

**Mission:**

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



**Ron DeSantis**  
Governor

**Joseph Ladapo MD, PhD**  
State Surgeon General

**Vision:** To be the **Healthiest State** in the Nation

**BRAIN AND SPINAL CORD INJURY PROGRAM  
CENTRAL REGISTRY REFERRAL FORM**

*Florida Statute 381.74 requires that every public and private health agency, public and private social agency, and attending physician report persons who have sustained a Moderate-to-Severe brain or spinal cord injury to the Brain and Spinal Cord Injury Program (BSCIP) Central Registry within five (5) days of injury identification or diagnosis.*

**PATIENT / CLIENT REFERRAL INFORMATION**

**\*\*SURVIVE ACUTE Yes  or No**

\*Referral Date: \_\_\_\_\_  
\*Client I.D. (Social Security #) \_\_\_\_\_ Medicaid #: \_\_\_\_\_  
\*Last Name \_\_\_\_\_ \*First Name \_\_\_\_\_ M. I. \_\_\_\_\_  
\*Address \_\_\_\_\_ \*City \_\_\_\_\_  
\*Zip Code: \_\_\_\_\_ \*County \_\_\_\_\_ Phone \_\_\_\_\_  
\*Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ Hispanic \_\_\_\_\_  
Supportive Contact Name: \_\_\_\_\_ Relationship \_\_\_\_\_ S.C. Ph. \_\_\_\_\_  
\*Reporting Facility \_\_\_\_\_ Treatment Stage \_\_\_\_\_  
\*Reporter Name \_\_\_\_\_ \*Reporter Phone # \_\_\_\_\_ Ext# \_\_\_\_\_  
Source \_\_\_\_\_ Trauma # \_\_\_\_\_ Medical Record # \_\_\_\_\_  
Date of Injury \_\_\_\_\_ Time \_\_\_\_\_ Location \_\_\_\_\_  
Injury Address \_\_\_\_\_ Injury County \_\_\_\_\_ Activity \_\_\_\_\_  
ETOH/Drug \_\_\_\_\_ Protection \_\_\_\_\_ Position \_\_\_\_\_ Etiology/Cause \_\_\_\_\_  
Date of Admission \_\_\_\_\_ \*Date Brain and/or Spinal Cord Injury Identified \_\_\_\_\_

**BRAIN INJURY INFORMATION**

**\*\*\* A BRAIN INJURY MUST BE REPORTED IF GLASGOW SCORE IS 12 OR BELOW AND THE RANCHO SCORE IS 8 OR BELOW. \*\*\***

\*Rancho Score \_\_\_\_\_ \*Glasgow Score \_\_\_\_\_ \*Open/Closed: \_\_\_\_\_  
Altered Sensorium: Yes  or No  Ventilator: Yes  or No   
ICD Codes \_\_\_\_\_

**SPINAL CORD INJURY INFORMATION**

**\*\*\* A SPINAL CORD INJURY MUST BE REPORTED IF 2 OUT OF 3 OF THE FOLLOWING DEFICITS ARE PRESENT. \*\*\***

\*Para/Quad Level \_\_\_\_\_ \*Extent of Lesion \_\_\_\_\_ Ventilator: Yes  or No   
\*Sensory Deficit: Yes  or No  \*Motor Deficit: Yes  or No  \*Bowel/Bladder Deficit: Yes  or No   
ICD Codes \_\_\_\_\_

Revised 4/25/2023