**[INSERT NAME OF PROTOCOL]**

**Connecticut Department of Public Health**

|  |  |
| --- | --- |
| **Position Responsible:** |  |
| **Effective Date:** |  | **Last Reviewed:** |  |
| **Approved** |  | **Date** |  |

**Purpose**

[Example: The purpose of this protocol is to xxxx].

**Elements of the protocol to be implemented throughout the agency: {List actions to take in logical order}**

1. xxxx
2. xxxxx