



Instructions for completing Region 10's Critical Incident Report (fillable PDF):

1. Agency Name - Choose your agency name from the drop-down menu.
2. Contact information – Provider name, phone number, and email address.
3. Reporting Period – Choose appropriate month from the drop-down menu.
4. If no incidents to report, please check here: Click into check box and a check mark will appear (if applicable).
5. Event Date – Hover over the right side to click into fillable calendar and choose the date of the event. For example, if the date of the event is 2/1/22, choose the appropriate date from the calendar.
6. MIX ID – fill in the assigned number of the enrollee in service. (Please remember when sending PHI to Region 10 use the word “SECURE:” in subject line or secure email method / encryption).
7. Event Type – Hover over the right side to click into fillable event type and choose appropriate event type. The choices will match the Event Type Key located at the bottom of the form.
8. After Report is complete, send via email to Michelle McFadden and Cindy Eckert by the 15th of each month following the reporting period.

****** Please remember if this report contains PHI to send using the word “SECURE:” in the subject line or using a secure email method and / or encryption.**