In responding to this query, please exercise your independent professional judgment. The fact that a question is asked does not imply that any particular answer is desired or expected. We greatly appreciate your clarification on this issue.

Coder’s Name: _______________________  Coder’s Phone #: _____________________________

Patient Name: __________________________________________________________________

Admit Date: ______________  Discharge Date: ______________

MR#: ______________  Acct #: _____________________

The medical record reflects the diagnosis of sepsis in the (medical record location(s)
_________________________________________________________________________________ and the blood culture shows (insert
organism)__________________________________________________________________________.

Please respond to the following question:

Based on the above information, can you identify the known or suspected specific organism responsible for this patient’s sepsis?

☐ Yes – [If yes, please document the specific type of organism that was treated and was responsible for the sepsis in the space below and in the medical record (progress notes, dictated report or an addendum to a dictated report).]

____________________________________________________

Physician Signature  ____________________  Date: ______________________

☐ No- [If no, please initial in or check the box, and sign and date below. This form will need to be maintained with the medical record.]

☐ Unable to determine- [If so, please initial in or check the box, and sign and date below. This form will need to be maintained with the medical record.]

____________________________________________________

Physician Signature  ____________________  Date: ______________________