|  |  |
| --- | --- |
| **Visit Details - Consent not obtained for minimal dataset** | |
|  | |
|  | |
|  | |
| 1. **Level of Care:**   (provided to participant by health care facility) | * Emergency * Emergency and Acute |
| * Acute |
|  | * Rehab |
| * Acute and Rehab |
| * Unknown |
|  |  |
|  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Data Collection Details | | | | | |
| **Collected by:**  (please print name) |  | **Initial Here:** |  | **Date Abstraction Completed:** | YYYY-MM-DD |