
Rights, Ethics, and Responsibilities – PHI

RI-PHI-04.03

SUBJECT/TITLE: **DECLARATION OF PATIENT INFORMATION
CONFIDENTIALITY**

PURPOSE: To ensure that all staff are made aware of all aspects of patient confidentiality

DEFINITION: None

POLICY:

All patients treated at The University of Iowa Hospitals and Clinics are provided with a copy of the University of Iowa Health Care Privacy Notice. The preamble to this notice, which directs the behavior of persons working at The University of Iowa Hospitals and Clinics, is particularly applicable to your job:

”As your health care provider, we are legally required to protect the privacy of your health information ...”

The performance of your job may require retrieval of information from patient medical records and/or computer-stored patient information. Under no circumstances should this information be discussed with anyone unless this disclosure is required in the performance of your duties and responsibilities. Once confidential patient information has been retrieved in the performance of your duties, it then becomes your responsibility to properly “dispose” of the document by distributing to appropriate people, filing securely, or otherwise destroying the document.

Hospital policy prohibits retrieval of medical records or computer-stored information that is not required for the performance of your job.

The confidentiality of information about patients that you obtain in the course of employment is protected by state and federal law. **State and federal law prohibits you from making any disclosure of the information unless you are specifically authorized to do so under the policies of your department.** Any staff member who becomes aware of a breach of confidentiality is required to inform the Joint Office for Compliance (JOC). Reports may be made directly to the JOC (4-8282) or confidentially and/or anonymously through the Helpline (4-8190).

I declare that I have read and understood the above aspects of patient confidentiality. Furthermore, I understand that violation of the confidentiality of patient information is reason for

disciplinary action including possible dismissal from my job and liability to civil and criminal penalties.

Signature _____ Date _____

This document will be placed in your personnel file. Staff members are required to sign this statement on an annual basis.

Date created: December 7, 1988

Source: University Hospital Advisory Committee

Date approved: December 7, 1988

Date effective: December 7, 1988

Date Revised: March, 2003

Date Reviewed: November 17, 2004