SCOPE:  Departmental  Organizational

POLICY:  Patient Confidentiality & Release of Information Policy

All Proctor Hospital EMS System personnel are exposed to or engaged in the collection, handling, documentation or distribution of patient information. Therefore, all EMS personnel are responsible for the protection of this information.

Unnecessary sharing of confidential information will not be tolerated. Proctor Hospital EMS System personnel must understand that breach of confidentiality is a serious infraction and violation of HIPAA with legal implications. Corrective action will be taken including System suspension or termination.

1. **Written and Electronic Documentation**  
   a) Confidentiality is governed by the “need to know” concept.
   b) Only Proctor Hospital EMS System personnel and hospital medical staff directly involved in a patient’s care or personnel involved in the quality assurance process are allowed access to the patient’s medical records and reports. Authorized medical records and billing personnel are allowed access to the patient’s medical records and reports in accordance with hospital and EMS provider policies.
   c) Requests for release of patient care related information (from third party payers, law enforcement personnel, the coroner, fire department or other agencies) should be directed to the EMS agency’s medical records department.
   d) Written documentation should be secured in a locked drawer or file in the agency station or offices. Only agency staff with a responsibility to review or manage the completed reports should read or review patient care reports for calls that they were not involved in.

2. **Verbal Reports**  
   a) Proctor Hospital EMS System personnel are **not** to discuss specific patients in public areas.
b) EMS providers should not discuss any confidential information regarding patient care with friends and relatives or friends and relatives of the patient, unless specifically authorized to do so by the patient. This includes hospitalization of a patient and/or the patient’s condition.

c) Information gained from chart or case reviews is considered confidential.

3. **Radio Communications**
   a) No patient name will be mentioned in the process of prehospital radio transmissions utilizing MERCI radio.
   b) Customarily, when calling in a “direct admit” the patient’s initials can be included in the radio report. This is necessary for identification and is acceptable to transmit.
   c) Sensitive patient information regarding diagnosis or prognosis should not be discussed during radio transmissions.

4. **Communication at the Scene**
   a) Every effort should be made to maintain the patient’s auditory and visual privacy during treatment at the scene and en route.
   b) EMS personnel should limit bystanders at the scene of an emergency. Law enforcement personnel may be called upon to assist in maintaining bystanders at a reasonable distance.