

Glendale Fire Department Policy and Procedure Manual

Date: April 14, 2003	Subject: Patient Privacy Notice	Emergency Medical Service Standard Operating Guidelines
Chapter 5	Approved By:	Page No. 1 of 2

BACKGROUND

Federal law, as stated in H.I.P.A.A. (Health Insurance Portability Accountability Act), requires all health care providers to distribute a copy of that providers statement of use and disclosure of all acquired protected health information.

PURPOSE

To establish a procedure for the distribution of a patient privacy notice to all persons that are either assessed, treated or transported.

PROCEDURE

The following procedure shall be followed by anyone requesting release of an EMS Report from the Glendale Fire Department.

- 1 The request, together with a properly executed Release of Medical Record form and the payment of the appropriate fee shall be made through the Fire Prevention Bureau. The Release shall be presented in person with photo identification unless accompanied by a request from an attorney or subpoena.
- 2 The Fire Prevention Bureau shall notify the EMS Chief of the request. The EMS Chief will notify the Medical Director or his/her designee. The EMS Chief must approve the release of any EMS report.
- 3 In the event the Glendale Fire Department does not possess the requested EMS Report and the patient was transported, the individual shall be directed to contact the receiving hospital. That hospital s procedure for releasing medical records shall be followed.
- 4 In the event that both the Glendale Fire Department and the receiving hospital are unable to provide a copy of the Form, the individual shall be directed to contact the EMS Agency for the release of an EMS Report. The Reports will only be released after receiving a proper authorization form or Release of Medical Record that is signed by the patient or guardian or by Subpoena Duces Tecum.
- 5 There shall be no refund of the fee referred in Item 1 above, even if the requested record is not in the possession of the Glendale Fire Department.

END

City of Glendale Fire Department EMS Section
Authorization to Release Medical Information

This authorization for use or disclosure of medical information is in compliance with the terms of the Confidentiality of Medical Information Act of 1981, section 56, et., seq. California Civil Code.

Authorization: I hereby authorize the Glendale Fire Department to release my medical records pertaining to incident:

INCIDENT INFORMATION

Date: _____ **Location:** _____ **Time:** _____

Type of Incident: _____

Name of Patient: _____

Address of Patient: _____

City: _____ **State:** _____ **Zip Code:** _____

Date of Birth of Patient: _____

This authorization shall become effective immediately and shall remain in effect until _____ . Termination shall be 90 days from date signed if not specified herein. This authorization is subject to revocation at any time.

I understand that further use or disclosure of this information is prohibited by law unless another authorization is obtained from me or unless such use or disclosure is specifically required or permitted by law.

Information requested by a patient, parent or legal representative, can only be given to person(s) who present photo identification or by mail, with a letter from a legal representative and/or subpoena.

Signature of Patient Date CDL#

Signature of Parent or Legal Representative Date CDL#

Print Name of Parent or Legal Representative Phone Number _____