

Appendix: C	PDN: 6012.02	Last Updated: May 1, 2009	Subject: Morbidity & Mortality Form (M & M)	Page 1 of 1
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### EHS Morbidity & Mortality (M&M) Form

Return Completed form by mail to or fax to:  
Emergency Health Services, Attention: Registrar  
239 Brownlow Ave, Suite 200 Dartmouth, NS B3B 2B2  
or Fax to: (902) 424-1781 E-mail: registrarehs@gov.ns.ca

Physician or designate's Name: \_\_\_\_\_  
(Please print)

Physician or designate's Signature: \_\_\_\_\_

LOCATION: \_\_\_\_\_ DATE: \_\_\_\_\_

**A minimum of four (4) M&M's are required per re-registration period  
M&M's are worth two (2) credits each**

*(Note: "Presenters" may earn "Professional Development credit as "Talks/Lectures given" however notification must be specified on this form before submission)*

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