

Coast Surgery Center

Dear Patient:

As of January 1, 2005, the State of California, Office of Statewide Health Planning and Development (OSHPD) mandates that ambulatory surgery centers collect individual encounter data (California Health and Safety Code, Division 107, Part 5 - Health Data, Section 128737). The data will be used for health planning projects, including management of state health care delivery and public health programs, efficient administration of healthcare services, continuous improvement in the quality of care provided by hospitals and ambulatory surgery centers, effective procurement of healthcare services, and identification and correction of disparities in healthcare access and outcomes. Individually identifiable patient information is protected and encrypted within the State system.

In addition to information collected at the time when surgery is scheduled, we also need you to answer a few other questions:

RACE:	ETHNICITY
<input type="checkbox"/> R1 American Indian or Alaska Native	<input type="checkbox"/> E1 Hispanic or Latino
<input type="checkbox"/> R2 Asian	<input type="checkbox"/> E2 Non-Hispanic or Non-Latino
<input type="checkbox"/> R3 Black or African American	
<input type="checkbox"/> R4 Native Hawaiian or Other Pacific Islander	PLEASE INDICATE BELOW YOUR PRIMARY LANGUAGE SPOKEN
<input type="checkbox"/> R5 White	
<input type="checkbox"/> R9 Other Race	

Was this procedure the result of an **ACCIDENT OR INJURY**? YES OR NO

If your procedure was the result of an ACCIDENT OF INJURY please be specific and state:
HOW – WHEN- AND WHERE the accident or injury occurred.

For Example: Fell off a ladder at home on January 1, 2009.

If so, were you seen in an emergency room? YES OR NO

Were any other surgeries performed as a result of this accident? YES OR NO

If so, what type of surgery and where was it performed? _____

If you have any questions, please contact the Patient Data Section of OSHPD at 916-323-7679. Additional information is available on the internet at www.oshpd.ca.gov/mircal

Thank you very much.