

**REQUEST FOR RECORDS DISPOSITION AUTHORITY**  
(See Instructions on reverse)

TO: NATIONAL ARCHIVES and RECORDS ADMINISTRATION (NIR)  
WASHINGTON, DC 20408

1. FROM (Agency or establishment)  
FEDERAL BUREAU OF PRISONS

2. MAJOR SUBDIVISION  
REGIONAL OFFICES

3. MINOR SUBDIVISION  
(SEE ATTACHED)

4. NAME OF PERSON WITH WHOM TO CONFER  
OMAR HERRAN

5. TELEPHONE  
(202) 514 - 2254

LEAVE BLANK (NARA use only)

JOB NUMBER  
N1-129-07-11

DATE RECEIVED  
3/26/07

NOTIFICATION TO AGENCY

In accordance with the provisions of 44 U.S.C. 3303a the disposition request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10.

DATE  
3/27/07

ARCHIVIST OF THE UNITED STATES  
*Allen W...*

6. AGENCY CERTIFICATION  
I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal on the attached \_\_\_\_\_ page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies,

is not required;       is attached; or       has been requested.

DATE  
3/14/07

SIGNATURE OF AGENCY REPRESENTATIVE  
*Omar Herran*

TITLE  
CHIEF, INFORMATION MANAGEMENT OFFICE

7. ITEM NO.	8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARA USE ONLY)
	(SEE ATTACHED)		

*SA 8/29/07 Copies Sent to Agency, NWMW, NR*

Authority:	Existing Regulations:	Approved:
Major Sub. Regional Office	Physical Media: Paper	Dated:
Minor Sub:	System Location: N/A	
Item Name: <b>Regional Health Services Administrator</b>		

1. **Regional Health Services Administrator (RO-HSA), Inmate Health Correspondence Files** - inmate health correspondence complaints redirected to the Warden and requiring the Warden's response, and copies of the final response to the RO-HSA. This collection may be maintained in paper or electronic PDF/word processing format.

Disposition: Temporary. Destroy/Delete record 5 years after closure of issue or when no longer needed for reference purposes, whichever is later.

2. **Regional Health Services Administrator (RO-HSA), Medical Equipment Surveys** - reviews of medical equipment such as radiation machines (x-ray and dental), to ensure proper operation and safety. This collection may be maintained in paper or electronic PDF/word processing format.

Disposition: Temporary. Destroy/delete when 3 years old or when no longer needed for reference purposes, whichever is later.

3. **Regional Health Services Administrator (RO-HSA), BP-811 and Related Documents** - staffing reports identifying health services personnel positions throughout the Region. Each institution creates reports for the Regional Office; the RO-HSA creates a summary for the Regional Director. This collection may be maintained in paper or electronic PDF/word processing format.

Disposition: Temporary. Destroy/delete when 3 years old.

4. **Regional Health Services Administrator (RO-HSA), Infectious Diseases Files** - institution reports of communicable diseases and followups for quarantines and steps taken by the local site to contain and eradicate the diseases.

Disposition: Temporary. Destroy/delete when 3 years old or when no longer needed for reference purposes, whichever is later.

5. **Regional Health Services Administrator (RO-HSA), Medical Institution Supplement**

**Reference Files** - Regional reviews of institution supplements, checklists of missing items, memos of communication with the institution, and RO-HSA approval of institution supplement completeness, among related correspondence. This collection may be maintained in paper or electronic PDF/word processing format.

Disposition: Temporary. Destroy/delete 3 years after Institution Supplement is superseded, cancelled, or no longer needed for reference purposes, whichever is later.