



Duham County
Criminal Justice Resource Center
Adult Drug Treatment Court

State of North Carolina
General Court of Justice
14th Judicial District

Discharge Summary

Referral No _____
Discharge Date _____
Admission Date _____

1. Reason for Discharge

- Exit by reason other than successful completion
- Successful completion of program, i.e. graduation (CIMS - Completed Program)

2. Rewards for successful completion

- None
- Charges Dismissed
- Reduction of time on probation
- Termination of Probation
- Probation supervision status transferred e.g. from supervised to unsupervised
- Other _____

3. Reasons for exit by reason other than successful completion:

(Rank the top 3 reasons for exit, 1 = most important, 3 = least important)

- 1. DTC non-compliance (other than positive urine tests) (CIMS - Removed by Program Staff)
 - a. Failure to attend treatment as required
 - b. Failure to attend court as required
 - c. Failure to maintain required contacts with case manager
 - d. Failure to maintain required contacts with probation officer
 - e. Failure to meet other requirements of the program
 - f. Other _____
- 2. New arrest - drug/alcohol crime - (specify dates, charges, docket #s) (CIMS - PV: New Charge) _____
- 3. New arrest - non-drug/alcohol crime - (specify dates, charges, docket #s) (CIMS - PV: New Charge) _____
- 4. New conviction - drug/alcohol crime - (specify dates, charges, docket #s) (CIMS - Other; type reason in Closing Comments) _____
- 5. New conviction - non-drug/alcohol crime - (specify dates, charges, docket #s) (CIMS - Other; type reason in Closing Comments) _____
- 6. Positive drug/alcohol tests (CIMS - Removed by Program Staff)
- 7. Technical probation violation (not related to DTC participation) (CIMS - PV: Technical)
- 8. Voluntary withdrawal (CIMS - Voluntary Withdrawal)
- 9. Neutral discharge - (specify reason) (CIMS - Other; type reason in Closing Comments) _____
- 10. Transferred to another DTC program - (specify program) (CIMS - Transferred) _____
- 11. Deceased (CIMS - Other; type reason in Closing Comments)
- 12. Other - (specify) (CIMS - Other; type reason in Closing Comments) _____

4. Employed? Yes No Unknown Full-time Part-time
5. In school (formal education)? Yes No Unknown
6. In vocational training? Yes No Unknown

Comments

Pregnancy Information

- Not Applicable
- No
- Yes

Expected Due Date _____
Delivery Date _____
Pregnancy Result _____

How To Create A Hospital Discharge Notice Form

J Rink



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Manual for the Medical Department of the United States Navy United States. Navy. Medical Department,1917
Handbook of the Hospital Corps, United States Navy United States. Navy Department. Bureau of Medicine and Surgery,1923 The Municipal Year Book and Public Utilities Directory Sir Robert Donald,1913 **Hospital Corps Quarterly** ,1919 *Modern Hospital* ,1914 **Proceedings of the ... Annual Institute on Hospital Accounting** ,1962
The Hospital Corps Quarterly United States. Navy Department. Bureau of Medicine and Surgery,1917 **Justice of the Peace** ,1848 **Hospitals** ,1947 Includes Hospital news of the month **The Massachusetts register** ,1988-12-23
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