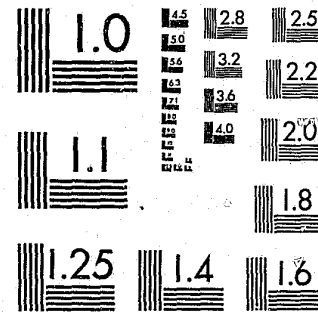


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INSTRUCTORS MANUAL

Companion to
RECEIVING HEALTH SCREENING BY JAIL PERSONNEL
A Training and Reference Manual

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Medical Association of Georgia
Committee on Prison Health Care

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INSTRUCTOR'S MANUAL

Introduction

This manual is designed to accompany the Receiving Screening Manual. It is to be used by the instructors of the two-day receiving screening course and the people in charge of making the necessary arrangements for the course. Each instructor should read both manuals carefully well in advance of the course in order to plan for the most effective use of the two days.

One of the instructors must be a detention officer who has completed this course and has used this receiving screening method in his own jail. This person will be able to teach effectively to a group of peers, utilizing his own experiences. The other instructor, a health professional (physician, nurse, or physician's assistant) preferably with some experience working in a jail setting, will be able to answer some of the more difficult questions which will arise. The team-teaching approach should emphasize the necessity of cooperation between the jails and health professionals.

The authors wish to express their appreciation to the following people who have assisted in preparing the course and manual: J. Rhodes Haverty, M.D., Chairman, MAG Committee on Prison Health Care; Mrs. Dorothy Parker, Pilot Project Director; Ms. Day Ann Doak, Assistant Pilot Project Director; Ms. Vickie Frush, Secretary; and the members of the MAG Committee on Prison Health Care: Charles Allard, M.D.; James Baugh, M.D.; Walter Harrison, M.D.; Bob Maughon, M.D.; Ken Walker, M.D.; Joseph Wilber, M.D.; Joseph Herteil, M.D.; and Walker McGraw, M.D.

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Preparation

The course should be scheduled for a two-day period which places the least strain upon the jails' security. At least one booking officer from each shift should complete the course. It is designed for twelve to twenty-five participants.

Location: Any small city should have the necessary equipment and meeting space. A room with the appropriate number of chairs, a 3/4-inch videotape playback unit and a videotape monitor are all that is necessary. The ideal location will be convenient to the participants.

Equipment Needed:

- Receiving Screening Manuals - one for each participant and instructor (given to participants)
- Instructor's Manuals - one for each instructor and person in charge of arrangements
- 3/4-inch videotape playback unit and monitor
- Thermometers
- Videotape designed for this course: "Recognition of Abnormal Behavior" (cassette available from MAG)
- Pretest, post-test, and course evaluations - one for each participant
- Screening forms - two for each participant
- Pencils, scratch paper
- Urine dipsticks for sugar
- Blackboard
- Physicians' Desk Reference (PDR)

General Principles for Instructors

1. Encourage group participation by asking questions such as "Why is receiving screening important."
2. Try to adhere to the suggested time schedules, but not so rigidly that discussion is curtailed or material is not understood.
3. After each section ask if there are questions.
4. Divide the material between the instructors. Alternate leading the discussion every few minutes.
5. If participants look bored, you're doing something wrong. Take a break, return, get group participation.
6. Use examples from your own experience.
7. Distribute the manuals, but instruct the participants not to look at each section until it has been discussed.
8. Have a pot of coffee, tea, or other refreshments available.

Schedule

The following schedule is a suggested guide for the two-day course. Trying to stick to the suggested times will insure that all aspects of receiving health screening are adequately covered. Do not be rigid about the times, however, by cutting off discussion or failing to answer questions.

Day 1

Noon - 12:30	Introduction of Instructors and Participants
12:30 - 12:45	Pretest
12:45 - 1:00	Purpose and Goals
1:00 - 1:40	Receiving Screening
1:40 - 2:00	Break
2:00 - 2:15	Meeting the Need
2:15 - 2:45	Decision Making
2:45 - 3:15	Videotape
3:15 - 3:30	Break
3:30 - 4:15	General Principles

Day 2

10:00 - 10:15	Seating, Review of Previous Days Activities
10:15 - 11:15	Receiving Screening Forms through Other Problems
11:15 - Noon	Role Playing
Noon - 1:00	Lunch Break
1:00 - 2:00	Drugs and Alcohol
2:00 - 3:00	General Appearance through Behavior (Videotape)
3:00 - 3:20	Break
3:20 - 3:30	Temperature, Pulse, Height, Weight, and Urine Dipstick
3:30 - 4:00	Post-test, Discussion of Answers
4:00 - 4:30	Evaluation and Discussion

First Day

Time
Allotted

30 minutes

Seating. Introduce instructors and give their pertinent background (jail and health experience). Ask about the jail and health experience of the participants at this time. Explain that this is a course designed to help improve health care in jails, but do not discuss receiving screening at this time.

15 minutes

Pretest. Distribute the pretest and explain that it is being used to determine how much people learn from the course. Allow everyone to finish the test. Included in the pretest is the first scene from the videotape.

Collect the tests and explain that the answers will be given throughout the course and discussed at the end.

15 minutes

Purpose and Goals. Distribute the Receiving Health Screening Manuals with the instruction, "Only look at each section of the manual as you are instructed."

Turn to the section "Purpose" (page 1). Explain in your own words (this section is probably best handled by the detention officer) the purpose of the course. Allow a minute or two for participants to read the section.

Turn to the section "Goals" (pages 2-3) and read the goals of the course. Discuss them briefly, but do not go into detail. They will each be covered later in the course.

Place emphasis on what the course is not designed for, and ask people to refer to the "Goals" section throughout

40 minutes

the course to see if they are meeting the goals.

Receiving Screening. The manuals should now be closed.

Define receiving screening. Then ask for reasons why it is necessary. We have listed seven. Allow a few minutes to discuss each reason. After the participants have listed as many as they can, instruct them to open their books to this section (pages 4-6). Encourage examples from your own and the participants' experiences such as these:

1. In a large city jail, in one month, two prisoners committed suicide within days of their arrest. Both had been under psychiatric care recently, but neither had receiving screening at the jail to identify the problem. These deaths might have been prevented if someone had been aware of the problems.
2. In Georgia a prisoner with tuberculosis was incarcerated without receiving health screening. By the time his TB was diagnosed he had spread the TB germ to over 100 other prisoners and jail personnel.
3. Law suits by inmates are mounting. In Georgia the Guthrie Suit is a class-action suit by inmates in Georgia State Prison which alleges lack of health care. In Alabama a federal judge refused to allow any additional inmates to be accepted into the State prisons until, among other things, health care improved.
4. There are many obvious examples. Think of your own.
5. If a prisoner who experienced trauma were accepted into the jail at night when the staffing is minimal later

begins to vomit blood, for example, he would have to be rushed to the hospital. Transporting him may present a security problem by itself, while leaving the jail dangerously understaffed.

6. Another example is an alcoholic. Life threatening alcohol withdrawal may be prevented by detection and proper treatment. If he goes into DT's, however, he will be hospitalized, and there is still a 10 per cent chance he will die. The cost of hospitalization could be \$1,000; his death could result in lawsuits which, even if the jail won, would cost much more.
7. Some jails distribute information sheets to prisoners upon their arrest. These sheets explain their rights and the services available. A sheet explaining health services is useful. It should also explain the receiving health screening process.

Ask if there are any questions about the purpose of the course or why receiving screening is necessary.

20 minutes

Break

15 minutes

Meeting the Need. Discuss these in order, using the manual (pages 7-9) as a guide:

1. Screening forms - have everyone look over the form (pages 18-19). Emphasis should be placed on the fact that it is brief and only intended to cover those health problems which are immediate threats to the prisoner, other prisoners, or jail personnel. The use of the form will be discussed later.

2. Emphasize that the manual is to be used as an aid to the course and for reference later in the jail. It cannot answer all questions which will arise, but used with common sense and the principle of "When in doubt, seek medical advice" it can provide for effective screening.
3. a. These community resources should already be available. Stress the importance of written agreements.
b. Show a copy of the PDR. Its use will be discussed later.

30 minutes

Decision Making. Have the participants close their manuals. Ask them to list the options a booking officer has when he detects someone with a health problem. Then instruct them to turn to this section of the manual (pages 10-12) and discuss the options listed. Pay close attention to the definition of medical clearance.

30 minutes

Videotape. Show the videotape from the beginning. Explain first that the jailers already possess the chief skills necessary to do effective receiving health screening: observation and common sense. Ask them to write down everything unusual they observe about each of the six "prisoners."

15 minutes

Break

45 minutes

General Principles. Use the manual (pages 13-15) to teach each principle. This is an extremely critical section, so take time to discuss the implications of each principle. Ask for questions after each. Use examples

of your own. Other examples include:

1. Signs of trauma indicate need for medical attention.
It is critical in health screening that the detention officer make clear that he is interested in the health of the prisoner, not in gathering additional evidence about the alleged crime.
2. Much health data could prove embarrassing to the prisoner or his family. Consider venereal disease, psychiatric hospitalization, etc.
3. You may consider what would happen if the question concerning heart disease, for instance, were omitted for someone who has had three heart attacks in the past. The questionnaire is slightly redundant in asking about major health problems in several ways. Medications and hospitalization, for instance, may have already been mentioned by someone with heart disease. The form was designed in this manner to be certain no major problems are overlooked.
4. Everyone can give examples of prisoners lying about their medical problems. Emphasize what could happen if the prisoner were telling the truth.
5. Telling the prisoner he has TB or hepatitis, when in fact he doesn't, might result in harm to him from other inmates and needless worry.
6. Reemphasize!!

Before everyone leaves, ask for any questions. Reemphasize the importance of the sections of the manual concerning goals and general principles.

Tell the participants to review the first day's material at night and to return with their manuals at the designated time the next day.

Second Day

Time
Allotted

15 minutes

Seating. Ask if there are questions concerning the first day's activities.

60 minutes

Receiving Screening Forms. Turn to pages 16-19 to discuss the forms. Emphasize that the process does not take long and is designed to cover only those health problems which are important to detect in order to decide whether or not medical clearance, medications, special housing, etc. is necessary. Note that each item has the page numbers in the manual to which the booking officers should refer if they get a "Yes" answer. Point out pages 20-31 and use the following example to demonstrate the use of the form:

The prisoner has seizures. Turn to page 22 and ask the questions pertaining to seizures. He takes Dilantin. Turn to pages 26-27 and ask these questions. It was prescribed by Dr. Kildare. He takes it once a day and last took it yesterday. The arresting officer has the medication. Demonstrate how to verify the medication in the product identification section of the PDR. He needs to take it today. There is no need to seek medical clearance to administer the medication if it looks like the capsule in the PDR. Return to page 22 and ask the remaining question and note the instructions. Point out that the answers to question one on the form may also apply to questions

3, 5, and 6. There is no need to recopy the information for the questions. Ask all questions and write down any additional or new information.

There is no need to read each section on pages 20-31.

The important thing is to understand how to use the manual to fill out the questionnaire and make appropriate decisions.

Spend a few minutes discussing the sections on Medications (pages 26-27), Trauma (page 28), and Psychiatric Care (page 29).

45 minutes

Role Playing. Distribute blank screening forms and choose pairs of participants to practice using the forms with the following examples. After each one point out errors and encourage discussion. Be certain all items on the first page of the form are completed (name, number, time, date, and signature also). Discuss the proper disposition for each problem:

- A. After verification of the medication by a local physician, or Dr. Jones, the prisoner should be given a few nitroglycerin tablets and assigned to a bed near the officers' station.
- B. If the temperature is normal, verify the medication or obtain it the following day. Write "Allergic to Penicillin" in big letters on the health folder and the screening form.
- C. Seek medical clearance.
- D. Seek medical clearance.

JAIL RECEIVING SCREENING

Prisoner's Name Jim L. Brown

Number 28

Date December 16, 1977 Time 9:30 AM ~~PM~~ Signature of Booking Officer Paul Smith

Read this statement: "The following information is being collected for your health record. It is confidential and may not be released without your written consent."

Yes	No	Question	Give Details on All "Yes" Responses (See Receiving Screening Manual)
X		1. Have you had <u>heart trouble</u> ? emphysema or asthma? seizures (epilepsy, convulsions)? diabetes? TB (tuberculosis)? (pages 20-22)	1. Heart trouble - chest pain (angina), takes nitroglycerine from Dr. Jones whenever he has pain and has to carry it at all times. Must not overexert. 6. For #1 and takes cough syrup for cough.
	X	2. Are you allergic to anything? (page 22)	
	X	3. Have you been in the hospital anytime during the last three months? (page 24)	
	X	4. Have you had surgery in the last three months? (page 24)	
	X	5. Have you seen a doctor for any problem in the last month? (page 25)	
X		6. Are you currently taking any medication? (pages 26-27)	
	X	7. Do you have any injuries? (page 28)	
	X	8. Have you ever been in a psychiatric or mental hospital? (page 29)	
	X	9. Are you under the care of a psychiatrist currently? (page 29)	
	X	10. Women only: Are you pregnant? Have you had a baby or an abortion in the last month? (page 30)	
	X	11. Do you have any other health problems? (page 31)	

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EXAMPLE A

JAIL RECEIVING SCREENING

Prisoner's Name Bob Simmons

Number 46

Date August 19, 1970 Time 12:40 AM PM Signature of Booking Officer James Lance

Read this statement: "The following information is being collected for your health record. It is confidential and may not be released without your written consent."

Yes	No	Question	Give Details on All "Yes" Responses (See Receiving Screening Manual)
X		1. Have you had heart trouble? emphysema or asthma? seizures (epilepsy, convulsions)? diabetes? <u>TB (tuberculosis)</u> ? (pages 20-22)	1. TB. Take a pill once a day from Dr. Jones. Needs it every day and took it today. Hasn't been coughing recently. 2. Allergic to penicillin. 6. Only for #1.
X		2. Are you allergic to anything? (page 22)	
	X	3. Have you been in the hospital anytime during the last three months? (page 24)	
	X	4. Have you had surgery in the last three months? (page 24)	
	X	5. Have you seen a doctor for any problem in the last month? (page 25)	
X		6. Are you currently taking any medication? (pages 26-27)	
	X	7. Do you have any injuries? (page 28)	
	X	8. Have you ever been in a psychiatric or mental hospital? (page 29)	
	X	9. Are you under the care of a psychiatrist currently? (page 29)	
	X	10. Women only: Are you pregnant? Have you had a baby or an abortion in the last month? (page 30)	
	X	11. Do you have any other health problems? (page 31)	

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EXAMPLE B

JAIL RECEIVING SCREENING

Prisoner's Name Robert McGraw

Number 99

Date June 18, 1969 Time 3:30 AM PM

Signature of Booking Officer *William J. [Signature]*

Read this statement: "The following information is being collected for your health record. It is confidential and may not be released without your written consent."

Yes	No	Question	Give Details on All "Yes" Responses (See Receiving Screening Manual)
	X	1. Have you had heart trouble? emphysema or asthma? seizures (epilepsy, convulsions)? diabetes? TB (tuberculosis)? (pages 20-22)	
	X	2. Are you allergic to anything? (page 22)	
X		3. Have you been in the hospital anytime during the last three months? (page 24)	3. Central State Hospital (psychiatric) released yesterday. Lost medicine. Follow-up?
	X	4. Have you had surgery in the last three months? (page 24)	
X		5. Have you seen a doctor for any problem in the last month? (page 25)	5. See #3.
X		6. Are you currently taking any medication? (pages 26-27)	6. See #3.
	X	7. Do you have any injuries? (page 28)	
X		8. Have you ever been in a psychiatric or mental hospital? (page 29)	8. See #3.
	X	9. Are you under the care of a psychiatrist currently? (page 29)	
	X	10. Women only: Are you pregnant? Have you had a baby or an abortion in the last month? (page 30)	
	X	11. Do you have any other health problems? (page 31)	

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EXAMPLE C

JAIL RECEIVING SCREENING

Prisoner's Name Matthew Martin

Number 50

Date October 15, 1948 Time 6:00 ~~AM~~ PM

Signature of Booking Officer Simon Mitchell

Read this statement: "The following information is being collected for your health record. It is confidential and may not be released without your written consent."

Yes	No	Question	Give Details on All "Yes" Responses (See Receiving Screening Manual)
	X	1. Have you had heart trouble? emphysema or asthma? seizures (epilepsy, convulsions)? diabetes? TB (tuberculosis)? (pages 20-22)	
	X	2. Are you allergic to anything? (page 22)	
	X	3. Have you been in the hospital anytime during the last three months? (page 24)	
	X	4. Have you had surgery in the last three months? (page 24)	
	X	5. Have you seen a doctor for any problem in the last month? (page 25)	
	X	6. Are you currently taking any medication? (pages 26-27)	
X		7. Do you have any injuries? (page 28)	7. Alleges knocked out in fight with the arresting officer.
	X	8. Have you ever been in a psychiatric or mental hospital? (page 29)	
	X	9. Are you under the care of a psychiatrist currently? (page 29)	
	X	10. Women only: Are you pregnant? Have you had a baby or an abortion in the last month? (page 30)	
	X	11. Do you have any other health problems? (page 31)	

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EXAMPLE D

60 minutes

Lunch Break

60 minutes

Drugs and Alcohol. Explain the principles on pages 32-33.

Then discuss alcohol, barbiturates and "downs", heroin and methadone, speed and "ups", and psychedelics. Note that there is no question concerning marijuana because it

is no immediate threat to anyone's health. Then do

role playing using the following examples, the drug

section of the questionnaire, and the manual:

Example A - Experiencing alcohol withdrawal and must see a physician immediately.

Example B - No need for medical clearance because he

is not a habitual user of any of the

drugs. There is no danger of withdrawal

or likelihood of drug influenced behavior.

Example C - Seek medical clearance.

Drugs Used During Last Week	Yes	No	Last Used	How Much (Daily)	Length of Current Use (Consecutive Days)	Withdrawal Symptoms
Alcohol (pages 34-37)	X		4 days ago	4 pints wine daily	Years	"Shaky" - needs a drink
Barbiturates or Downs (page 38)		X				
Heroin or Methadone (pages 39-40)		X				
Speed or Ups (page 41)		X		XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX
Psychedelics (LSD, etc.) (page 42)		X		XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX

Normal	Abnormal	Physical Assessment	Describe All Abnormalities
		General appearance (consciousness, gait, signs of trauma, speech, general health and hygiene, breathing difficulty) (pages 43-45)	
		Old trauma with limit to function (pages 46-47)	
		Signs of recent trauma (especially head) (pages 46-47)	
		Skin (jaundice, rash) (page 48)	
		Behavior (pages 49-50)	
		Signs of drug use or withdrawal (page 51)	

(page 52) Pulse _____/60 Seconds Ht. _____ In. Wt. _____ Lbs.

Optional: Temperature _____ °F. Urine Dipstick _____

Disposition: General population _____ Medical clearance X Call physician _____
 Detox _____ Segregation _____ Infirmary _____ Medication _____
 Other (describe action):
 Seek medical clearance because of withdrawal.

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EXAMPLE A

Drugs Used During Last Week	Yes	No	Last Used	How Much (Daily)	Length of Current Use (Consecutive Days)	Withdrawal Symptoms
Alcohol (pages 34-37)	X		Today	Occasional drink, not everyday	Years	-----
Barbiturates or Downs (page 38)	X		3 days ago	Occasional	-----	-----
Heroin or Methadone (pages 39-40)		X				
Speed or Ups (page 41)	X		1 week ago	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
Psychedelics (LSD, etc.) (page 42)		X		XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX

Normal	Abnormal	Physical Assessment	Describe All Abnormalities
		General appearance (consciousness, gait, signs of trauma, speech, general health and hygiene, breathing difficulty) (pages 43-45)	
		Old trauma with limit to function (pages 46-47)	
		Signs of recent trauma (especially head) (pages 46-47)	
		Skin (jaundice, rash) (page 48)	
		Behavior (pages 49-50)	
		Signs of drug use or withdrawal (page 51)	

(page 52) Pulse _____ /60 Seconds Ht. _____ In. Wt. _____ Lbs.

Optional: Temperature _____ °F. Urine Dipstick _____

Disposition: General population X Medical clearance _____ Call physician _____
 Detox _____ Segregation _____ Infirmary _____ Medication _____
 Other (describe action): Admit - no chronic use.

Drugs Used During Last Week	Yes	No	Last Used	How Much (Daily)	Length of Current Use (Consecutive Days)	Withdrawal Symptoms
Alcohol (pages 34-37)		X				
Barbiturates or Downs (page 38)		X				
Heroin or Methadone (pages 39-40)		X				
Speed or Ups (page 41)		X		XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXX
Psychedelics (LSD, etc.) (page 42)	X		3 hours ago	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXX

Normal	Abnormal	Physical Assessment	Describe All Abnormalities
		General appearance (consciousness, gait, signs of trauma, speech, general health and hygiene, breathing difficulty) (pages 43-45)	
		Old trauma with limit to function (pages 46-47)	
		Signs of recent trauma (especially head) (pages 46-47)	
		Skin (jaundice, rash) (page 48)	
		Behavior (pages 49-50)	
		Signs of drug use or withdrawal (page 51)	

(page 52) Pulse _____ /60 Seconds Ht. _____ In. Wt. _____ Lbs.

Optional: Temperature _____ °F. Urine Dipstick _____

Disposition: General population _____ Medical clearance X Call physician _____
 Detox _____ Segregation _____ Infirmary _____ Medication _____
 Other (describe action): _____

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EXAMPLE C

Ask if there are other questions concerning alcohol and drugs.

60 minutes

General Appearance through Behavior. Point out that even for a doctor, general appearance is the most important part of a physical examination. Have the participants close their manuals and ask them what kind of things they can notice just by observing someone's general appearance. Then discuss pages 43-45. Discuss briefly pages 46-51. Show each segment of the videotape and ask them to note all abnormalities. The list should include:

- A. Seems depressed
Clothes disarrayed
Bandage on wrist - self inflicted wound?
(tried to hide it)
Crying
Many complaints about health
Low voice
Tired
Doesn't seem to care
Sighs a lot
No eye contact
Impression - the person seems very depressed and possibly suicidal. Seek medical clearance.
- B. Hair messed up
Rapid speech
Hyperactive
Hostile
Bruise and cut
Clothes dirty
Sneering
Doesn't pay much attention
Behavior is unusual for the situation
Impression - seek medical clearance because of alleged trauma and unusually hostile behavior.
- C. Keeps touching head - head trauma?
Lack of concentration; distracted
Hyperactive - seems nervous
Wrong answers to questions
Paranoid outburst
Hallucination (snake)
Decreased affect
"Has to steal for headaches" (nonsequitur)
Impression - seek medical clearance - may be crazy or on drugs.

- D. Confused
Carrying shoes
Disoriented to name, place
Bizarre appearance - lipstick smeared, clothes disarrayed
Dreamy-looking off
Inappropriate answers (loose association - "heart")
Poor memory
Impression - seek medical clearance because of unexplained confused behavior.
- E. Limping
Loose, dirty bandage
Slow speech
Inattention
Sloppy dress
Fidgety
Inappropriate answers
Childish behavior (security blanket?)
Impression - seek medical clearance because of old trauma (dirty wound). Likely mentally retarded.
- F. Demanding drugs; "slight drug problem"
Subservient - "sir"
Chills
Fidgety
Yawning
Sniffles
History of "nerve problems"
Didn't know family doctor's name
Sighing
Impression - seek medical clearance because of habitual use of downers (Valium and Quaaludes) and methadone.

20 minutes Break

10 minutes Temperature, Pulse and Urine (pages 52-53). Demonstrate taking the pulse, temperature (glass and disposable thermometers), and checking the urine for sugar.

30 minutes Post-Test. Repeat the test using the same methods. Exchange papers and ask for the correct answers. Explain the answers using the following answer key:

Choose the one most suitable answer:

REFERENCE PAGES

1. The purpose of this course is:
 - A. To teach basic first aid.
 - B. To relieve jails of the necessity of using health personnel.
 - [C] To train non-medical personnel to do health screening in jails.
 - D. All of the above.
2. Receiving health screening is:
 - [A] A general health status survey during book-in.
 - B. A detailed complete medical history and physical exam.
 - C. Designed to meet all the health needs of long-term prisoners.
 - D. All of the above.
3. Receiving health screening is useful because:
 - A. It helps to protect the health of the prisoner, jail personnel, and other prisoners.
 - B. It enhances jail security.
 - C. It may save the jail money.
 - [D] All of the above.
4. In addition to proper forms, an adequate jail receiving health screening program will have:
 - A. Written agreements with local physicians to provide medical back-up.
 - B. Personnel trained to do adequate screening exams.
 - C. Written plans for emergency hospital care and transportation.
 - [D] All of the above.
5. Medical clearance is:
 - A. A preemployment health questionnaire for jail personnel.
 - [B] A physician writing that he has examined a prisoner and found him to be healthy enough to be housed in the jail.
 - C. Necessary for all prisoners.
 - D. All of the above.
6. Receiving screening is designed to detect:
 - A. Potentially violent or suicidal prisoners.
 - B. Chronic alcohol and drug users.
 - C. Prisoners who have been injured during arrest.
 - [D] All of the above.
7. Prisoner X has a small cut and bruise on his forehead due to a scuffle with the arresting officers. He states he does not need to see a physician and feels fine. You should:
 - A. Accept him into the general population.
 - B. Put him in the infirmary.

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8. If a prisoner states he has a heart problem, you should:
 - A. Take him to the hospital.
 - B. Tell him you know he's lying because you saw him fighting, he's only 23 years old, and has been in jail before.
 - [C.] Consult the "Receiving Screening Manual" to find out what to do.
 - D. None of the above.
9. If a prisoner has had TB in the past, you should:
 - A. Seek medical clearance.
 - B. Place him in a separate cell.
 - [C.] See the "Receiving Screening Manual" to determine other questions to ask.
 - D. Call his physician immediately.
10. If you have any doubt about someone's health status, you should:
 - A. Inform the jail's physician on his next visit.
 - [B] Seek medical clearance before admission.
 - C. Ask him if he can wait until the regular visit of the jail's health staff.
 - D. None of the above.

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Page 13

Circle True (T) or False (F)

- Page 13 11. Information about drug use collected during receiving screening may be used in court. T [F]
- Pages 13-14 12. All jail personnel should have access to the health information collected. T [F]
- Page 15 13. If you are uncertain about whether or not to accept someone into the jail because of his health status, you may admit him until the doctor makes his regular visit to the jail the following day. T [F]
- Page 43 14. All prisoners who are unable to remain awake to answer the questions must have medical clearance. [T] F
- Page 26 15. Prisoners should be allowed to take any medications they carry in a labeled prescription container. T [F]
- Page 29 16. Most jail suicides occur fairly soon after incarceration. [T] F
- Pages 26-27 17. No medication should be given the prisoner unless it is prescribed by the jail's physician. T [F]
- Page 28 18. Trauma to the stomach which does not leave any bruises may result in death. [T] F
- Page 29 19. If a prisoner was recently released from a psychiatric hospital, medical clearance should be obtained. [T] F
- Page 54 20. The Receiving Screening Manual is designed to cover all situations which may arise. T [F]
- Pages 35-37 21. If a chronic alcoholic stopped drinking five days ago, he may be admitted to the general population. T [F]
22. Withdrawal from marijuana may be life-threatening. T [F]
- Pages 35-37 23. Alcohol withdrawal is a life-threatening illness. [T] F
24. What is your impression of this person (see videotape)?
Suicidal or depressed
25. What action should you take with this person (see videotape)?
Seek medical clearance

30 minutes

Summary and Review. Reemphasize the general principles. Ask for questions. Ask if the participants feel they have met the goals of the course. If questions arise or they need help utilizing this receiving screening method, they may contact the Medical Association of Georgia's Jail Health Project or their local health department.

END