

MISCELLANEOUS MISSOURI REGULATIONS

Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
Various Requests					
<p>Note: Requests for variance are allowable for requirements contained in 19 CSR 30-20.015 through 19 CSR 30-20.140 and are required to be in writing.</p> <p>Determinations from DHSS will be in writing and both request and determination will be made part of the DHSS permanent records for the facility.</p> <p>The variance may be revoked if changes in conditions detrimentally impact the health, safety, and the welfare of the patient, staff, or public, as determined by DHSS.</p> <p>19 CSR 30-20.142(1)&(3)</p>					
<p>Does your variance request contain:</p> <p>a. section number and text of the rule in question?</p> <p>b. specific reason why compliance with the rule would impose an undue hardship, including an estimate of any additional cost which might be considered?</p> <p>c. an explanation of the extenuating factors which may be relevant?</p> <p>d. a complete description of how your organization would fulfill the intent of the rule, if the variance is granted?</p> <p>e. length of time the variance is being requested?</p> <p>19 CSR 30-20.142 (1)(A)(1-5)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>If changes have occurred that affect the conditions warranting the variance, have these changes been communicated, in writing, to DHSS, within 30 days of the change?</p> <p>19 CSR 30-20.142(3)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>At the time of annual license review are all previously approved variances submitted for review?</p> <p>19 CSR 30-20.142 (4)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Head and Spinal Cord Injury Reporting Requirement					
<p>Purpose: To establish and maintain an information registry and reporting system for the purpose of data collection and needs assessment of head and spinal cord injured persons in this state.</p>					
<p>Are you submitting data on head- or spinal cord-injured patients who are dead on arrival or dies after arriving in the emergency department?</p> <p>19 CSR 30-41.010 (1)(A)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Are you submitting data on head- or spinal cord-injured patients who are transferred to another hospital from the emergency department?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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19 CSR 30-41.010 (1)(B)					
Are you submitting data on inpatients admitted to a hospital for the purpose of treating a head or spinal cord injury? 19 CSR 30-41.010 (1)(C)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is the data for discharged patients submitted by the last day of the month following discharge? 19 CSR 30-41.010 (2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are you submitting data via ImageTrend on all head and spinal cord injury/trauma patients admitted or transferred to your hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Helpful Hints

- Facilities may reapply for a variance up to ninety (90) days prior to the expiration date.
- Use of paper form referred to in the regulation has been replaced with the electronic submission via the [ImageTrend](#) data registry.
- If a variance request is approved, be sure to check the documentation from DHSS to identify the expiration date for the variance?

Key Resources and Links

- [19 CSR 30-41.010](#)
- [RSMo 192.737](#)
- [ImageTrend](#)
- [19 CSR 30-20.142](#)