

Extraordinary Care.

POLICY:	500.19 PROVIDER RECORD REQUEST		
APPROVAL:	VICE PRESIDENT OF PROFESSIONAL SERVICES; MANAGER OF EMS:		
EFFECTIVE DATE: 2/16/2024			ORIGINAL EFFECTIVE DATE: 08/16
DEPARTMENT SPECIFIC		EMERGENCY MEDICAL SERVICES	

I. PURPOSE:

To provide a mechanism by which personal record information (e.g. educational records/transcripts) can be individually requested and confidentially processed from the Morris Hospital Emergency Medical Services (EMS) office to another EMS System or agency.

II. POLICY:

- **A.** The request for this information will only be honored when requested by the System provider.
- **B.** Complete and sign the System Request for Letter of Good Standing form authorizing release of information on file. Records/transcripts will not be released without this form or a written request authorizing release of information on file. Verbal requests will not be honored.
 - 1. Request for Letter of Good Standing forms can be obtained through the Morris Hospital EMS System office and online at www.mhemss.org.
- **C.** Once the appropriate form is completed and signed, the requested records will be forwarded from the Morris Hospital EMS System office within five business days of the request. Urgent requests for release of information will be considered on an individual basis.
- **D.** Identify agency, contact person, address, e-mail and phone number where requested information is to be sent. Generic letters will not be issued under any circumstances.
- **E.** Records and/or transcripts will be sent via e-mail and/or fax only. Any special mailing needs must be paid by the requester. At no time will records be allowed to be hand carried by the individual provider.
- **F.** Copies of all correspondence will be placed in the requester's file and kept in the Morris Hospital EMS System office for the current licensure/certification period.

Approval:		
James Kirchner	Date	
Vice President of Profession	onal Services	

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