

### Observation/Insurance Fax Notification Efficiency Report

**Today's date:** \_\_\_\_\_

Consents needed total \_\_\_\_\_

**Date of Report:** \_\_\_\_\_

**Total Number of Admissions:** \_\_\_\_\_ **Number of Observation Notifications Incomplete:** \_\_\_\_\_

**Failed to be completed by:**

**Acct#:** \_\_\_\_\_ **Acct#:** \_\_\_\_\_ **Acct#:** \_\_\_\_\_

**Incomplete Notifications Completed and Faxed by (Name):** \_\_\_\_\_

**Completed Observation Notifications Scanned (Y/N):** \_\_\_\_\_ **Report Scanned to Leadership (Y/N):** \_\_\_\_\_

**Report Completed by Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Initials:** \_\_\_\_\_