**AOANJRR Coversheet for**

**Joint Data Form Submission**

**Hospital 🡺 AOANJRR**

We continually look for ways to make the safe and secure return of documents easier for you.

When returning completed documents to us please follow these steps:

* Use the Reply Paid envelopes provided by the AOANJRR to submit all completed data forms. If you are running low / have run out, please email [admin@aoanjrr.org.au](mailto:admin@aoanjrr.org.au) to order more
* Please limit the number of forms in each envelope to **50** forms
* Please ensure that the envelope is securely sealed

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| --- | --- | --- | --- |
| **Hospital Name** |  | **State &/or Code** |  |
| **Name of Coordinator / Person sending** |  | **Date Sent** |  |

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| The most common reasons for return of forms is missing/incomplete information.  To minimise forms being returned to you for completion please ensure that:   * Procedure dates are completed * Cement details are completed * Sides (of procedure) are completed * Diagnosis(es) are completed * ASA Field has been completed | **FORM TYPE** | **TOTAL NUMBER** |
| Hip Data Forms |  |
| Knee Data Forms |  |
| Shoulder Data Forms |  |
| Multi-Joint Data Forms |  |
| Spinal Disc Data Forms |  |
| Knee Osteotomy Forms |  |
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| **Office Use Only** | |
| **Date Received:** **… / … / …** | **Initial:** \_\_\_\_\_\_ |