

REQUEST FOR RECORDS DISPOSITION AUTHORITY (See Instructions on reverse)		LEAVE BLANK (NARA use only)	
TO NATIONAL ARCHIVES and RECORDS ADMINISTRATION (NIR) WASHINGTON, DC 20408		JOB NUMBER <i>N1-129-00.9</i>	
1. FROM (Agency or establishment) FEDERAL BUREAU OF PRISONS		DATE RECEIVED <i>1-20-00</i>	
2. MAJOR SUBDIVISION FEDERAL CORRECTIONAL FACILITIES		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request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10	
3. MINOR SUBDIVISION (SEE ATTACHED)			
4. NAME OF PERSON WITH WHOM TO CONFER  OMAR HERRAN	5. TELEPHONE  (202) 514 - 2254	DATE <i>1-6-00</i>	ARCHIVIST OF THE UNITED STATES <i>[Signature]</i>
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, <input checked="" type="checkbox"/> is not required; <input type="checkbox"/> is attached; or <input type="checkbox"/> has been requested.			
DATE <i>01-11-2000</i>	SIGNATURE OF AGENCY REPRESENTATIVE <i>[Signature]</i>	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 GRS OR SUPERSEDED JOB CITATION	10.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)		

115-109  
*Agency*

NSN 7540-00-634-4064  
 PREVIOUS EDITION NOT USABLE

STANDARD FORM 115 (REV. 3-91)  
 Prescribed by NARA  
 36 CFR 1228

**Federal Bureau of Prisons: Record Group 129**

**Federal Correctional Facilities: (Federal Prison Camps, Correctional Institutions, Detention Centers & Penitentiaries)**

HEALTH SERVICES RECORDS

**1. BLOOD-BORNE PATHOGEN EXPOSURE DOCUMENTATION**

Documentation related to staff's exposure to blood-borne pathogen. OSHA requires that all such incidents of staff exposure be documented.

**Cut off:** Annually (Calendar year). FRC Transfer approved (in 5-year block)

**Disposition:** *Temporary. Destroy 30 years after retirement or separation (OSHA-specified retention period)*

**2. CONTINUING MEDICAL EDUCATION**

Documentation maintained to meet both JCAHO and Program Review requirements. Information includes personal data on staff members, number of hours and types of training taken per quarter.

**Cut off:** Annually (Calendar year).

**Disposition:** *Temporary. Destroy when 3 years old or 1 year after a program review, whichever is sooner.*

**3. EXTERNAL HEALTH CARE**

Documentation maintained to track costs for medical care provided outside the facility. Record categories include basic information on inmates and providers, diagnoses, and comparative cost information.

**Cut off:** Annually (Calendar year).

**Disposition:** *Temporary. Destroy when 3 years old*

**4. OUTSIDE CONSULTANTS**

Documentation maintained to track costs for medical consultations. Record categories include inmate name and register number, referring and consulting physicians, and dates.

**Cut off:** Annually (Calendar year).

**Disposition:** *Temporary. Destroy when 3 years old.*

**5. ELECTRONIC MAIL AND WORD PROCESSING RECORDS**

**Disposition:** *Temporary. Delete after the record-keeping copy has been produced.*