

# SGF Monthly Medication Error Report Cover Sheet

1. Provider:
2. These reports represent medication errors occurring or discovered during the month of:
3. Total number of individuals supported with SGF's during the above-referenced month:
4. Total doses of medications administered to all SGF-supported individuals for the above referenced month:
5. Total number of medication administration errors for the reporting month (attach a Monthly Medication Error Report for every individual for whom there was a medication error):
6. Calculate % medication administration error (# errors divided by total doses): [ex: 10 errors divided by 100 doses = .1= 10%]