



Tri-County Emergency Medical Control Authority

Serving Clinton, Eaton, and Ingham County

Patient Outcome Request

Forward Form to TCEMCA CQI Coordinator

Date of Service:

Hospital Name:

Time of Arrival at Emergency Department:

Patient Name:

Patient D.O.B.:

Patient Complaint/Provider Impression:

Information Requested:

Agency Name:

Agency Contact Name:

Agency Run Number:

Developed		Updated	3/1/2023	Implemented		Approval	BP	Form ID	F-007
-----------	--	---------	----------	-------------	--	----------	----	---------	-------