

WESTCHESTER COUNTY BUREAU OFEARLY INTERVENTION SERVICE LOG

**Instructions:** A service log signed by the parent or caregiver which documents that the service was received by the child on the date and time recorded must be completed after each session. (10 NYCRR§69-4.26(c)). All fields are required. Each field must be completed and must match the appropriate fields on accompanying session notes. Typed signatures are not acceptable. Session notes and service logs must be maintained by interventionists and collected by service provider agencies to support billing. Session notes and service logs must be furnished for program monitoring, fiscal audits, and due process proceedings.

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| **Child’s Name (Last, First):** | **Date of Birth:** | **Child’s EI#:** |
| **Service Type:** |
| **Interventionist Name:** | **Discipline:** | **NPI #:** |
| **Provider Agency Name: *Important Steps, Inc.***  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Date of Service** | **Start Time** | **End Time** | **In-person (I)****OR****Telehealth (T)** | **CPT Code** | **Signature of Parent/Caregiver Verifying that the Service was Delivered on the Date and Time****Indicated** | **Date Signed by Parent/Caregiver** |
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WC Bureau of Early Intervention Service Log - 12/10/2024