MONTANA STATE PRISON
OPERATIONAL PROCEDURE

Procedure:	**MSP HS B-03.0 CLINICAL PREVENTIVE SERVICES**
Effective Date:	10/01/2020 Page 1 of 2
Revision Date(s):	06/30/2026
Public Safety Chief Signature:	/s/ John Schaffer, Public Safety Chief
Medical Director Signature:	/s/ Dr. Paul Rees, MD
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I. PURPOSE

Ensure inmates are provided with clinical preventive services as medically indicated.

II. DEFINITIONS (see Glossary)

III. REQUIREMENTS

A. General Requirements

1. The responsible physician determines the medical necessity and timing of screenings and other preventive services.
   a. The responsible physician determines the medical necessity and timing of screening for communicable diseases (for example, HIV, syphilis, gonorrhea, chlamydia), to include laboratory confirmation, treatment, and follow up as clinically indicated.
2. The responsible physician determines the frequency and content of periodic health assessments.
3. The dentist determines the frequency and content of periodic dental evaluations.
4. Immunizations are administered to patients as clinically indicated, referring to *MSP HS B-02.0 Infection Disease Prevention and Control Program*.

B. Screening Recommendations

1. Inmates aged 50 and older: yearly
   a. Hemoccult test: fecal occult blood testing
   b. Prostate cancer screening will occur per ACS, CDC, and USPSTF guidelines
   c. Complete vital signs
   d. Risk factor assessment for sexually transmitted infections, annually (for example, HIV, syphilis, Hepatitis C results)
   e. Offer a Hepatitis C test (HCV ATB) to anyone without documented Hepatitis C results
   f. Lipid profile
   g. Fasting glucose
   h. Calculated BMI
   i. Lung cancer screening with Low Dose Computed Tomography (LDCT) for adults ages 50-80 years who have a 20 pack per year smoking history and currently smoke or have quit within the past 15 years

2. Inmates ages 40-49 years – every 2 years
   a. Complete vital signs
   b. Risk factor assessment for sexually transmitted infections, with appropriate testing if indicated (for example, HIV, syphilis, hepatitis)
   c. Screening education for prostate cancer per ACS and CDC guidelines
   d. Lipid profile
   e. Fasting glucose
   f. Calculated BMI

3. Inmates ages 18-39 years
   a. Booking or intake physical exam
   b. Follow up as determined by the responsible position
   c. As needed based on inmate Health Care Request (HCR)

4. All offenders will have access to routine eye examinations every 2 years.
   a. Annual eye examinations may be ordered for those with medical conditions (for example, diabetic retinopathy, glaucoma, cataracts, or macular degeneration) or as determined by the optometrist.

5. Periodic dental evaluations will be completed in accordance with *MSP HS E-06.1* through *E-06.6*.

6. All examination findings and information obtained from patients during routine health examinations shall be documented in the patient's electronic health record (EHR).

7. Physical exams may also be completed during the booking process physical exam medical provider visit, the current year routine chronic care visit, or routine provider appointments, as long as the above physical examination elements are completed and documented within the encounter progress note.

IV. CLOSING

Questions about this procedure should be directed to the Medical Health Services Manager.