

EXHIBIT E: Approval and Verification:

**POLICIES AND PROCEDURES**

Policy Title/ Number(s):

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_
- 9. \_\_\_\_\_
- 10. \_\_\_\_\_

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

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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)