



People You Know.  
Extraordinary Care.

<b>POLICY:</b>	<b>200.32 CONFIDENTIALITY OF MEDICAL RECORDS</b>		
<b>APPROVAL:</b>	VICE PRESIDENT OF PROFESSIONAL SERVICES; MANAGER OF EMS;		
<b>EFFECTIVE DATE: 2/20/2024</b>			<b>ORIGINAL EFFECTIVE DATE: 08/16</b>
<b>DEPARTMENT SPECIFIC</b>		<b>EMERGENCY MEDICAL SERVICES</b>	

**I. Purpose:**

In order to protect the patient's right to privacy, medical records must be kept confidential. Access to these records shall be in accordance with the laws and regulations that govern the right to either examine or copy and release confidential medical information.

**II. Policy:**

- A.** The Morris Hospital Emergency Medical Services (MHEMSS) System Patient Care Report is a medical-legal document, and is considered protected health information. All EMS pre-hospital communication via cell phone, telemetry, and Medical Emergency Radio Communications for Illinois (MERCRI) radio are also considered protected health information. All calls are recorded by each hospital using CAREpoint workstations, and all recordings should be maintained by each for an indefinite period of time. EMS providers are not to record any calls on personal devices at any time.
- B.** Medical records in the MHEMSS shall be confidential and secure. The information contained in an EMS patient care report (PCR) or communication log is privileged from disclosure.
- C.** The EMT, PHRN/ECRN shall exercise discrete clinical judgment in discussing patient over the radio enroute to the hospital.
- D.** In certain incidents, the law may demand the release of information about a patient without the patient's approval. Examples: gunshot wounds, dog bites, certain communicable diseases and child abuse.
  - a.** Alert law enforcement to the death of the individual when there is suspicion that death resulted from criminal conduct.
  - b.** To respond to a request for PHI by a correctional institution or law enforcement official having custody of an inmate for the health and safety of the individual, other inmates, officers, or employees or others at a correctional institution.
- E.** Privacy practices under HIPAA
  - a.** No PHI shall be placed on countertops or left out on desks in public access areas where an unauthorized person could easily read or see the information.
  - b.** Recycling bins containing PHI must not be kept in a public area like a copy room or open office.
  - c.** Documents containing PHI that is no longer needed must be shredded or destroyed in a secure manner.
  - d.** Fax machines that receive or send PHI must be located in a secure area so that other workers and visitors will not have access to the PHI that is being communicated.
  - e.** Faxes and emails containing PHI must include a cover sheet with a confidentiality statement.
  - f.** All personnel who handle PHI must receive privacy training.

**Approval:**

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**James Kirchner**                                    **Date**  
**Vice President of Professional Services**

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**Kathleen Geiger MSN, RN**                    **Date**  
**Manager of EMS & Emergency Management**