

MANDATORY REPORTING

ORG.1810.PL.010

 Checklist	Gun Shot & Stab Wounds	 FORM
 Checklist	Serious Adverse Drug Reactions	 FORM
 Checklist	Medical Device Incident	 FORM
 Checklist	Adverse Event Following Immunization	 FORM
 Checklist	Suspected Adult Abuse & Neglect	 FORM
 Checklist	Suspected Child Abuse & Neglect	Call 1-866-345-9241
 Checklist	Sexually Transmitted/ Blood-Borne Infections	 FORM
 Checklist	Medical Condition for Safe Operation of a Motor Vehicle	 FORM
 Checklist	Reportable Diseases & Conditions	 FORM for Diseases  FORM for Tick-borne