

Gastroenterology Morbidity and Mortality Form

- Meeting Date: _____
- MRN: _____
- Date of Admission: _____
- Outcome: _____
- Date of Death: _____
- Was the death expected? _____
- Was the death related to a procedure? _____

Was the case managed appropriately? Explain:	
M&M Committee Recommendations:	

Name of Physician: _____