

CALIFORNIA SUDDEN INFANT DEATH SYNDROME PROGRAM

PUBLIC HEALTH SERVICES REPORTING TIPS

- ◆ The California SIDS Program is responsible for a monthly Epidemiology Log of all reported SIDS cases.
- ◆ All Public Health Services Report forms and Coroner Notification Cards received by the California SIDS Program on or before the tenth of each month are given a State File number and placed on the Epidemiology Log.
- ◆ The Epidemiology Log is submitted to the Department of Public Health, Maternal, Child and Adolescent Health Division, by the fifteenth of each month.
- ◆ **Within thirty days of the date of the presumed SIDS death**, the Public Health Services Report form documenting contact or attempted contact must be submitted to the California SIDS Program. If the SIDS case is to receive continued support services, upon closure of the case, submit any additional information for data abstraction purposes.
- ◆ It is required that the California SIDS Program notifies each county quarterly when a Public Health Services Report form or Coroner Notification Card is not received. If a Public Health Services Report form or Coroner Notification Card has not been received and it has been one month from the date of death a quarterly compliance letter will be sent.
- ◆ Letters are sent to non-compliant counties (PHNs and/or coroners) on a quarterly basis usually after the fifteenth day of March, June, September and December. It is the responsibility of the SIDS County Coordinator upon receipt of a compliance letter to ensure the mandated documents are submitted.
- ◆ A Public Health Services Report form and Coroner Notification Card must be filed by December 31st of the following calendar year after the date of death. (ie: DOD is June 30, 2007. PHSR form and CNC are due by December 31, 2008.)
- ◆ Important information to include on the Public Health Services Report form is the accurate first and last name of the infant, ethnicity, date of birth, date of death, **County of Residence, and County of Occurrence**. (Note: The State File Number is issued to correspond with the County of Residence.)
- ◆ For the purposes of data collection it would be helpful if the following accompanied the Public Health Services Report form:
 - The contact or assessment page of the Public Health Services Report form.
 - A copy of the birth certificate.
 - A copy of the death certificate.
- ◆ The **County of Occurrence** (infant dying in a county other than where he/she resides) notifies the **County of Residence** of the presumed SIDS death. The **County of Residence** completes the PHS Report form and documents the notification of the death including the date, how notified, county of occurrence and the support services provided.

*Please complete the Public Health Services Report form with as much information as possible and mail to:
California SIDS Program ■ 11344 Coloma Road, Suite 560 ■ Gold River, CA 95670-6304*



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California Sudden Infant Death Syndrome Program
800-369-SIDS (7437) ✦ www.californiasids.com