

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Public Safety Prisons
Health Services

SECTION: Assessment of Patient

POLICY # A - 2

PAGE 1 of 18

SUBJECT: Intake Physical Exam and PULHEAT System

EFFECTIVE DATE: March 2013

SUPERCEDES DATE December 2011

PURPOSE

To provide guidelines for completion of a physical exam and health profile.

POLICY

A complete history and physical examination will be accomplished at the Reception and Diagnostic Center by appropriate health professionals, as soon as possible, and no later than (7) calendar days after admission. Each inmate in the North Carolina Department of Public Safety, Prison / Health Services (NCDPSP/HS) will be assigned a health profile resulting in an activity grade which indicates the inmate's overall ability to participate in jobs, programs, activities, and services.

PROCEDURE

I. SCOPE OF EXAMINATION

This examination will be completed and documented as follows in the Outpatient Health Record. An outpatient health record will be originated by completing the following forms: DC-385, Report of Medical History; form DC-385A, HIV Screening Supplemental Sheet; form DC386, Report of Medical Examination; form DC-387, Chronological Record of Medical Care; DC-386B Activity Restriction Sheet.

- A. Physiological measurements will be accomplished to include height, weight, temperature, pulse, blood pressure, near and far vision, and the results recorded on form DC-386.
- B. Laboratory screening test in accordance with guidelines set forth by the Chief of Health Services/ Medical Director.
- C. Immunization Status
 1. Tetanus (Td) - Inmates reporting a history of not receiving a Td vaccine in the past 10 years are to be educated on the purpose of the vaccine and given if no contraindications (documented on DC 386)
 2. Mantoux skin test – Inmate will be given in accordance with current policy (documented on DC 386 and DC 928).
- D. Physical Examination
 1. The provider (physician/physician extender) will complete exam at next scheduled clinic.
 2. Provider will review all documentation relative to inmate's health history prior to physical examination and:
 - a. Make appropriate entries on DC forms concerning abnormalities
 - b. Assign initial health profile
 - c. Indicate activity restrictions
 - d. Complete medical aftercare notifications.
 3. Physical findings will be recorded on DC 386.
 4. Inmates readmitted to prison within 12 months of last physical will have health record reviewed by the provider and updated as needed.
 5. Inmates readmitted to prison within 12 months of last physical and no previous healthcare records are available, will have complete intake examination.

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II. HEALTH PROFILE

The health profile system set forth in this policy is based primarily upon the function of body systems and their relation to jobs, programs, activities, and services in the North Carolina Department of Public Safety/Division of Adult Correction (NCDPSP/HS.) Since the analysis of the individual's medical, physical, mental and dental status plays an important role in assignment and welfare, not only must the activity grading be executed with great care, but clear and accurate documentation of deviations from normal are essential.

Each facility will be evaluated and given a P-U-L-H-E-A-T-D-M-R profile based on the:

1. Available accommodations,
2. Available jobs, programs, activities, and services.

The inmate's health profile and the facility profile should match. Housing assignments are based on these two factors. The basic purpose of the profile is to provide an index to overall functional capacity. Therefore, the functional capacity of a particular organ or system of the body, rather than the defect per se, will be evaluated carefully in determining the numerical designation. This overall functional assessment reflects consideration of physical, dental, and mental health status.

For ease in accomplishing and applying the profile system, these categories have been designated:

P	-	Physical Capability
U	-	Upper Extremities
L	-	Lower Extremities
H	-	Hearing
E	-	Eyes (vision)
A	-	Activity Grade
T	-	Transportation Demand
D	-	Dental
M	-	Mental Health Status
R	-	Retardation

Numerical or alphabetical designations are used to reflect different levels of functional capacity for each category. These are outlined in accompanying attachments.

- A. Guidelines for the utilization of this overall activity grade ("A") are set forth in the Attachments to this section. .
- B. When re-evaluation of an inmate's activity grade is appropriate, changes in the PULHEAT Profile are to be documented on a new DC-386, Report of Physical Examination, and filed in Section III of the outpatient health record. All PULHEAT changes are to be entered on the OPUS MS02 Screen within 24 hours.

III. OVERALL ACTIVITY GRADE ASSIGNMENT

- A. The initial activity ("A") grade assignment will be made at the time of admission processing and should be accomplished based upon the actual results of the inmate's health assessment.
- B. The intent of the overall activity grade ("A") is to:
 1. Insure that the inmate's health needs are met
 2. Insure that inmate is not excluded from work or program privileges unless a bonafide health reason exists
- C. A change in the activity grade ("A") may be made at any time an inmate has an encounter (face to face meeting) with health care personnel and that encounter indicates need for a change.
- D. The change in activity grade ("A") can be made by a physician, physician extender, dentist, psychologist, or licensed clinical social worker.
- E. The deliberate assignment of an inappropriate activity level ("A") is fraudulent, a violation of this policy, and may result in DAC disciplinary action.

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IV. EXPLANATION OF HEALTH PROFILE CATEGORIES

- A. **P** - Physical capacity or stamina: This factor relates to general physical function. It is impacted by medical, dental, and mental health conditions which do not fall under other specific factors of the system. In arriving at the profile under this factor, it may be appropriate to consider strength, endurance, height-weight-body build relationship, agility, energy, and muscular coordination
- B. **U** - Upper extremities: This factor relates to the hands, arms, shoulder girdle, and upper back (cervical, thoracic and upper lumbar) in regard to strength, range of motion, and general efficiency.
- C. **L** - Lower extremities: This spine factor relates to the feet, legs, pelvic girdle, lower back musculature, and lower back (lower lumbar and sacral spine) in regard to strength, range of motion, and general efficiency.
- D. **H** - Hearing and ears: This factor relates to auditory acuity, diseases, and defects of the ear.
- E. **E** - Eyes: This factor relates to visual acuity, diseases, and defects of the eye.
- F. **A** – Activity grade: This overall factor relates to institutional assignment and limitations affecting an inmate's ability to participate in jobs, programs, activities, and services.
- G. **T** - Transportation: This factor relates to the designation as to whether special transportation requirements exist due to the inmate's health condition.
- H. **D** - Dental: This factor relates to all dental or dental related health issues.
- I. **M** - Mental Health Status: This factor relates to an individual's mental health status and the presence of any sign of mental illness..
- J. **R** - Retardation: This factor relates to the extent of intellectual impairment or adaptive behavior deficit.

See Attachment A Guidelines for Classifying Health Categories and Codes for more details.

V. ASSIGNMENT OF HEALTH GRADES

- A. Numerical designations are assigned after evaluating the individual's functional capability in each category.
- B. See **Attachment A** Guidelines For Classifying Health Categories and Codes along with numerical designations
- C. A profile containing a numerical designation of "5" indicates special conditions as defined, and may or may not limit or restrict work or program assignments.
 - 1. A temporary designation of a pregnant inmate will be shown as "5" in the "P" category.
 - 2. A temporary designation for an inmate in an inpatient Mental Health facility will be shown as "5" in the "M" category.
 - 3. A temporary designation for an inmate who requires special attention while in transit will be shown as "5" in the "T" category.

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VI. PROFILING PREGNANT INMATES

- A. The intent of these provisions is to protect the fetus and the mother while placing the least restrictions on the inmate.
- B. A physical profile (P) for pregnant inmates will be issued as follows:
 - 1. Under physical profile "P", a numerical grade of "5" will be used to indicate pregnancy.
 - 2. On the DC-386, section 6.0, list diagnosis as "pregnancy" and document estimated delivery date as determined by the prenatal care provider.
 - 3. A "P" profile grade of "5" will indicate the following limitations:
 - a. Restrictions for jobs, programs, activities, and services will be defined by the appropriate health care clinician.
 - b. Exemption from all immunizations except influenza and tetanus-diphtheria, unless otherwise ordered by the clinician.
 - c. No assignment to jobs, programs, activities, and services wherein nausea, easy fatigability, or sudden light-headedness might occur
- C. A "P" grade of "5" will be assigned for the duration of the pregnancy and post-partum period. At end of pregnancy, a new "P" grade will be issued reflecting revised physical status.
- D. During the last 3 months of pregnancy, inmate must rest 15 minutes every 4 hours (sitting in a chair with feet up is acceptable) and the program activity week should not exceed 40 hours.
- F. Inmates experiencing a normal pregnancy may continue jobs, programs, activities, and services until delivery.
- G. Pregnant inmates who may be experiencing unusual and complicated problems (e.g., pregnancy - induced hypertension) will be evaluated by the appropriate healthcare clinician to determine if they should be excused from jobs, programs, activities, and services or allowed limited participation.

VII. PERIODIC HEALTH ASSESSMENT

- A. Inmates receive periodic health assessments to insure optimal health status based upon:
 - 1. age
 - 2. known health problems
 - 3. medications
 - 4. preventive health guidelines.
- B. Periodic health assessments will be documented on the DC 386.



3/29/13

Paula Y. Smith, MD, Chief of Health Services

Date

SOR: Deputy Medical Director

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GUIDELINES FOR CLASSIFYING HEALTH CATEGORIES AND CODES

These guidelines are not intended to be substituted for the independent clinical judgment of the health care professional making the decision on a health profile.

Categories, Codes and Factors: *All categories with numerical designation of 2 or above **MUST** have a DC-386B Activity Restriction Sheet completed and an explanation on the determined restriction is to be noted on the HS51 screen.

A. (P) Physical Capacity:

Refer to disease specific guidelines (Attachment C), if none apply use the following as a general guide.

- P – 1 Normal physical stamina: Includes all young and middle age adults who are in good health. It would also include vigorous adults over 65, those well compensated inmates, controlled chronic diseases, those with chronic diseases that do not generally affect stamina, and amputees with fully functional prostheses.
- P – 2 Minimal physical stamina deficit: Inmates with minor disabilities, chronic diseases that are generally under control but at times may require professional intervention, conditions that may require some restriction of work or sports activity
- P – 3 Moderate physical stamina deficit: Inmates with poorly controlled chronic diseases, significant permanent complications, moderately severe disabilities, or poor exercise tolerance. They generally require ready access to medical care
- P – 4 Severe physical stamina deficit: Inmates with poorly controlled chronic diseases, end-stage disease, severe physical disability. These inmates require continuous or frequent medical care and should be housed in a chronic disease facility. They generally can only participate in activities special suited to their limitations. They require medical approval for all transfers.
- P – 5 Pregnant inmates

B. (U) Upper Extremities – *Includes shoulder girdle, neck, and upper back*

- U – 1 No significant disability: This includes inmates with previous history of or ongoing musculoskeletal disorders that are not currently causing any disability and are not significantly exacerbated by activity involving the upper extremities.
- U – 2 Minimal disability: Inmates with musculoskeletal disorders that are causing minor disability and/or may be exacerbated to a minor degree by physical activity involving the upper extremities. This includes conditions such as mild cases of tenosynovitis, carpal tunnel syndrome that is controlled by splinting, and mild forms of arthritis in upper extremities.

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- U – 3 Moderate disability: Inmates with musculoskeletal disorders that are causing moderate disability and/or may be exacerbated to a significant degree by physical activity involving the upper extremities; loss of use of one arm; or cervical radiculopathy with moderate ongoing symptoms.
- U – 4 Severe disability: Inmates with severe restrictions or total loss of the use of both arms, severe forms of cervical radiculopathy, and/or any activity involving the upper extremities causes severe symptoms.
- C. (L) Lower Extremities: *Includes legs as well as pelvis and lower back.*
- L – 1 No significant disability: This includes inmates with previous history of or on going musculoskeletal disorders that are not currently causing any disability and are not significantly exacerbated by activity involving the lower extremities.
- L – 2 Minimal disability: Inmates with musculoskeletal disorders that are causing minor disability and/or may be exacerbated to a minor degree by physical activity involving the lower extremities. Includes inmates with functional prosthesis that are able to ambulate without assistive devices, mild forms of arthritis, mild chronic low back pain, and foot disorders that are minimally symptomatic.
- L – 3 Moderate disability: Inmates with musculoskeletal disorders that are causing moderate disability and/or may be exacerbated to a significant degree by physical activity involving the lower extremities; requires assistive devices (cane, crutches, walker) to ambulate; and/or lumbar radiculopathy/chronic degenerative back pain with moderate ongoing symptoms.
- L – 4 Severe disability: Inmates with severe restrictions or total loss of the use of both legs who are unable to ambulate, severe forms of lumbar radiculopathy/chronic degenerative back pain, and/or any activity involving the lower extremities causes severe symptoms.
- D. (H) Hearing - Ears, hearing auditory and acuity.
- H - 1 No obvious loss of hearing.
- H - 2 Total unilateral hearing loss; other normal or mild bilateral loss (41-55DB).
- H - 3 Total loss of hearing in one ear and moderate loss in the other; moderate bilateral loss with limited functional correction adjustment.
- H - 4 Bilateral loss, severe (71DB or more) loss of hearing; deafness uncorrectable, and/or inability to make functional adjustment.

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- E. (E) Eyes - Eyes, vision, visual acuity.
- E - 1 No less than 20/50 with or without glasses; no gross visual field limitations.
- E - 2 Vision in better eye is between 20/50 and 20/200, may have unilateral blindness.
- E - 3 Better eye correctable to 20/200; 20 or less tunnel vision. May have unilateral blindness.
- E - 4 Less than 20/200 in better eye; total blindness.
- F. (A) Activity Grade (Overall functional grade)
- The inmate's overall ability to function in jobs, programs, activities, and services, taking into account both physical and mental disabilities, is the activity grade. The activity grade should reflect the sum effect of the above ratings (PULHEAT), however the activity grade may be higher or lower than the lowest rating above.
- A - 1 Unrestricted activity; May participate in jobs, programs, activities, and services complying with safety standards for eight (8) or more hours per day. No restrictions on housing are necessary.
- A - 2 Minor restrictions on jobs, programs, activities, and services may be required, with participation limited to six - eight (6 - 8) hours per day. The DC-386B Activity Restriction Sheet must be completed. For example, inmates with L - 3 or 4 ratings that have no other restrictions may be in this level with specific restrictions on ambulation. There may be some minor restrictions on housing and/or requirements for handicap access when L - 3 or 4.
- A - 3 Moderate restrictions on jobs, programs, activities, and services are required, with participation limited to four - six (4 - 6) hours per day. The DC-386B Activity Restriction Sheet must be completed. These inmates may require special housing, 24/7 nursing, and ready access to emergency care. If such housing requirements are indicated, they should be noted in the comment section of the Activity Restriction Sheet. Notify medical prior to any facility transfers or major program changes.
- A - 4 Severe restrictions on jobs, programs, activities, and services are required, with participation limited to two - four (2 - 4) hours per day. The DC-386B Activity Restriction Sheet must be completed. These inmates generally can be involved only in activities specifically tailored to their individual conditions. If their status is expected to last more than 4 weeks they should be housed at a Chronic Disease Facility. Approval of medical staff is required prior to any change in facility jobs, programs, activities and services.
- A - 5 Extremely limited participation in jobs, programs, activities, and services, from no participation to a maximum of less than two (2) hours per day. The DC-386B, Activity Restriction Sheet must be completed. Approval of medical staff is required prior to any change in facility, jobs, programs, activities, and services.

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- G. (T) Transportation
- T-1 No special transportation requirements
- T-5 Special transportation needs exist and/or inmate may require monitoring of medical condition while in transit.
- Monitoring may include medical attention, medication, and assessment.
- H. (D) Dental
- D - 1 Inmates who have no pressing dental requirements and are suited for transfer to any facility. This grade is based upon a visual dental screening with the diagnosis indicating minimal routine maintenance dental treatment and adequate masticatory function.
- D - 2 Inmates who need routine treatment and whose care can be postponed for a period of time. The inmate is suitable for transfer to any facility. This grade will not change if the inmate signs a DC-442, Refusal of Health Care.
- Examples:
1. Incipient caries
 2. Prophylactic treatment
 3. Periodontal Class I conditions
- D - 3 Inmates who need extensive comprehensive dental treatment including, but not limited to: teeth requiring extraction; edentulous in one or both arches without dentures; partially edentulous in one or both arches without partials and with moderate to severely impaired masticatory function, rampant decay, and /or other conditions resulting in chronic pain or discomfort. This dental grade will not change if the inmate signs a DC-442, Refusal of Health Care.
- Examples:
1. Penetration of caries into dentin
 2. Prosthesis
 3. Periodontal Class II or Class III conditions
- D - 4 Inmates who require immediate attention and need extensive comprehensive dental care and/or whose health may be endangered by them leaving the institution; approval by dental staff prior to facility transfer or major jobs, programs, activities, and services change.
- Examples:
1. Traumatic injury - facial fracture
 2. Suspected neoplasm
 3. Acute infection, pain, or cellulitis
 4. Periodontal Class IV conditions

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If, in the opinion of the dentist, the inmate's dental condition affects his/her medical condition, the Facility Health Authority is to be notified.

Normally, the dental grade will have no effect on the inmate's overall activity capability. The only exceptions might occur in Dental Grades 3 and 4, and are solely at the discretion of the dentist. All dental grades may occasionally be temporarily excused from work or other activities, but these occurrences should not affect the inmate's overall activity grade.

I. (M) Mental Health Status

M - 1 No disorder or impairment in adaptive functioning; no limitations on jobs, programs, activities, and services.

M - 2 Relatively mild impairment in functioning; requires periodic treatment and monitoring on outpatient basis. No limitations on jobs, programs, activities, and services

M - 3 Significant mental disorder, though fairly well stabilized with moderate impairment in functioning; needs ongoing treatment and monitoring. Notify mental health staff prior to facility transfer or major change to jobs, programs, activities, and services. Limitations on jobs, programs, activities, and services must be specified by mental health staff.

M - 4 Significant mental disorder manifesting symptoms that require ongoing intervention; significant impairment in adaptive functioning that requires housing in a separate facility along with constant monitoring and treatment; approval by mental health staff prior to facility transfer or major change to jobs, programs, activities, and services.

M - 5 Acutely mentally ill or suicidal, and requires monitoring and treatment around the clock; approval of mental health staff prior to facility transfer or major change to jobs, programs, activities, and services.

J. (R) Retardation

R - 1 Not mentally retarded.

R - 2 Is mentally retarded.

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ATTACHMENT B PAGE 1

CATEGORIES, DESCRIPTION/ASSIGNMENT CRITERIA

These are guidelines for criteria utilized to affect housing and assignment to jobs, programs, activities, and services. However, these guidelines are not to be considered all inclusive, nor as a substitute for the clinical judgment of the health care professional making the determination.

<u>Category Code</u>	<u>Description / Limitation</u>
A - 1	No assignment limitation. May participate in jobs, programs, activities, and services for eight (8) or more hours per day.
A - 2	Minor restrictions on jobs, programs, activities, and services may be required, with participation limited to six – eight (6 – 8) hours per day.
A - 3	Limits assignment to facilities with health care staff available to treat limiting condition. Jobs, programs, activities, and services assignment must consider impact on limiting condition, with participation limited to four – six (4 – 6) hours per day.
A-4	Limits both assignment and participation in jobs, programs, activities, and services due to the advanced nature of health problem. Careful consideration must be given to proximity of acute care healthcare facility. Severe restrictions on jobs, programs, activities, and services are required, with participation limited to two – four (2 – 4) hours per day.
A-5	Extremely limited participation in jobs, programs, activities, and services, from no participation to a maximum of less than two (2) hours per day.

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ATTACHMENT B

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Indicates Special Considerations

- | | |
|------------|--|
| P-5 | Temporary grade assigned to pregnant inmates |
| M-5 | Inmate in an acute inpatient mental health facility |
| T-5 | Inmate requires special attention while in transit |

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ATTACHMENT B
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HEALTH PROFILE CLASSIFICATION OF INMATES

MEANING OF NUMERICAL GRADES

		1	2	3	4
Physical Capability (P)	Systemic disease:	none	minimal	moderate	severe
Upper Extremities (U)	Bone, joint, muscle:	normal	defects	defects	defects
	Functional adjustment:	normal	good	limited	disabled
Lower Extremities (L)	Bone, joint, muscle:	normal	defects	defects	defects
	Functional adjustment:	normal	good	limited	disabled
Hearing (H)	Loss in one ear	normal	mild	moderate	deaf
	Loss in both ears	normal	deaf	deaf	deaf
Eyes (Vision)	Corrected	>20/50	>20/70	>20/200	<20/200
Activity Grade (A)	Work/Activity restrictions:	none	minor	reasonable	strict
Transportation Demand (T)		no specific needs	-----	-----	special needs or monitoring
Dental (D)	Amount of dental decay:	minimal	moderate	rampant	
	Number of teeth to be extracted:	none	up to 3	4 or more	cellulitis cancers
Mental Health (M)	Mental Illness:	none	mild	moderate	
	Functional Ability:	normal	good	limited	severe poor
Retardation (R)	Mental Retardation:	none	mentally		
	Functional Ability:	normal	retarded		

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ATTACHMENT C PAGE 1

DISEASE SPECIFIC GUIDELINES

These are guidelines for criteria utilized to affect housing and assignment to jobs, programs, activities, and services for inmates with these disease states. However, these guidelines are not to be considered all inclusive nor as a substitute for the clinical judgment of the health care professional making the determination.

Note: an activity Restriction Sheet (DC 386B) detailing specifics restrictions must be completed and filed in the medical Record. These restrictions are also recorded in the HS51 screen in OPUS.

1. ASTHMA

I. (P) Physical Capacity

- P – 1 Inmates with history of asthma who are not currently on medications and have not had a hospitalization admission or emergency room (ER) visit in the past 2 years; and/or who have mild to moderate wheezing once or twice a year with an upper respiratory infection
- P – 2 Inmates with Mild Intermittent Asthma or Mild Persistent Asthma.
- P – 3 Inmates with Moderate Persistent Asthma.
- P – 4 Inmates with Severe Persistent Asthma.

II. (A) Activity Grade - If there are no other PULHEAT restrictions, the following activity grades would apply for inmates with Asthma.

- A – 1 Inmates with P – 1 These inmates no bunk restrictions. These inmates participate in jobs, programs, activities, and services for eight (8) or more hours per day.
- A – 2 Inmates with P – 2 who have not had any hospitalizations or ER visits in the past 6 months. These inmates should be restricted from jobs, programs, activities, and services which are known to aggravate their asthma. If they have exercised induced bronchospasm, which cannot be controlled by medications, they should be restricted from jobs, programs, activities, and services that will likely induce bronchospasm. No bunk restrictions apply. May participate in appropriate jobs, programs, activities, and services for six – eight (6 – 8) hours per day.
- A – 3 Inmates with P – 2 and P – 3 who have had a hospitalization or ER visit in the past 6 months. All the above restrictions apply, plus they should avoid hot (>80 F), humid, or dusty environments and exposure to smoke or strong fumes when possible. Nursing should be available 24/7 with onsite nebulizers. No bunk restrictions are needed. Participation in jobs, programs, activities, and services is limited to four – six (4 – 6) hours per day.
- A – 4 Inmates with P – 4, who do not require supplemental oxygen –All the above restrictions, including lower bunk. These inmates are to be housed at chronic care facilities. Jobs, programs, activities, and services should be limited to two – four (2 – 4) hours per day, and designed for inmates with severe respiratory impairments. If their asthma becomes better controlled and they meet the criteria for P – 3 for at least 3 months, they may be upgraded to A – 3.
- A – 5 Inmates with P – 4 who require supplemental oxygen, These inmates are to be housed in a chronic disease facility, and only participate in jobs, programs, activities, and services which are limited to a maximum of less than two (2) hours per day, and specifically designed for patients requiring supplemental oxygen. Patients whose asthma control improves and they go at least 2 months without oxygen may be upgraded to A – 4.

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2. CARDIOVASCULAR DISEASE/HYPERTENSION

- I. P – 1 Inmates with hypertension who are controlled with or without medications and who do not have any symptoms or signs of active coronary artery disease or side effects from medications; and/or inmates with a history of myocardial infarction more than 5 years ago who do not have any symptoms or signs of active coronary artery disease.
- P – 2 Inmates with hypertension which is moderately high (BP ranges 140 – 159 / 90 – 99); these inmates may have significant side effects from their medications, stable angina that is well controlled (having no pain) either with medications or surgical intervention, well compensated CHF; and/or had a myocardial infarction less than 5 years ago.
- P – 3 Inmates with hypertension which is poorly controlled (greater than or equal to 160/100); these inmates may have unstable angina or CHF, shortness of breath with moderate exertion; and/or had a myocardial infarction, bypass surgery, or stent placement in the past 6 months to a year.
- P – 4 Inmates with hypertension which is severely out of control; these inmates may have unstable angina or CHF, shortness of breath at rest or with minimal activity; and/or had a myocardial infarction, bypass surgery, or stent placement within past 60 days.
- II. (A) Activity Grade - If there are no other PULHEAT restrictions, the following activity grades would generally apply for inmates with cardiovascular disease/hypertension.
- A – 1 Inmates with P – 1. No bunk restrictions. These inmates May participate in jobs, programs, activities, and services for eight (8) or more hours per day.
- A – 2 Inmates with P – 2. These inmates should not be assigned jobs, programs, activities, and services that require high levels of exertion, and may participate for six – eight (6 – 8) hours per day. They should be housed at units where they have ready access to medical follow up within 48 hours, but do not require 24/7 nursing. No bunk restrictions are needed.
- A – 3 Inmates with P – 3. These inmates should be housed at units with 24/7 nursing and have easy access to emergency services. They should be restricted to jobs, programs, activities, and services that do not aggravate their symptoms, with participation limited to four – six (4 – 6) hours per day. No bunk restrictions.
- A – 4 Inmates with P – 3 and more severe or frequent symptoms. These inmates should be housed at chronic care facilities until their symptoms are better controlled. Participation in jobs, programs, activities, and services is limited to two – four (2 – 4) hours per day, and should not involve any physical exertion except as a part of a medically ordered rehabilitation program. Bottom bunk restriction should be enforced.
- A – 5 Inmates with P – 4. These inmates should be housed at either chronic disease facilities or in an acute care facility if unstable. Jobs, programs, activities, and services are limited to a maximum of less than two (2) hours per day, and should be a part of a medically ordered rehabilitation program. Bottom bunk restriction should e enforced.

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3. COPD

I. (P) Physical Capacity

P – 1 Inmates with COPD who have an FEV 1 >75% of predicted.

P – 2 Inmates with Stage I COPD (FEV 1 = 50 - 75% of predicted).

P – 3 Inmates with Stage II COPD (FEV 1 = 35 – 49 % of predicted).

P – 4 Inmates with Stage III COPD (FEV1 < 35% of predicted).

II. (A) Activity Grade - If there are no other PULHEAT restrictions, the following activity grades would apply for inmates with COPD.

A – 1 All inmates with P – 1. these inmates no bunk restrictions. May participate in jobs, programs, activities, and services for eight (8) or more hours per day.

A – 2 Inmates with P – 2 who have had no hospitalizations or ER visits in the past 6 months. These inmates should be restricted from jobs, programs, activities, and services which are known to aggravate their COPD. If they have exercised induced bronchospasm, which is difficult to control with medications, they should be restricted from jobs, programs, activities, and services that will likely induce their bronchospasm. Participation in appropriate jobs, programs, activities, and services is permitted six – eight (6 – 8) hours per day. No bunk restrictions are needed.

A – 3 Inmates with P – 3 and P – 2 that have had a hospitalization or ER visit in the past 6 months. All the above restrictions apply, plus they should avoid hot (>80 F), humid, or dusty environments, and exposure to smoke or strong fumes when possible. If available, they should be housed at units that have 24/7 nursing and ready access to emergency care. Participation in jobs, programs, activities, and services is limited to four – six (4 – 6) hours per day.

A – 4 Inmates with P – 4, who do not require supplemental oxygen. All the above restrictions, including lower bunk. These inmates are to be housed at chronic care facilities. Jobs, programs, activities, and services should be limited to two – four (2 – 4) hours per day, and should be specifically designed for inmates with severe respiratory impairments. If their asthma becomes more controllable and they meet the criteria for P – 3 for at least 3 months they may be upgraded to A – 3.

A – 5 Inmates with P – 4 who require supplemental oxygen. These inmates are to be housed in a chronic disease facility, and only participate in jobs, programs, activities, and services which are limited to a maximum of less than two (2) hours per day, and specifically designed for patients requiring supplemental oxygen. Patients whose control improves and who can go at least 2 months without oxygen may be upgraded to A – 4. Bottom bunk restrictions should be enforced.

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4. MUSCULOSKELETAL

I. (P) Physical Capacity

- P – 1 Inmates with mild or intermittent osteoarthritis which requires only PRN analgesics, well controlled inflammatory arthritis without significant deformities, minimal or well controlled carpal tunnel syndrome or similar mononeuropathies, minimal or past history of tenosynovitis/bursitis, or those who have fully functional prosthesis.
- P – 2 Inmates with mildly symptomatic osteoarthritis which requires frequent or continuous medication; well-controlled inflammatory arthritis with minor disabilities; mildly symptomatic carpal tunnel or similar mononeuropathies, or tenosynovitis/bursitis; or who have prosthesis which minimally interfere with full function.
- P – 3 Inmates with moderately symptomatic osteoarthritis or inflammatory arthritis where physical activity significantly worsens symptoms or where there are deformities that moderately interfere with physical activity; moderately symptomatic carpal tunnel or similar mononeuropathies, and/or tenosynovitis/bursitis in which normal activity significantly worsens the condition or those who have had an amputation without a prosthesis or who possess a poorly functional prosthesis, or require assistance devices to ambulate.
- P – 4 Inmates with severe forms of any musculoskeletal disorder, wherein almost any physical activity severely worsens the symptoms, or there is disability that precludes almost all-physical activity.

II. (A) Activity Grade

- A – 1 All inmates with P – 1. These inmates no bunk restrictions. These inmates may participate in jobs, programs, activities, and services for eight (8) or more hours per day.
- A – 2 Inmates with P – 2. These inmates may participate in jobs, programs, activities, and services for six – eight (6 – 8) hours per day No bunk restrictions are needed.
- A – 3 Inmates with P – 3. Who are capable of physically non-strenuous jobs, programs, activities, and services limited to four – six (4 – 6) hours per day. These inmates should be housed at units that are capable of accommodating their health care needs.
- A – 4 Inmates with P – 3. Who are only capable of two – four (2 – 4) hours per day of physically non-strenuous jobs, programs, activities, and services. These inmates should be housed at units that are capable of accommodating their health care needs.
- A – 5 Inmates with P – 4. These inmates are to be housed in a chronic disease facility and only participate in jobs, programs, activities, and services specifically designed for patients with severe limitations, and limited to a maximum of less than two (2) hours per day. Bottom bunk restriction should be enforced.

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6. SEIZURES

I. (P) Physical Capacity

- P – 1 Inmates with history of seizures who are not currently on medications; inmates currently stable on medications and have had no seizures or changes in therapy in the past 12 months.
- P – 2 Inmates with a history of seizures who are not currently on medications and have not had a seizure in the past 6 months; or currently on medication with no seizures or changes in therapy in the past 6 months.
- P – 3 Inmates who have had a seizure or a significant change in therapy in the past 6 months, but are not known to be uncontrollable.
- P – 4 Inmates whose seizures cannot be controlled, either due to noncompliance or the severity of their disease, and are at risk to have ongoing seizure activity.

II. (A) Activity Grade

- A – 1 All inmates with P – 1. These inmates have no bunk restrictions. These inmates may participate in jobs, programs, activities, and services for eight (8) or more hours per day.
- A – 2 Inmates with P – 2. These inmates should be restricted from, jobs, programs, activities, and services wherein they might endanger themselves or others if they were to have a seizure; examples: work involving driving, unprotected heights or ladders, dangerous machinery. Participation is limited to six – eight (6 – 8) hours per day. After these inmates have gone 12 months without a seizure, they should be upgraded to P – 1. No bunk restrictions are needed.
- A – 3 Inmates with P – 3. These inmate have all the above restrictions for jobs, programs, activities, and services, limited to four – six (4 – 6) hours per day. After these inmates go at least 6 months without a seizure or major change in therapy they should be upgraded to P – 2 and taken off lower bunk restriction. Bottom bunk restriction should be enforced.
- A – 4 Inmates with P – 4, who have seizures once a month or less often. All the above restrictions including lower bunk apply. These inmates should be housed at facilities with 24/7 nursing coverage. Inmates are limited to two – four (2 – 4) hours per day of jobs, programs, activities, and services where the risk of injury from a seizure would be minimal, and they are observed constantly while participating. If their seizures become controllable and they go at least 6 months without a seizure, they may be upgraded to P – 3.
- A – 5 Inmates with P – 4 who have seizures more then once a month. These inmates are to be housed in a chronic disease facility, and only participate less than two (2) hours per day in jobs, programs, activities, and services specifically designed for patients with frequent seizures. Patients whose seizure control improves and they go at least 2 months without a seizure may be upgraded to A – 4. Bottom Bunk restriction should be enforced.

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7. SKIN DISORDERS

I. (P) Physical Capacity

- P – 1 Inmates with benign skin conditions (examples: acne, eczema, atopic dermatitis, psoriasis) which cause no significant disability.
- P – 2 Inmates with the above where there is minimal disability and/or minor jobs, programs, activities, and services restrictions are needed to prevent aggravation of the skin disorder. (Example: mild discoid lupus, psoriasis.)
- P – 3 Inmates with serious health or life threatening skin disorders which cause significant disability. (Example: severe discoid lupus, severe active dyshyrotic eczema.). Restrictions to jobs, programs, activities, and services are required to prevent aggravation of the skin disorder.
- P – 4 Inmates with any of the above and are severely disabled by their skin condition, and/or they are severely limited in their ability to participant in jobs, programs, activities, and services due to their skin disorder.

II. (A) Activity Grade

- A – 1 All inmates with P – 1. These inmates have no bunk restrictions. These inmates may participate in jobs, programs, activities, and services for eight (8) or more hours per day.
- A – 2 Inmates with P – 2. These inmates should be capable of participating in six – eight (6 – 8) hours per day of jobs, programs, activities, and services. Jobs, programs, activities, and services assignment must consider aggravating skin factors, such as sun exposure. No bunk restrictions.
- A – 3 Inmates with P – 3 who are capable of participating in four – six (4 – 6) hours per day of jobs, programs, activities, and services. There must be a DC-386B Activity Restriction Sheet completed detailing each inmate's specific restrictions. These inmates should be housed at units that are capable of accommodating their disabilities. Jobs, programs, activities, and services assignment must consider aggravating skin factors, such as sun exposure. Base on clinical presentation, inmate may require lower bunk.
- A – 4 Inmates with P – 3 who are only capable of participating in two – four (2 – 4) hours per day of jobs, programs, activities, and services. These inmates should be housed at units that are capable of accommodating their disabilities. Jobs, programs, activities, and services assignment must consider aggravating skin factors, such as sun exposure. Based on clinical presentation, bottom bunk maybe required.
- . A – 5 Inmates with P – 4. These inmates are to be housed in a chronic disease facility and only participate in jobs, programs, activities, and services specifically designed for patients with disabilities for a maximum of less than two (2) hours per day. Bottom bunk restriction should be enforced.