

**TITLE: USE OF CELL PHONES AND PHOTOGRAPHY**

**MANUAL: MEDICAL STAFF**

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Approval: /s/

Margaret McEvoy, M.D., Chief of Staff

**I PURPOSE\EXPECTED OUTCOME(S)**

The hospital ministry and medical staff are obligated to provide a safe environment of care that protects patient health information (PHI). The purpose of this policy is to clearly define the processes and procedures to be used when photographs are taken in the hospital and the role of staff members take while photographing surgical patients

**II INTRODUCTORY COMMENTS ABOUT CELLULAR TECHNOLOGY:**

- The use of photographic equipment in all of our facilities is governed by policies that require the maintenance of confidentiality and patient consent prior to photographic use.
- With the advancement of digital cellular technology, smart phones are equipped with relatively good quality still picture and video capabilities.
- However, smart phones do not transmit photographs or other private information in an “encrypted” format. The photographs are easily transferrable, and cannot be “secured in transit” through an unsecured transmission.
- The risk of privacy breaches through electronic transmission through cell phones is high – other modalities such as flash drives, CDs, and paper are of less risk.
- As a matter of practice, pictures should not have identifying features (i.e., faces, or patient ID numbers) in the photograph.

**III POLICY:**

Patients at Santa Rosa Memorial Hospital may agree to permit employees and/or physicians to photograph or video/audio tape medical or surgical procedures for documentation in the medical record or for scientific, educational or research purposes.

Other photography or video/audio taping of patients by employees and/or physicians may be permitted in special circumstances, but only as approved by the Hospital Administration.

Photography for purposes of patient treatment or health care operations:

1.1 The patient’s consent shall be obtained prior to a patient being photographed for purposes of diagnosis and treatment or for hospital operations such as peer review, performance improvement, or education and training conducted by the hospital.

1.2 Photography of patients at Santa Rosa Memorial Hospital for purposes of diagnosis and treatment or for hospital operations such as peer review or education and training conducted by the hospital are

permitted according to the Conditions of Admission (COA) Policy. Consent may be obtained as part of the general consent to treatment through a clause in the COA form for the purpose of alerting the patient and obtaining the patient's consent to the photography and the use of photographs. However, patient consent obtained through this process and for these purposes does not permit the photographs to be published or used for any other purposes. For purposes other than patient identification, diagnosis, or treatment, all patients agreeing to video/audio taping or photographing shall sign the appropriate consent form **prior** to the audio/video taping/photographing.

1.3 The patient, or other designated responsible party, will complete and sign this form prior to the photography or recording event.

1.4 The individual obtaining this consent must explain what use of the photograph or recording are anticipated.

1.5 If the patient states any restrictions, these restrictions should be clearly documented and respected. The hospital will not use the photograph in the unauthorized manner.

1.6 The original signed consent will be maintained in the patient's chart and will become a permanent part of the patient's medical record.

1.7 Consent to Photograph must be signed for each new series of photographs and for photographs taken by persons other than those named in prior consents.

1.8 The consent given for the use of photographs will remain valid unless and until the time specified in the form or until the patient notifies the hospital that he or she is withdrawing or restricting authorization for any future use.

1.9 Any photographs or audio/video tapings become a permanent part of the patient medical record.

2.1 In the event that images of hospital employees/medical staff are included in the photographs or audio/video tapings, authorization for the intended use of those images will be obtained from the hospital employees/medical staff prior to taking those photographs.

3.1 Photos will be taken with a secure process to prevent accidental disclosure of PHI.

3.2 Unsecured photography equipment such as cell phones will not be used to transmit photographs containing PHI. Secure processes may include Digital cameras downloaded in a secure manner on CD or encrypted flash drive.

3.3 Notwithstanding section 3.2, there exists certain instances where the transmission of de-identified patient information via cell phone technology is helpful to improve the timeliness and quality of patient care offered to the patient. In these circumstances the use of de-identified photographs that does not contain either physical identifiers, or the patient's personal information such as name, date of birth, patient number, or place of service may be used.

SUBMITTED TO THE MEC BY: GARY GREENSWEIG, DO, CHIEF MEDICAL OFFICER  
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Author/Department: Gary Greensweig, DO, Chief Medical Officer	
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