

# Release of Information

The Director of Marketing will be the individual to contact for the release of information to the news media. If such information involves a patient at Maury Regional Hospital, information will be given to the extent as described below. The following are also authorized to give out information if the Director of Marketing is not available:

- Vice President of Patient Care Services/Chief Nursing Officer
- Nursing Supervisor
- Administrative Director, Emergency Services
- Emergency Department Charge Nurse (For emergency patients, the nurse manager, charge nurse, or their designee shall provide the specified information)

## **Condition and Location of Patients: What You May Release and to Whom**

### **Inquiries that identify the patient by name**

Information about the patient's general condition and location of an inpatient, outpatient or emergency department patient may be released *only if the inquiry specifically identifies the patient by name*. No information may be given if a request does not include a specific patient's name or if the patient requests that the information not be released. This includes inquiries from the news media.

### **Inquiries from Clergy**

The HIPAA privacy regulations expressly permit hospitals to release the patient's name, location in the hospital, general condition and religion to clergy members, unless the patient has asked that the information not be released. Clergy do not need to ask for the individual by name. For example, clergy could request information regarding patients of a particular religion. However, hospitals are not required to ask about patients' religious affiliations, and patients do not have to supply that information.

### **Release of Patient's General Condition and Location**

As long as the patient has not requested that information be withheld, you may release the patient's one-word condition and location to individuals who inquire about the patient by name or to clergy, without obtaining prior patient authorization.

### **Condition**

Use the following one-word conditions. Definitions of patient conditions are listed below:

**Undetermined** – Patient is awaiting physician and/or assessment.

**Good** – Vital signs are stable and within normal limits. Patient is conscious and comfortable. Indicators are excellent.

**Fair** – Vital signs are stable and within normal limits. Patient is conscious, but may be uncomfortable. Indicators are favorable.

**Serious** – Vital signs may be unstable and not within normal limits. Patient is acutely ill. Indicators are questionable.

**Critical** – Vital signs are unstable and not within normal limits. Patient may be unconscious. Indicators are unfavorable.

The term “stable” should not be used as a condition. Furthermore, this term should not be used in combination with other conditions, which by definition, often indicate a patient is unstable.

### **Death of Patient**

The death of a patient may be reported to the authorities by the hospital, as required by law. Typically, public information about a death will be disclosed after efforts have been made to notify the next-of-kin. Information about the cause of death must come from the patient’s physician, and a legal representative of the deceased must approve its release. This means that hospitals cannot share information with the new media on the specifics about sudden, violent or accidental deaths, or deaths from natural causes without the permission of the decedent’s next-of-kin or other legal representative.

### **Location**

The patient’s location may be included in the hospital directory to facilitate visits by friends and family as well as the delivery of flowers, cards and gifts. However, as a matter of policy, the patient’s location should not automatically be given unless specifically requested.

### **Disclosures of Location to the Media**

To safeguard patient privacy, patient location should not be disclosed to the news media without the patient’s permission. The news media may not contact patients directly. The patient’s designated representative should handle interviews and calls. The hospital may deny the news media access to a patient if it is determined that the presence of photographers or reporters would aggravate the patient’s condition or interfere with patient care.

A hospital representative should accompany the news media at all times while they are in the hospital. At their discretion, the hospital may deny the media access to any area, including (but not limited to) operating rooms, intensive care units, maternity units, emergency departments, psychiatric departments, nurseries, pediatric units, and substance abuse units where all patients present have an expectation of a certain degree of privacy.

For obstetrical patients, the hospital may not disclose to the news media that the patient is in labor or has been released from labor and delivery without individual authorization.

If the news media asks for the patient by name, the hospital may disclose that the patient was treated and released. The hospital **may not** release information regarding the date of release or where the patient went upon release without patient authorization.

### **Media Access to Patients**

The following activities require written authorization from the patient:

- Drafting a detailed statement (i.e., anything beyond the one-word condition) for approval by the patient or the patient’s legal representative
- Taking photographs of patients
- Interviewing patients

If the patient is a minor, permission for any of these activities must be obtained from a parent or legal guardian. Under certain circumstances, minors can authorize disclosure of information without parental approval or notification.

## **Condition and Location of Patients: When You Should Not Release Any Information**

### **Patients can “opt out” of providing information altogether.**

The patient has the option to expressly state that he or she does not want information released – including information confirming his or her presence in the facility.

### **Do not release information that could embarrass or endanger patients.**

Situations where room location information could embarrass patients include (but are not limited to) admission to a psychiatric or substance abuse unit; admission to an obstetrics unit following a miscarriage, ectopic pregnancy or other adverse outcome; or admission to an isolation room for treatment of an infectious disease. In addition, where knowledge of a patient’s location could potentially endanger that individual (i.e., hospital has knowledge of a stalker or abusive partner), no information of any kind should be given, including confirmation of the patient’s presence at the facility.

### **Exercise good judgment in situations where patients can’t express a preference.**

In some cases, patients will not have had the opportunity to state a preference related to the release of their information. For example, a patient’s medical condition may prevent hospital staff from asking about information preferences upon admission. In those circumstances, condition and location information should be released **only if, in the hospital’s professional judgment**, releasing such information would be in the patient’s best interest. As soon as the patient recovers sufficiently, the hospital must ask about information preferences.

### **Matters of Public Record**

Matters of public record refer to situations that are reportable by law to public authorities, such as law enforcement agencies, the coroner or public health officer. While laws and/or regulations require health care facilities to report a variety of information to public authorities, it is not the responsibility of facilities to provide that information in response to calls or other inquiries from the media or other parties, *including law enforcement officials*. Instead, such calls should be directed to the appropriate public authority.

Patients who are involved in matters of public record have the same privacy rights as all other patients, as far as the hospital is concerned. The mode of transportation by which a patient arrives at the hospital should have no bearing on the hospital's approach to releasing information about the patient. The fact that the police or fire department has transported someone to the hospital from an accident, crime scene or fire is a matter of public record likely to be reported by those agencies. As long as the patient has not requested that information be withheld, you may release the patient's one-word condition and location to the news media if they inquire about the patient by name.

There are numerous state statutes addressing reporting of incidents ranging from child abuse to gunshot wounds. The fact that a hospital has an obligation to report certain confidential information to a governmental agency does not make that information public and available to news reporters. Refer news media questions to the public entity (such as the coroner's office, police, fire or health department) that receives such reports.

## **Releasing Patient Information in Disaster Situations**

### **When feasible, notify the next-of-kin first.**

While it is desirable to notify next-of-kin before releasing patient information, in disaster situations involving multiple casualties, it may be necessary to share patient information with other hospitals and/or rescue/relief organizations before the next-of-kin has been notified.

### **Don't hesitate to cooperate with other hospitals or relief agencies.**

Patient information may be released to other hospitals, health care facilities and relief agencies in situations where multiple facilities are receiving patients from one disaster. Public relations representatives are encouraged to cooperate and facilitate the exchange of information regarding patients' location and status. Specifically, you may disclose patient information to a public or private organization assisting in relief efforts for the purpose of notifying family members or others responsible for a patient's care about the patient's location, general condition or death.

### **When appropriate, release general information to help dispel public anxiety.**

In highly charged situations such as disasters, the public may benefit from the release of general information when specific information cannot be released. You may state the number of patients who have been brought to the facility by gender or by age group (adults, children, teenagers, etc.). This type of general information can help reduce undue anxiety.

### **Newsworthy Persons**

Celebrities, public figures and public officials are not subject to different standards than other patients when it comes to hospital policies for releasing information to the news media.

### **Work Effectively With the Media**

Current information should be made available to the media as soon as possible. If information is not yet available or if next-of-kin has not been notified, all news media inquiries should be logged and callbacks made as soon as it is permissible to release information.