


Approved by:	Review/Revision Date:
 _____ Norma Tomlinson, RN, MSN, NE-BC Associate Vice President, Associate Executive Director	<u>3/24/09</u> Date
<i>Review/Revision Completed By:</i> <i>Ambulatory Services</i>	Next Review Date: 3/1/2012
Policies Superseded by This Policy:	

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.