**ED Utilization Tracking Document A: For ED Measures 1 & 2 (Outcomes)**

**Step 1:** List the names of the residents who had an ED visit in the previous month (Column 1)

**Step 2:** Using a check mark,record the primary reason for the ED visit in Column 2, Column 3 and/or Column 4 (may be more than one)

**Step 3:** List the total number of ED visits for each resident during the month in Column 5

**Step 4:** Indicate (Yes/No) if the resident has had more than 1 ED visit IN THE LAST 30 DAYS by referring to Column 5

**Data for the month of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization/Unit Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Column 1** | **Column 2** | | **Column 3** | **Column 4** | **Column 5** | **Column 6** |
| **Name of each LTC home resident who had an ED visit in the previous month** | **Reason for ED Visit (By Resident)** | | | | **Total number of ED visits for the resident IN THE LAST 30 DAYS counting from the date of the most recent ED visit** | **Did the resident have more than 1 ED visit IN THE LAST 30 DAYS (Yes/No) (refer to Column 5)** |
| **Visit due to a fall** | **Visit due to potentially preventable deterioration in condition** | | **Visit due to other reasons** |
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| Total residents with an ED visit: | Total ED visits due to falls: | Total ED visits due to potentially preventable deterioration in condition: | | Total ED visits due to other reasons: | Total number of ED visits using 30 day look-back: | Total number of residents with more than 1 ED visit IN THE LAST 30 DAYS: |