

DATA REQUEST FORM

Please complete and post or fax (0121-687 3401).

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| Name: | | |
| Job Title: | | |
| Organisation: | | |
| Supervisor: | | |
| Contact phone number: | | |
| NHS email address: | | |
| Intended use of information (e.g. Background, intended presentation/meeting/report) | | |
| Analysis requirements (e.g. numbers, rates, crosstab) | | |
| Case definition: e.g. stillbirths, early neonatal deaths | | |
| Population: e.g. PCT area, West Midlands | | |
| Time period: | from : / / | to: / / |
| Preferred date of completion: | / / | |
| Signature: | | Date: / / |

Notes

1. All requests for data must be approved by Professor Jason Gardosi.
2. No individual records will be supplied, only aggregated data.
3. Standard analyses of mortality data for PCTs, maternity units, and SHAs are available on the Perinatal Institute website www/perinatal.nhs.uk
4. A copy of the Confidentiality & Disclosure Policy must be submitted with this application by organisations outside the NHS