## TABLE OF CONTENTS

**SECTION A – GOVERNANCE AND ADMINISTRATION**

| Access to Care                        | A-01.1 |
| Responsible Health Authority          | A-02.1 |
| Treatment of Injuries Incurred in the Line of Duty | A-02.2 |
| Medical Autonomy                      | A-03.1 |
| Administrative Meetings               | A-04.1 |
| Health Services Statistical Report    | A-04.2 |
| Correctional Managed Health Care Policies | A-05.1 |
| Quality Improvement/Quality Management Program | A-06.1 |
| Professional and Vocational Nurse Peer Review Process | A-06.2 |
| Emergency Plans and Drills            | A-07.1 |
| Disaster Drill Evaluation Form        | A-07.1 Attachment A |
| Decision Making for Serious Mentally Ill Patients | A-08.1 |
| Mental Health Disciplinary Review Form | A-08.1 Attachment A |
| Transfers of Inmates with Acute Conditions | A-08.2 |
| Approved Medical Transportation Criteria | A-08.2 Attachment A |
| Referral of Inmates to the Developmental Disabilities Program (DDP) | A-08.3 |
| Inmate Medical and Mental Health Classification | A-08.4 |
| Guidelines for Completing the Health Summary for Classification Form | A-08.4 Attachment A |
| Coordination with Windham School System | A-08.5 |
| Medically Recommended Intensive Supervision (MRIS) Screening | A-08.6 |
| Medically Recommended Intensive Supervision Screening Form | A-08.6 Attachment A |
| Medically Recommended Intensive Supervision Medical Summary | A-08.6 Attachment B |
| PULHES System of Inmate Medical and Mental Health Classification | A-08.7 |
| (A) Correctional Managed Health Care PULHES | A-08.7 Attachment A |
| (B) Guidelines For Coding PULHES | A-08.7 Attachment B |
| Medical Pass                          | A-08.8 |
| The Chronic Mentally Ill Treatment Program (CMI-TP) | A-08.9 |
| The Program for the Aggressive Mentally Ill Inmate (PAMIO) | A-08.10 |
Privacy of Care

Notification Requirements Regarding Critically Ill Inmates

Procedure to be Followed in Cases of Inmate Death

Initial Notification to Health Services of Inmate Death

Deaths in Custody – Death Report for Bureau of Justice Statistics

Inmate Death Summary

Pronouncement of Death by Licensed Nurses

Grievance Mechanism

Getting Medical Treatment – English

Getting Medical Treatment – Spanish

Informal Resolution Process

Patient Liaison Program

Provider Peer Review

SECTION B – MANAGING A SAFE AND HEALTHY ENVIRONMENT

PLEASE REFER TO THE INFECTION CONTROL POLICY MANUAL

http://www.tdcj.texas.gov/divisions/cmhc/infection_control_policy_manual.html

SECTION C – PERSONNEL AND TRAINING

Licensure and Credential Verification

Continuing Education/Staff Development

Health Services Reference Materials

Correctional Managed Health Care Reference Materials

Training for Correctional Officers

Inmate Workers

Position Descriptions

Staffing Levels

Orientation Training for Health Services Staff

SECTION D – HEALTH CARE SERVICES SUPPORT

Pharmaceuticals

Heat Stress

Medications Associated With Heath Stress
Comorbidities That May Affect Heat Tolerance D-27.2 Attachment B
Photosensitivity D-27.3
Clinic Space, Equipment, and Supplies D-28.1
Sharp, Needle and Syringe Control D-28.2
Facility Repairs and Renovations D-28.3
First Aid Kits D-28.4
Equipment, Supplies and Inventory D-28.5
Access to Diagnostic Services D-29.1
Hospital and Specialized Ambulatory Care D-30.1
Scheduling Approved Consultations to Specialty Health Services D-30.2

SECTION E – INMATE CARE AND TREATMENT

Information on Health Care Services E-31.1
Organ or Tissue Donation E-31.2
Donor Information Sheet E-31.2 Attachment A
Retraction Of Tissue And Organ Donor Status E-31.2 Attachment B
Obtaining Community Hospital Inmate Information E-31.3
Management Of Inmates Who Have Received Solid Organ and Stem Cell Transplants E-31.4
Transplants
Receiving, Transfer and Continuity of Care Screening E-32.1
CMC Intake History and Health Screening Form E-32.1 Attachment A
SAFPF Detoxification Medications List E-32.1 Attachment B
Health Appraisal of Incoming Inmates E-34.1
Periodic Physical Examinations E-34.2
Use of Force Procedures E-34.3
Reporting Suspected Abuse E-34.4
Chemical Agents and the Use of Force Contraindication List E-34.5
Mental Health Appraisal for Incoming Inmates E-35.1
Mental Health Evaluation E-35.2
Dental Treatment Levels of Care E-36.1
In-processing Inmates – Dental Examination, Classification, Education and Treatment E-36.2
Recording and Scheduling Dental Patient Visits E-36.3
Dental Prosthodontic Services E-36.4
Medically Necessary Dental Prosthetics Referral Form E-36.4 Attachment A
Completed Dental Prosthesis Requisition Form E-36.4 Attachment B
Dental Utilization/Quality Review Committee E-36.5
Periodontal Disease Program E-36.6
Dental Clinic Operations Reporting E-36.7
Dental Comprehensive Treatment Plan (DCTP) E-36.8
Daily Processing of Health Complaints and Sick Call E-37.1
Sick Call Procedure For Inmates Unable To Write E-37.1 Attachment A
Guidelines for Clipper Shave Pass E-37.2
Medical Lay-Ins E-37.3
Lockdown Procedures E-37.4
Interpreter Services – Monolingual Spanish-Speaking Inmates E-37.5
Cosmetic Surgery E-37.6
Health Evaluation and Documentation Inmates in Segregation / Restrictive Housing E-39.1
Alternative Meal Service E-39.2
Direct Medical Orders E-40.1
Emergency Services E-41.1
Emergency Response During Hours of Operation E-41.2
Emergency Response Bag Inventory List E-41.2 Attachment A
Inmate Transport and Transfer E-42.1
Missed Clinic Appointment E-42.2
SLC Missed Appointment Audit/Survey E-42.2 Attachment A
Transportation of Infirmary and Inpatient Mental Health Inmates E-42.3
Authorization To Leave The Inpatient or Sheltered Housing Setting E-42.3 Attachment A
Medical Holds E-42.4
Delegation to Advanced Practice Registered Nurses and Physician Assistants E-43.1
Prescriptive Authority Agreement E-43.1 Attachment A
Alternative Physician Supervision Log E-43.1 Attachment B
Continuity of Care E-44.1
Examination of Inmates by Private Practitioners E-44.2
Request and Consent for Examination by Private Practitioner E-44.2 Attachment A
SECTION F – HEALTH PROMOTION AND DISEASE PREVENTION

Health Education and Promotion F-46.1
Therapeutic Diets and Food Allergies F-47.1
Counseling Sheet For Therapeutic Diet Refusal F-47.1 Attachment A
Exercise Program F-48.1
Personal Hygiene F-49.1
Tobacco Free Environment F-50.1

SECTION G – SPECIAL NEEDS AND SERVICES

Inmates with Special Needs G-51.1
Admission to A Geriatric Center G-51.2
Admission Health Appraisals for Inmates with Physical Disabilities G-51.3
Speech Pathology Referral Criteria for TDCJ G-51.3 Attachment A
Level of Care Assessment G-51.3 Attachment B
Wheelchair Repair & Maintenance G-51.4
Certified American Sign Language (ASL) Interpreter Services G-51.5
Referral of an Inmate for Admission into a Behavioral Health Facility G-51.6

Behavioral Health Treatment for Substance Abuse Felony Punishment Facility G-51.7
Inmates
Care of Inmates With Terminal Conditions G-51.8
Consent to Hospice Care G-51.8 Attachment A
Hospice Guidelines G-51.8 Attachment B
Wheelchair Use G-51.9
Special Wheelchair Committee, Treatment Plan of Inmate Refusing To Walk G-51.9 Attachment A
Special Wheelchair Committee Treatment Plan Form G-51.9 Attachment B
Chronic Care Program G-51.10
Treatment of Inmates with Intersex Conditions, Gender Identity Disorder, or G-51.11
Gender Dysphoria
Consent Form for Therapy with Male Hormones G-51.11 Attachment A
Consent Form for Therapy with Female Hormones G-51.11 Attachment B
Inmates with Special Needs who are Releasing From TDCJ G-51.12
Admission to a Sheltered Housing

Infirmary Care

Chronic Mentally Ill – Sheltered Housing (CMI-SH)

Admission to the TDCJ Mental Health Therapeutic Diversion Program (MHTDP)

Seriously Mentally Ill – Sheltered Housing (SMI-SH)

Seriously Mentally Ill – Sheltered Housing (SMI-SH) Referral Form

Suicide Prevention Plan

Health Services Policy Facility Addendum

Management of Inmates Hunger-Strikes

Detoxification

Pregnant Inmates

Inmates with Alcohol or Other Substance Abuse Disorders

Sexual Assault/Sexual Abuse

Penal Code, Chapter 22. – Assaultive Offenses


Optical Prostheses and Appliances

Correctional Managed Health Care Dispensing of Prescription Eyewear

Medical Prostheses and Orthotic Devices

Examples of Conditions not Suitable for Brace and Limb Referral Which Can be Managed at the Unit Level

SECTION H – HEALTH RECORDS

Health Records – Organization, Maintenance and Governance

Outpatient/Inpatient Health Record Format

List of EHR Chart Sections

List of Approved Abbreviations

CMHC Electronic Health Record – Standard Operating Procedure (SOP)

CMC Documentation Clarification

CMHC Electronic Health Record SOP – Creating an Addendum Note

Incomplete Chart Notation

Inpatient Health Records

History and Physical Examination

Revised (9/29/2021)
Discharge Summary  
Approval To File an Incomplete Medical Record  
Health Services Forms Control and Design  
Utilization of the Electronic Health Record  
Confidentiality and Release of Protected Health Information  
Affidavit of Personal Representative  
Authorization for the Use and Disclosure of Protected Health Information (PHI)  
– (HSA-27) English  
Authorization for the Use and Disclosure of Protected Health Information (PHI)  
– Spanish  
Calculation of Costs for Patient Health Information (2/2005) Facilities  
Calculation of Costs for Patient Health Information (2/2005) Health Services Archives  
Transfer of Health Records  
Breach of Confidentiality Incident Log  
Breach of Confidentiality Form  
Retention/Destruction of Health Records  

SECTION I – MEDICAL-LEGAL ISSUES  
Medical Therapeutic Restraints  
Medical Therapeutic Restraint Flow Sheet  
Therapeutic Restraint of Mental Health Patients  
Therapeutic Seclusion of Mental Health Patients  
Compelled Psychoactive Medication for Mental Illness  
CMHC MH Services – Certificate of Emergency Compelled Psychoactive Medication in a Mentally Ill Person  
Certificate of Non-Emergency Compelled Psychoactive Medication in a Mentally Ill Person  
Blood and Urine Testing for Forensic Purposes  
DNA Specimen Collection  
Forensic Information  
Medical Consultation for the Inmate Drug Testing Program  
Inmate Controlled Substance Testing Information Form
<table>
<thead>
<tr>
<th>Prescription Drugs Giving Positive Results for the Sure-Screen Test</th>
<th>I-68.4 Attachment B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participation in Executions</td>
<td>I-69.1</td>
</tr>
<tr>
<td>Informed Consent</td>
<td>I-70.1</td>
</tr>
<tr>
<td>Request/Consent For Treatment Or Services</td>
<td>I-70.1 Attachment A</td>
</tr>
<tr>
<td>Consent for Admission to a Behavioral Health Facility</td>
<td>I-70.2</td>
</tr>
<tr>
<td>TDCJ - Mental Health Services – Voluntary Consent for Admission to a Behavioral Health Facility</td>
<td>I-70.2 Attachment A</td>
</tr>
<tr>
<td>TDCJ - Mental Health Services – Psychiatric Involuntary Admission Review</td>
<td>I-70.2 Attachment B</td>
</tr>
<tr>
<td>TDCJ - Mental Health Services - Involuntary Admission to a Behavioral Health Facility</td>
<td>I-70.2 Attachment C</td>
</tr>
<tr>
<td>Facility</td>
<td></td>
</tr>
<tr>
<td>Inmate’s Right to Refuse Treatment, Department’s Right to Compel Treatment</td>
<td>I-71.1</td>
</tr>
<tr>
<td>Request for Compelled Medical Treatment</td>
<td>I-71.1 Attachment A</td>
</tr>
<tr>
<td>Refusal of Treatment or Services</td>
<td>I-71.1 Attachment B</td>
</tr>
<tr>
<td>Instructions For Completing The Refusal Of Treatment Form</td>
<td>I-71.1 Attachment C</td>
</tr>
<tr>
<td>Patient Self-Determination Act, Natural Death Act, Advance Directives Act</td>
<td>I-71.2</td>
</tr>
<tr>
<td>Directive To Physicians</td>
<td>I-71.2 Attachment A</td>
</tr>
<tr>
<td>Standard Out-Of-Hospital Do-Not-Resuscitate Order</td>
<td>I-71.2 Attachment B</td>
</tr>
<tr>
<td>Patient Information About Advance Directives</td>
<td>I-71.2 Attachment C</td>
</tr>
<tr>
<td>Biomedical Research</td>
<td>I-72.1</td>
</tr>
</tbody>
</table>