

**DATE:** AUGUST 21, 2018  
**NUMBER:** M.2  
**SUBJECT:** REQUESTS FOR MEDICAL INFORMATION  
**RELATED SECTIONS:** [M.7](#), [MSD.H.1](#), [MSD.H.2](#), [MSD.H.3](#), & [MSD.P.18](#)

## PURPOSE

To provide direction to bureau personnel when responding to a request for medical information for inmates in the custody of the Sheriff.

## POLICY

The Health Insurance Portability and Accounting Act of 1996 (HIPAA) outlines many detailed requirements protecting the confidentiality of health information and provides individuals significant rights with respect to this information. Compliance with this regulation is addressed in a series of Medical Services Division (MSD) policies and procedures, MSD.H.1 through MSD.H.10. The CA Civil Code Sections 56.53, Medical Information Act as well as the CA Privacy Act also protect individual's right to privacy.

Bureau personnel shall not release health information to any individual or organization. All requests for health information must be directed to the chief of health information management (HIM) for release and accountability in accordance with federal and state laws.

This section is not intended to apply to subpoenas seeking medical records.

## PROCEDURE

### I. REQUESTS FOR MEDICAL INFORMATION

All requests for medical information shall be forwarded to the HIM unit at each facility for the appropriate release of information.

### II. IDENTIFYING WHAT IS MEDICAL INFORMATION

The term "medical information" is not capable of a precise definition. Generally, the term "medical information" refers to information concerning an inmate-patient's (I/P) internal or external body conditions that would be known only to the I/P, or to a medical professional treating that I/P. If there is a question as to whether certain information constitutes "medical information," bureau personnel should err on the side of nondisclosure, and forward the request to the medical records unit.

- A. The following examples are intended to provide an illustration as to what may constitute "medical information" that is subject to stringent state and federal statutes concerning medical privacy. These examples are not an exhaustive list of all information that could possibly be construed as medical information. Rather, they are intended to provide guidance as to the type of information that should not be disclosed.

1. The presence or absence of a disease. Examples:
  - a. An I/P is HIV+
  - b. Any psychiatric information
  - c. Alcohol or drug usage
2. Bodily characteristics that are not discerned from ordinary observation. Examples:
  - a. An I/P's blood type
  - b. An I/P's DNA
3. The occurrence of a traumatic event. Examples:
  - a. An I/P suffered a heart attack
  - b. An I/P suffered a stroke
  - c. An I/P suffered a broken bone
4. Details of any treatment, procedures, or tests, by a medical, dental, or mental health provider, including the prescription of any medication. Examples:
  - a. An I/P is being tested for HIV+
  - b. An I/P is being evaluated for a mental disorder
  - c. An I/P has been prescribed any psychiatric medication(s)
  - d. An I/P has been treated for alcohol or drug abuse
5. Pregnancy

A female I/P's pregnancy may be obvious at some point during her pregnancy. Nonetheless, bureau personnel may not disclose, confirm, or deny the fact of any pregnancy, even when it may be obvious to a casual observer.

- B. The following examples are intended to provide an illustration of information that would not constitute "medical information", even though they may be indicative of a medical problem.
1. An observed action or perception that was observed not in the course of providing medical treatment. Examples:
    - a. An I/P is bleeding
    - b. An I/P is walking with a limp

- c. An I/P appears groggy
  - d. An I/P has thrown up
  - e. An I/P has bruises on his rib cage
2. An observed trauma to a person. Examples:
- a. An I/P was shot
  - b. An I/P was beaten
  - c. An I/P collapsed
  - d. An I/P burnt himself
- C. Bureau personnel should take care to understand the distinction between disclosing an observable trauma (which is permissible) and disclosing the effect of that observable trauma (which is not permissible). The distinction can be illustrated with the following examples:
- 1. An I/P was beaten in an altercation is not medical information. That an I/P suffered a broken jaw and internal bleeding is medical information.
  - 2. An I/P collapsed is not medical information. That the I/P collapsed because he suffered a stroke is medical information.
  - 3. An I/P was shot in the leg is not medical information. That as a result, the I/P's tendon was ruptured is medical information.
  - 4. An I/P fell out of his bed is not medical information. That the I/P broke his arm falling out of bed is medical information.