

I.D.PR.002 Attachment B

DEPARTMENT OF DEVELOPMENTAL SERVICES (DDS) DIVISION OF INVESTIGATIONS

SUDDEN/UNEXPECTED DEATH ADMINISTRATIVE REVIEW

In accordance with procedure #I-D-PR-002, Sudden/Unexpected Deaths of Individuals, DDS has recently formed a new unit within the Division of Investigations in which Nurse Investigators will be reviewing pertinent records.

The following documents (only those indicated by a *check* mark) are required by your agency in regards to _____ sudden/unexplained death review by DDS division of Investigations. The information must be delivered (DO NOT MAIL) to DDS Central Office, 460 Capitol Avenue, Hartford, or DDS Cheshire Office, 25 Creamery Road, Cheshire, **within 5 working days**. Please do not send originals, copies will suffice. If for any reason you are unable to forward documents at this time, please indicate reason in comment section.

- Death Certificate _____
- Autopsy Report _____
- History and Physical _____
- Hospital Discharge Summary _____
- Nursing Quarterly Documentation _____
- Integrated Progress Notes/Nurses Notes _____
- Case Management Notes _____
- Communication Log _____
- Physician Progress Notes _____
- Physician Orders _____
- X-Ray Reports _____
- Lab Reports _____
- Last Physical Exam _____
- Social/Residential Summary _____
- Quarterly Report _____
- Person Centered Plan/OPS _____
- Medication Administration Record _____
- EMS Report _____
- Police Report _____
- Authorization for Release of Information _____
- DNR _____

I understand this will require the expenditure of considerable effort on your part, but this will undoubtedly have a positive impact on individuals in the future.

Your cooperation in this endeavor is greatly appreciated.

Submitted by _____ Phone: _____ Date: _____
Name/Title/Agency

Received by: _____ Date: _____
Nurse Investigator