



## Policy 9.4 Working with and Releasing Patient Information to the Media

**Responsible Official:** VP of Communications  
**Administering Division/Department:** Communications and Marketing  
**Effective Date:** March 30, 2007  
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### Policy Details

#### 9.4.1 Working with the Media

The media relations manager, the Woodruff Health Sciences Center media team and others will be responsible for arranging media visits and/or for escorting media while on hospitals and Wesley Woods Center premises. Under no circumstances shall media be allowed to enter Woodruff Health Sciences Center Administration Building, the hospitals or Wesley Woods Center without escort. In the absence of the media manager or other designated representative, public safety officers shall be responsible for escorting the media.

#### **Arriving at and entering Woodruff Health Sciences Center Administration Building, the Hospitals or Wesley Woods Center**

- Direct media representatives are to enter the facility at the designated press briefing location.
- Notify public safety, valet and guest services as soon as possible to expect media representatives.
- The media relations manager (or designee) will notify the appropriate administrative source and affected departments.
- If the media is seen unescorted, they are to be taken to the main lobby until the appropriate media relations manager or associate administrator arrives. Public safety is to notify the health sciences communications department should this occur.

#### **Media Badges**

Media representatives will be issued bright neon yellow Emory Healthcare identification badges by the media team. Media badges can be found in the crisis communication boxes at each location. Staff who encounter unidentified media representatives should call the health sciences communications department (WHSC: 404-727-5686) or public safety (EUH: 404-712-5598; ECLH: 404-686-2597; WWC: 404-728-6200).

#### **Photographs, Still and Electronic**

- A signed consent form must be obtained from each person interviewed, photographed or filmed before any pictures are taken. This applies to patients, guests and staff.
- The media consent form is located in the G drive in the forms folder.
- In the case of a minor (18 or younger), a signed consent form must be obtained from a parent or guardian.
- The signed consent forms are kept in a permanent file in the health sciences communications department.

#### **Information Access**

The associate administrator and designated staff will have access to all areas of Emory Hospitals, Wesley Woods Center and Woodruff Health Sciences Center and information related to the crisis. It is the legal, ethical and moral responsibility of Emory Healthcare and the associate administrator to maintain patient and family rights, and patient confidentiality with the information acquired. During a media visit, the media team will keep administration informed and updated as appropriate.

#### 9.4.2 Releasing Patient Information

It is the policy of Emory Healthcare to safeguard the privacy rights of the individual so that no patient will be caused unnecessary embarrassment or discomfort, to report the news accurately, authoritatively and

promptly and to cooperate sincerely in all relationships.

The Department of Health and Human Services (HHS) issued a rule on medical privacy pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This rule specifies the purposes for which information may and may not be released without authorization from the patient. All Emory Healthcare facilities must comply with state laws regarding patient privacy and confidentiality. The information in this crisis plan is consistent with these regulations.

#### **9.4.2A Releasing Patient Information to the Media**

As long as the patient has not requested that information be withheld (patient placed on “No Information” status), after next-of-kin has been notified, the hospital may disclose the patient's admission and the patient's general condition using the one-word patient condition terms . This is the only information that can be released about a patient's condition without obtaining the patient's permission. Medical or nursing staff can determine the patient's diagnosis and/or prognosis and the one-word patient condition.

With written authorization from the patient or the patient's legal representative, a more detailed statement about the patient's condition can be released to the media. After receiving written authorization, media team representative are the only individuals permitted to release patient information to the media.

Media inquiries must contain the patient's name. Information about the admission and condition of an inpatient, outpatient or emergency department patient may be released to the media only if the inquiry specifically contains the patient's name. No information is to be given if a request does not include a specific patient's name.

#### **9.4.2B Releasing Patient Information to Families and Clergy**

Patient representatives from admissions, patient information and/or nursing should release patient information to patient families and clergy members. However, in the case of a crisis, the media relations team and/or associate administrator gathering information for the media can help disseminate information to areas where families may be waiting. The person(s) coordinating notification of families should notify the Woodruff Health Sciences Center media relations department as this is accomplished, so the victims' names can be released to the media.

#### **9.4.2C When Patient Information Should Not Be Released**

##### **“No Information” Patients**

Patients who do not want public knowledge of their presence in the hospital may request to be placed on “No Information” status. To be placed on “No Information” status, network communications must be notified at 6-2611.

To respect the privacy of “No Information” patients, Emory Hospitals/Wesley Woods Center network communications will tell callers who request information on these patients, “I'm sorry, but I have no information on that person.” The same information should be relayed to the media who call requesting an update or condition report.

Patient information will not be released to the public when:

- **Information could embarrass or endanger patients.** Sometimes it is not advisable to report information about patients, even if they have not asked to be placed on “No Information” status. Spokespersons should not report any information that may embarrass a patient. Also, where knowledge of a patient's location could potentially endanger that individual, ( i.e. the hospital has knowledge of a stalker or an abusive partner), no information of any kind should be given, including confirmation of the patient's presence at the facility.
- **When release of information violates Federal or State laws.** There are often laws on the books that prohibit even the acknowledgement of a person's presence in the hospital. Federal Privacy protection laws of patients admitted for psychiatric treatment, for substance abuse and certain other conditions prohibit even confirmation that a particular patient is receiving treatment in the hospital. State laws can also prohibit the hospital from releasing information.
- **Exercising good judgment in situations where patients can't express a preference.** In some cases, a patient will not have had the opportunity to state a preference about having their information released. For example, a patient's medical condition may prevent hospital staff from asking about their information preferences upon admission. In those circumstances, admission and condition information should only be released if, in the hospital's professional judgment , releasing such information would be in the patient's best interest. Then, when the patient recovers sufficiently, the hospital must ask for their preference.

#### **9.4.2D Releasing Patient Information in the event of a Major Crisis or Disaster Situation**

##### **Notify next-of-kin first is the guiding principle.**

In disaster situations involving multiple casualties, just as in all other situations, patient information should not be released until the next-of-kin has been notified.

##### **Emory Healthcare cooperates with other hospitals or relief agencies.**

Patient information may be released to other hospitals, healthcare facilities and relief agencies in situations where multiple facilities are receiving patients from one disaster. Public relations representatives from different facilities are encouraged to cooperate and facilitate the exchange of information regarding patients' location and status. Specifically, Emory Healthcare 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, general information may be released 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 is not yet releasable. For example, the hospital might say that "the facility is treating four individuals as a result of the explosion." Emory Healthcare 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. Information that could lead individuals to ascertain the individual identity of a patient will not be released without notification of next of kin or patient's permission.

**Working effectively with the media**

Current information will be made available to the media as soon as possible after release of information approval is obtained from the patient or next of kin. If information is not yet available or if next-of-kin has not been notified, all media inquiries will be logged and callbacks made as soon as information has been authorized for release. An area (see key communication areas) has been identified so media can gather in one place to receive information in a press conference format that does not compromise patient privacy or the healthcare facility's need for added security in a crisis or disaster situation.

*These guidelines were provided by the Society for Healthcare Strategy and Market Development of the American Hospital Association.*

**9.4.3 One-word Patient Condition Reports**

Condition reports are assigned by medical or nursing staff and may parallel these AHA guidelines:

**GOOD:** Vital signs are stable. Patient is conscious and comfortable.

**FAIR:** Vital signs are stable. Patient is conscious, but is uncomfortable or may have minor complications.

**SERIOUS:** Vital signs may be unstable or not within normal limits. Patient is acutely ill; indications are questionable.

**CRITICAL:** Vital signs are clearly unstable or not within normal limits. Patient is acutely ill; indications are questionable.

**UNDETERMINED:** This is not a medical classification. It is to indicate the patient is in the evaluation process to determine a more definitive condition status.

**DEAD:** The death of a patient is presumed to be a matter of public record and may be reported by the hospital after the next of kin has been notified or after a reasonable time has passed. Information regarding the cause of death must come from the patient's physician and its release must be approved by a member of the immediate family (when available).

DO NOT USE THE TERM "STABLE"

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

**Related Links**

- Current Version of This Policy: <http://policies.emory.edu/9.4>

**Contact Information**

Subject	Contact	Phone	Email
Clarification of Policy	Ron Sauder	404.727.4499	rsauder@emory.edu

**Revision History**

**No previous versions of this policy were found.**