 3066-8  □ NLCBI 2 3067-6  □ NLCM 1 3068-4  □ NLCM 2 3069-2 | | | | | |
| **Specify Criteria Used:** | | | | | |
| \*Laboratory (check one) | | | | | |
| □ Recognized pathogen from one or more blood specimens 1951-3 | | | | | |
| □ Common commensal from blood specimen(s) and antibiotics for > 5 days 3070-0 | | | | | |
| □ Recognized pathogen from cerebrospinal fluid specimen 3071-8 | | | | | |
| □ Common commensal from cerebrospinal fluid specimen and antibiotics for > 5 days 3072-6 | | | | | |
| \*\*Died: Yes No 19099009 | | LOS Contributed to Death: Yes No  located in the <entryRelationship/> | | | |
| Discharge Date: use high value | |  | |  | |
| □ Pathogen identified: Yes or No 41852-5  Each pathogen may include drugs results | | | | | |

**Comments:**

Comment section 86468-6

Comment entry 86467-8