

EXHIBIT E: Approval and Verification:

POLICIES AND PROCEDURES

Policy Title/ Number(s):

Add description of policies or standard (practice) change and/or improvement

Reviewed Date(s) Reviewed _____

New Policy Date(s) Approved _____

Revised (see attached policy with changes) Date Revised _____

Evidence Based Practice change (see attached evidence) Date Revised _____

- ◆ A separate form needs to be completed for each policy that has changes.
- ◆ One form can be used for multiple policy reviews with no changes.

Signature: _____ Date: _____

(Authorized Policy Personnel)