

Release of Patient Protected Health Information to the Media

It is the policy of Weatherford Regional Hospital to ensure the privacy and security of protected health information (PHI) of patients¹ and to ensure that release of PHI to the media is disclosed along the guidelines set forth in this policy and in the best interest of the patients served. WRH adheres to the regulations set forth by the Health Insurance Portability and Accountability Act (HIPAA) for the release of patient-identifiable information and/or patient medical information.

Procedures:

1. All requests for patient PHI made by the media shall be forwarded to the Public Relations department for review and response. Requests received after regular business hours shall be forwarded to the supervisor in charge for review and determination of appropriate response.
2. The supervisor may determine that administrative review and action is required and contact the administrator-on-call to consult and determine the appropriate response.
3. The organization may only respond to a request for specific patient information from the media when the inquiry specifically contains the patient's first and last name, and the patient has not restricted access or "opted-out" of the facility directory listing.
4. If the patient has not requested that information be withheld or restricted, the organization may release the patient's "one-word" condition. Appropriate "one-word" descriptions for the patient's condition may include:

One-Word Condition	Definition
Undetermined	<i>The patient is awaiting physician assessment.</i>
Good	<i>Vital signs are stable and within normal limits; patient is conscious and comfortable; indicators are excellent.</i>
Fair	<i>Vital signs are stable and within normal limits; patient is conscious, but may be uncomfortable; indicators are favorable.</i>
Serious	<i>Vital signs may be unstable and not within normal limits. Patient is acutely ill. Indicators are questionable.</i>
Critical	<i>Vital signs are unstable and not within normal limits; patient may be unconscious; indicators are unfavorable.</i>

5. The organization cannot share information with the media on the specifics about sudden, violent or accidental deaths, as well as deaths from natural causes, without permission of the decedent's next-of-kin or other legal representatives.

¹All patients are equal; celebrities, public figures, public officials, and patients involved in matters of public record are not subject to different standards than other patients when it comes to organizational policies for releasing information to the media.

WRH Media Policy

6. The organization will strive to protect the privacy of the patient as well as ensuring the security of the patient. Where knowledge of a patient's location could potentially endanger the patient (i.e., the hospital has knowledge of a stalker or an abusive partner), no information of any kind will be disclosed to the media, including confirmation of the patient's presence at the facility.
7. The organization must obtain written authorization from the patient for the following media-related activities;
 - A. Reporting births
 - B. Detailed statements (beyond "one-word") on the patient's condition.
 - C. Photographs/videotapes/other imaging or audio recordings of the patient
 - D. Interviews of the patient by media representatives.
 - E. Interview of the organization/ patient's provider on the patient's condition.

The Public Relations Department will work with the media to obtain permission on a case-by-case basis.

8. The organization is not responsible for addressing inquiries that are made as a result of "public record." Matters of public record refer to situations that are reportable by law to public authorities, such as law enforcement agencies, the medical examiner/coroner or public health officer. Inquiries made from media citing access as a matter of public record should be referred to the appropriate public authority.
9. The HIPAA privacy protections continue to apply to a patient's medical information even after the patient's death. No information may be released unless the inquiry contains the patient's name. The death of a patient is considered to be a "patient condition" and may be disclosed using this one-word description. A patient's death is not routinely announced by the hospital, but rather by the patient's physician or the coroner.
10. A member of the Public Relations Department must escort the media while on campus at all times.

Disaster/Mass Casualty Situations

11. When appropriate in disaster or mass casualty situations, the organization may release general information to the media to help dispel public anxiety. The organization may state the number of patients who have been brought to the facility by gender or age group (adults, children, teenagers, etc.). Examples might include:
 - a. The facility is treating four individuals as a result of the explosion.
 - b. The facility is treating six male adults as a result of a toxic chemical leak.
12. Whenever possible, the organization shall select a spokesperson to handle media inquiries to restrict and control information shared with the public.
13. In disaster or mass casualty situations, the organization shall strive to work effectively with the media balancing the release of general information with patient privacy rights. A location may be provided for the media to be contained, so that information can be released in a press conference format that does not compromise patient privacy or the facility's need for added security in disaster situations. Information will also be provided on the WRH website periodically giving updates on the situation at hand.