

For Official Use Only
Law Enforcement Sensitive

010-04-010259-80229

0074-04

PRISONER IN-PROCESSING MEDICAL SCREEN

NAME: (b)(6)-4 COMPOUND:
DATE: 15 June 04 DOB: 7985
HISTORY BY TRANSLATOR: YES NO
NAME OF TRANSLATOR: A1

ISN: (b)(6)-4
AGE: 19

1) DO YOU HAVE ANY NEW MEDICAL PROBLEMS OR INJURIES NOW?
rash - itching

2) HAVE YOU HAD TUBERCULOSIS? IF YES, WHEN AND HOW WERE YOU TREATED?

A) HAVE YOU HAD A COUGH FOR MORE THAN 2 WEEKS? YES NO
B) HAVE YOU BEEN COUGHING UP BLOOD? YES NO
C) HAVE YOU BEEN LOSING A LOT OF WEIGHT? YES NO

3) CHRONIC MEDICAL PROBLEMS (DIABETES, HYPERTENSION, HEART DISEASE):
none

4) MEDICATIONS: none

5) ARE YOU ABLE TO WALK UNASSISTED? YES NO
6) ARE YOU ABLE TO FEED YOURSELF? YES NO
7) ALLERGIES TO MEDICATIONS? none

8) PULSE: 127 BLOOD PRESSURE: 154/114 RESPIRATORY RATE: 16

WEIGHT: 153 HEIGHT: 5'8" 132/90 manual

9) HAVE YOU BEEN MISTREATED SINCE BEING IN US CUSTODY? YES NO
If Yes Explain:

At reports he was struck in the chest and mouth by coalition forces
He reports this occurred in a badly at Alotitiz on 3 Jan 04.
He is without any bruises or scars.

↳ will refer to CIA

SIGNATURE: (b)(6)-1

A YES TO QUESTIONS 1-4 REQUIRES REFERRAL TO MD OR PA, UNLESS MINOR PROBLEM
FOR QUESTION 1. A NO TO QUESTION 5 OR 6 ALSO REQUIRES MD/PA EVALUATION. A YES
TO QUESTION 9 REQUIRES IMMEDIATE MD/PA NOTIFICATION.

MD/PA FOLLOW UP NOTE

ASSESSMENT:
RECOMMENDATION:
SIGNATURE:

DATE: 15 JUN 04

BT PA-C

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