



**North Carolina Department of Correction**  
**Division of Prisons**  
**Policy Summary Sheet**

Section: Assessment of Patient  
Policy #: A-5

**Current Review Date: April 2012**  
**Reviewed By: Chief of Health Services**  
**Next Review Due: April 2013**

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**Current Revision Date: April 2012**  
**Supersedes Revision Dated: April 2011**

**Current Revision Summary (if applicable):**

The following change(s) occurred:

This policy has undergone Minor revision and needs to be reviewed in entirety.

*Stephanie L. Leach*

6/21/12

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Division Policy Coordinator

Date