

CORRECTIONAL MANAGED HEALTH CARE POLICY MANUAL	Effective Date: 5/20/2016	NUMBER: E-34.2
	Replaces: 3/17/2016	
	Formulated: 8/87 Reviewed: 01/18	Page 1 of 4
PERIODIC PHYSICAL EXAMINATIONS		

PURPOSE: To provide preventive medical care for offenders in the Texas Department of Criminal Justice.

POLICY: Screening and periodic physical exams for the detection of preventable diseases are provided.

PROCEDURES:

I. Physical examinations will be performed by a physician or a mid-level practitioner. The requirement for periodic physical examinations required in this policy may be met by any documented clinic encounter that meets all required elements for that exam. Periodic physical exams shall include all elements based on age listed below as well as all elements clinically indicated by physical condition, comorbid diseases, family history, and any other risk factors that may be present at the time of the exam. All physical exams and clinical findings must be documented in the health record.

II. All patients 50 years of age or older should receive a physical exam annually. If the offender is 50 years old or older on intake, the baseline physical exam should occur at the time of the intake physical exam. Otherwise the baseline physical exam should occur within the year an offender becomes 50 years of age within one month before or after the calendar month of the date of incarceration (DOI) anniversary. All subsequent annual physical exams should occur within one month before or after the anniversary of the date of incarceration (DOI).

III. Patients enrolled in chronic care clinic and having their annual or periodic physical exam documented coinciding with the chronic care visit will be considered in compliance with this policy as long as the annual physical exam documents all the required elements for the annual or periodic physical exam. If a chronic care visit coincides with the annual physical examination, the visit should occur within one month before or after the calendar month of the DOI anniversary.

IV. Complete physical exam will include weight, height, vital signs and all elements listed above based on age as well as elements clinically indicated by condition, comorbid diseases, family history, and other risk factors that may be present. Radiology studies, laboratory studies including fecal occult blood test (FBOT), and EKG will be performed as clinically indicated and in accordance with the recommendations of the United States preventive services task force.

V. Exams required by age and gender:

A. Male periodic exams required by age:

1. 76 years of age or older will receive an annual physical exam as clinically indicated.
2. 50-75 years of age will receive an annual physical exam including digital rectal and prostate exam (DRPE) and FOBT
3. 40 to 49 years of age can request a routine physical exam through the sick call system in addition to the sick call process addressing specific complaints, but no

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	Replaces: 3/17/2016	
	Formulated: 8/87 Reviewed: 01/18	Page 2 of 4
PERIODIC PHYSICAL EXAMINATIONS		

more frequently than every three years.

B. Female periodic exams required by age:

1. 76 years of age or older will receive an annual physical exam as clinically indicated.
2. 66-75 years of age will receive an annual physical exam including clinical breast exam, digital rectal exam (DRE) and FOBT as well as an annual mammogram.
3. 50-65 years of age will receive an annual physical exam including clinical breast exam, DRE and FOBT as well as an annual mammogram and pelvic exam/Pap smear every 3 years.
4. 40-49 years of age will receive an annual mammogram, clinical breast exam and pelvic/Pap smear every 3 years and can request a routine physical exam through the sick call process addressing specific complaints, but no more frequently than every three years.
5. Less than 40 years of age will receive a clinical breast exam and pelvic/Pap smear every 3 years and can request a routine physical exam through the sick call process addressing specific complaints, but no more frequently than every three years.
6. Female offenders of any age refusing a baseline pelvic/Pap smear at the time of her intake physical may request this baseline exam through the sick call process within the first 90 days of incarceration and at the annual DOI review thereafter.

C. Periodic Physical Exam Requirements Chart by Gender and Age

PERIODIC PHYSICAL EXAM REQUIREMENTS					
Gender	AGE	Annual Physical Exam	Ann DRE/FOBT	MMG	Pap/Pelvic
MALE	76 and older	As clinically indicated	As clinically indicated		
	50-75	Yes	Yes		
	<50	May request q3y	As clinically indicated		
FEMALE	76 and older	As clinically indicated	As clinically indicated	As clinically indicated	As clinically indicated
	66-75	Yes	Yes	Annual	As clinically indicated
	50-65	Yes	Yes	Annual	Q3y
	40-49	May request q3y	As clinically indicated	Annual	Q3y
	<40	May request q3y	As clinically indicated	See Sec VII	Q3y

VI. Fecal Occult Blood Test (FOBT):

A. Offenders at no increased risk for colon cancer should be offered 3 Hemoccult card annually beginning at 50 years of age.

B. Special At Risk Populations:

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	Replaces: 3/17/2016	
	Formulated: 8/87 Reviewed: 01/18	Page 3 of 4
PERIODIC PHYSICAL EXAMINATIONS		

- a. African Americans will be offered 3 Hemoccult cards annually beginning at 45 years of age.
- b. Offenders with a family history of colorectal cancer will be offered 3 Hemoccult cards annually beginning at 40 years of age or 10 years earlier than the age at which a first degree relative was diagnosed, whichever is earlier.
- c. Offenders with medical conditions causing increased risk for colon cancer should be offered three Hemoccult cards annually beginning at the age screening is recommended by the appropriate professional medical association (i.e. 40 years of age for inflammatory bowel disease).

- C. If a DRE or DRPE is performed during the annual physical exam, then the first FOBT should be done at that time. The patient should then be provided 2 additional Hemoccult cards for self-collection. If the patient refuses DRE or DRPE when indicated, the patient should then be offered 3 Hemoccult cards for self-collection.
- D. The unit medical department will instruct the offender on the unit's process for returning the cards. Return of the cards is the responsibility of the offender. The unit medical department is responsible for implementing a process by which offenders will be scheduled a provider appointment if any of the cards are positive for fecal occult blood.
- E. One Fecal Immunochemical Test (FIT) may be used in place of the three hemoccult cards in the situations described above when FIT is available.
- F. Signed informed refusal is required for both DRE and FOBT (or FIT) when indicated by age or other clinical indications, but both may be listed on the same form if both are refused at the same time.

VII. Mammogram availability by referral in addition to age-based guidelines

A baseline mammogram is recommended for female offenders between 35 to 40 years of age who are considered high risk for breast cancer, i.e. fibrocystic disease, history of proliferative cell changes, genetic predisposition, or any past history of breast cancer. Additionally any female or male, regardless of age, who discovers breast changes, will be evaluated for the need for mammography or sonography.

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	Replaces: 3/17/2016	
	Formulated: 8/87 Reviewed: 01/18	Page 4 of 4
PERIODIC PHYSICAL EXAMINATIONS		

Reference: ACA Expected Practice 4-4367 (Ref 3-4348) Periodic Examinations
American College of Gastroenterology Guidelines for Colorectal Cancer Screening 2008
www.acg.gi.org/media/releases/ACG2009CRCGuideline.pdf
American College of Obstetricians and Gynecologists Practice Bulletin #122 “Breast Cancer Screening” August 2011
The Guide to Clinical Preventive Services 2014, Recommendations of the US Preventive Services Task Force.