

**POST-DEPLOYMENT HEALTH
PEER REVIEW AND AUDIT FORM**

For use by MTF personnel for peer review and audit purposes in order to monitor Post-Deployment Guideline Implementation at the MTF and clinic level.

Policy for this clinic regarding use of DD 2488, The Form is:

- Optional
- Used on every deployment-related visit
- Used on every deployment-related visit following the initial visit
- Used only for complex deployment-related cases

Yes	No	N/A	<i>Please check appropriate box for each question based on chart documentation</i>
For all Charts:			
			PD-CPG stamp, overprint, or preprinted SF600 was used for PD screening and documentation
			Screening question regarding deployment-related health concern was marked
			Deployment-related concern was recorded at the time of screening
For all Charts marked "yes" or "maybe" for deployment-related concern(s):			
			DD 2488 was inserted into the chart IAW clinic policy
			DD 2488 was completed by patient
			DD 2488 was completed by provider
			Deployment-related concern was addressed by provider
			Diagnosis was appropriate for deployment-related visit history <input type="checkbox"/> Asymptomatic Concerned <input type="checkbox"/> Deployment-related specific symptom or diagnosis <input type="checkbox"/> Medically Unexplained Physical Symptoms (MUPS) used after several visits revealed no other definitive diagnosis
			Clinical risk communication procedures were noted <input type="checkbox"/> Validation of patient's decision to seek care <input type="checkbox"/> Patient education/information regarding deployment-related concern
			Treatment options and referral sources were discussed
			Patient's collaboration and agreement/response with treatment plan was noted
			Follow-up appointment was considered and recommended
			Deployment-related concern was added to problem list

Notes:

Reviewed by: _____ Date of Review: _____