

MONITOR OUTAGE TABLE

FORM D

| Monitor Outage Incident Number | <u>Date</u> | Time Beginning <u>(24 Hour Clock)</u> | Time Ending <u>(24 Hour Clock)</u> | Hours Involved <u>(x.x)</u> | Cause Code <u>(Attach Explanation for Codes)</u> | Corrective Action Code |
|---|-------------|---|--|-----------------------------------|--|------------------------------|
|---|-------------|---|--|-----------------------------------|--|------------------------------|

Total duration of monitor downtime _____.
(This total should equal the time entered on the Form B, CMS Performance Summary, Item II.)