

MSH PATIENTS' FOLLOW-UP EVENT CLASSIFICATION	Office								
	Home ID								
	Home Phone								
	Annual Visit						A	V	0
	Event Date								

Note: Event date must match event date on Form 50.

1. Primary cause of death

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- 01 - Sepsis
- 10 - Malignancy
- 21 - Renal disease
- 22 - Hepatic disease
- 30 - Gastrointestinal disease
- 40 - Cerebrovascular disease
- 50 - Cardiovascular disease
- 60 - Pulmonary disease
- 71 - Autoimmune disease
- 72 - Crisis
- 81 - Accident
- 82 - Homicide
- 98 - Cause cannot be determined

3. Checked for completeness and accuracy.

A. Signature

B. Certification number

C. Date

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Patient ID

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