



**MOSAIC  
TURNAROUND TIMES AND ROUTING PARAMETERS**

<b>FORMDESC</b>	<b>WORKTYPE</b>	<b>NORMGOAL</b>	<b>STATGOAL</b>	<b>AUTO ROUTED</b>	<b>ROUTING PARAMETER</b>
STAT	31	2	2	YES	1 hour*
HOSPITALIST REPORT	41	3	2	YES	1 hour*
PROGRESS NOTE	20	4	2	NO	Assigned
HISTORY & PHYSICAL	32	6	2	YES	2 hours*
PSYCHIATRIC EVALUATION	42	6	2	YES	2 hours*
CLINIC PSYCH EVAL	75	6	2	NO	Assigned
QA SITE REVIEW	10	8	2	NO	Assigned
CONSULTATION	33	10	2	YES	6 hours*
CARDIOLOGY / NEUROLOGY	36	12	2	NO	Assigned
OPERATIVE / PROCEDURE	34	20	2	NO	Assigned
DISCHARGE SUMMARY	35	20	2	NO	Assigned
DELIVERY NOTE	39	20	2	NO	Assigned
WOUND CENTER	48	22	2	NO	Assigned
CANCER CENTER	65	22	2	NO	Assigned
NURSING HOME NOTE	76	22	2	NO	Assigned
CLINIC NOTE	77	22	2	NO	Assigned
SLEEP STUDY	96	22	2	NO	Assigned
CLINIC LETTER	78	24	2	NO	Assigned

\* The facility may assign these before they Auto Route.