

SUCH OTHER FACTORS AS SHALL BE CONSIDERED APPROPRIATE.

(C) NO STATE SHALL BE OBLIGED TO RECEIVE ANY PATIENT PURSUANT TO THE PROVISIONS OF PARAGRAPH (B) OF THIS ARTICLE UNLESS THE SENDING STATE HAS GIVEN ADVANCE NOTICE OF ITS INTENTION TO SEND THE PATIENT; FURNISHED ALL AVAILABLE MEDICAL AND OTHER PERTINENT RECORDS CONCERNING THE PATIENT; GIVEN THE QUALIFIED MEDICAL OR OTHER APPROPRIATE CLINICAL AUTHORITIES OF THE RECEIVING STATE AN OPPORTUNITY TO EXAMINE THE PATIENT IF SAID AUTHORITIES SO WISH; AND UNLESS THE RECEIVING STATE SHALL AGREE TO ACCEPT THE PATIENT.

(D) IN THE EVENT THAT THE LAWS OF THE RECEIVING STATE ESTABLISH A SYSTEM OF PRIORITIES FOR THE ADMISSION OF PATIENTS, AN INTERSTATE PATIENT UNDER THIS COMPACT SHALL RECEIVE THE SAME PRIORITY AS A LOCAL PATIENT AND SHALL BE TAKEN IN THE SAME ORDER AND AT THE SAME TIME THAT HE WOULD BE TAKEN IF HE WERE A LOCAL PATIENT.

(E) PURSUANT TO THIS COMPACT, THE DETERMINATION AS TO THE SUITABLE PLACE OF INSTITUTIONALIZATION FOR A PATIENT MAY BE REVIEWED AT ANY TIME ANY SUCH FURTHER TRANSFER OF THE PATIENT MAY BE MADE AS SEEMS LIKELY TO BE IN THE BEST INTEREST OF THE PATIENT.

ARTICLE IV

(A) WHENEVER, PURSUANT TO THE LAWS OF THE STATE IN WHICH A PATIENT IS PHYSICALLY PRESENT, IT SHALL BE DETERMINED THAT THE PATIENT SHOULD RECEIVE AFTER-CARE OR SUPERVISION, SUCH CARE OR SUPERVISION MAY BE PROVIDED IN A RECEIVING STATE. IF THE MEDICAL OR OTHER APPROPRIATE CLINICAL AUTHORITIES HAVING RESPONSIBILITY FOR THE CARE AND TREATMENT OF THE PATIENT IN THE SENDING STATE SHALL HAVE REASON TO BELIEVE THAT AFTER-CARE IN ANOTHER STATE WOULD BE IN THE BEST INTEREST OF THE PATIENT AND WOULD NOT JEOPARDIZE THE PUBLIC SAFETY, THEY SHALL REQUEST THE APPROPRIATE AUTHORITIES IN THE RECEIVING STATE TO INVESTIGATE THE DESIRABILITY OF AFFORDING THE PATIENT SUCH AFTER-CARE IN SAID RECEIVING STATE, AND SUCH INVESTIGATION SHALL BE MADE WITH ALL REASONABLE SPEED. THE REQUEST FOR INVESTIGATION SHALL BE ACCOMPANIED BY COMPLETE INFORMATION CONCERNING THE PATIENT'S INTENDED PLACE OF RESIDENCE AND THE IDENTITY OF THE PERSON IN WHOSE CHARGE IT IS PROPOSED TO PLACE THE PATIENT, THE COMPLETE MEDICAL HISTORY OF THE PATIENT, AND SUCH OTHER DOCUMENTS AS MAY BE PERTINENT.

(B) IF THE MEDICAL OR OTHER APPROPRIATE CLINICAL AUTHORITIES HAVING RESPONSIBILITY FOR THE CARE AND TREATMENT OF THE PATIENT IN THE SENDING STATE AND THE APPROPRIATE AUTHORITIES IN THE RECEIVING STATE FIND THAT THE BEST INTEREST OF THE PATIENT WOULD BE SERVED THEREBY, AND IF THE PUBLIC SAFETY WOULD NOT BE JEOPARDIZED THEREBY, THE PATIENT MAY RECEIVE AFTER-CARE OR SUPERVISION IN THE RECEIVING STATE.