



Title: Patient Names on Room Plates, Beds and Charts

Issue

May a patient's name, in an HCHD inpatient setting, be posted outside the room, on the bed and on the patient's chart?

Facts

- HIPAA does require the patient's confidentiality be protected.
- HIPAA does require that we offer the patient the opportunity to be included in the Facility Directory.
- HIPAA permits the patient to request restrictions on the Use and Disclosure of his/her Protected Health Information.
- HIPAA doesn't prohibit the incidental disclosure of patient information to other individuals.

Guideline

HIPAA doesn't prohibit the placement of a patient's name on the door, the doorplate of the room or on the patient's medical chart/record maintained at the bedside or nurse's station. The appropriate Patient information that may be used is as follows:

- Last Name, First Name, Middle Initial
- Room Number
- Nurse's Name
- Approved Service Indicators

Elaboration

The Privacy Rule explicitly permits certain incidental disclosures that occur as a by-product of an otherwise permitted disclosure. The disclosure of a patient's name, by posting it on the wall, is permitted by the Privacy Rule; since the use or disclosure is for treatment (for example, to ensure that patient care is provided to the correct individual) or health care operations purposes (for example, as a service for patients and their families). The disclosure of such information to other persons (such as other visitors) that will likely also occur due to the posting is an incidental disclosure.

In addition, the disclosure of names is the minimum necessary for the purposes of the permitted uses or disclosures described above, and there do not appear to be additional safeguards that would be reasonable to take in these circumstances.



For the Hospital District, there are five HIPAA Privacy Standards that impact the use of a patient's name in an area of public view:

1. Facility Directory [HCHD Policy 3.11.201 and 45 CFR §164.510 (a)] – The Hospital District is required to offer the patient the opportunity to “agree or object” to be included in the facility directory. If the patient objects to inclusion in the directory then we may infer his/her disapproval for the placement of his/her name on the door or doorplate as well as at the foot of the bed.
2. Restrictions [HCHD Policy 3.11.204 and 45 CFR §164.522 (a)] – The patient has the right to request restrictions on the Use and Disclosure of his/her Protected Health Information (PHI.) The Hospital District isn't required to comply with the request that it is either unable or unwilling to provide; however if the Hospital District agrees to the restriction we must comply. The Hospital District's Privacy Officer or designee must approve any request for restrictions and that information will be provided to those individuals and areas impacted.
3. Incidental Uses and Disclosures [HCHD Policy 3.11.105 (II)(H) and 45 CFR §164.502 (a)(1)(iii)] – An incidental disclosure of PHI that occurs as a result of a permitted Use or Disclosure is not a violation of HIPAA, provided efforts have been made to meet the reasonable safeguards and minimum necessary requirements. Use of the patient's name is permitted for Treatment, Payment and Health Care Operations, as are other necessary indicators [e.g., nurse, room number, and service (depending on the sensitivity and nature of the individual patient condition.)]
4. Minimum Necessary [HCHD Policy 3.11.302 and 45 CFR §164.514 (d)] – The Hospital District must determine the minimum necessary information to perform a function or task. The patient's name and room number is necessary for patient safety identification and treatment; the nurses name for operational services to communicate to the family and other Hospital District workforce members. The Service indicator may be necessary to ensure correct staff response and direction.
5. Safeguards (45 CFR §164.530 (c)) – The Hospital District is required to provide appropriate administrative, physical and technical safeguards to protect the confidentiality of the patient and his/her PHI. This requires that the Hospital District's workforce exercise reasonable judgment and make an effort to protect the patient's privacy when discussing or performing activities that may result in the disclosure of PHI.

References:

- *HIPAA Policy 3.11* (45 CFR §160.101)
- *Use and Disclosure of Protected Health Information for Facility Directories Policy 3.11.201* [45 CFR §164.510 (a)]



References: (continued)

- *Requests for Restricting Use and Disclosure of Protected Health Information Policy* 3.11.204 [45 CFR §164.522 (a)]
- *Use and Disclosure of Protected Health Information for Treatment, Payment and Health Care Operations* 3.11.105 [45 CFR §164.502 (a)]
- *Minimum Necessary Standard for Use and Disclosure of Protected Health Information* 3.11.302 [45 CFR §164.514 (d)]
- 45 CFR §164.530 (c) Safeguards