


Name of Policy: Medical record retention and destruction; disposal of protected health information Policy Number: 33640-16 Approving Officer: President Responsible Agent: Privacy Officer and Director of Health Information Management Scope: Hybrid and affiliated covered entity of University of Toledo		 Effective date: September 13, 2023 Original effective date: November 15, 2010	
Keywords			
	New policy		Minor/technical revision of existing policy
	Major revision of existing policy	X	Reaffirmation of existing policy

(A) ~~18.6A~~ University of Toledo will ensure the privacy and security of protected health information (PHI) in the maintenance, retention and eventual destruction and disposal of such media. Destruction and disposal of PHI will be carried out in accordance with federal and state law, and as defined in the University's retention policy. The schedule for destruction and disposal shall be suspended for records involved in any open investigation, audit or litigation.

(B) Purpose of policy

The health information management department (HIM) is responsible for maintaining a medical record for each inpatient and outpatient. These records will be properly maintained and accessible. After the retention requirements have been met, destruction of the legal medical record will be carried out by a method that ensures no possibility to reconstruct the contents of the record.

(C) Procedure

This policy shall apply to health information that is generated during provisions of healthcare to patients in any of the university's patient care units, patient care centers or faculty practices as well as human subjects ~~ask~~ under the auspices of the university or by any of its agents in all ~~university~~ schools, units, departments and university-owned or operated facilities.

(1) Record retention

- (a) Medical records may be an electronic medical record, paper documents, microfilm, electronic data storage, etc, but must be maintained in such a way that the information is available for clinical reference upon request. Opportunities for loss and/or damage must be minimized and records

Approved by:

/s/

Gregory Postel, MD
President

Date: September 13, 2023

Review/revision completed by:

- *Privacy and Security Committee*
- *Senior Leadership Team*

Policies superseded by this policy

- *3364-100-50-40 Retention and Destruction of Medical Records*
- *3364-15-04 Disposal of Protected Health Information (PHI)*

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