



## Fax Coversheet

**Date:** \_\_\_\_\_ / \_\_\_\_\_ / 2016

**Time:** \_\_\_\_\_

**Incident Number:** \_\_\_\_\_

**Receiving Facility:** \_\_\_\_\_ University of Virginia

\_\_\_\_\_ Martha Jefferson – Main Hospital

\_\_\_\_\_ Martha Jefferson – Free Standing

**Patient's Room:** \_\_\_\_\_

**Number of Pages:** \_\_\_\_\_ (including coversheet)

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Please handle with care.  
Thank you.