

# **Georgia Hospital Association Document Retention Schedule**

2016 Edition



Attorneys at Law

#### **INTRODUCTION**

The Georgia Hospital Association ("GHA") is pleased to provide its membership with this 2016 edition of the Document Retention Schedule (the "Schedule"). This is the third edition of the Schedule, having first been published by GHA and the Georgia Academy of Healthcare Attorneys in 2003. Over the past thirteen years, member hospitals have recognized the value of this Schedule as a resource and reference in developing document retention policies and procedures. Thus, in August 2013, GHA commissioned Arnall Golden Gregory LLP ("AGG") to revamp the Schedule and update it biannually.

The Schedule features several enhancements that make it more user-friendly and provide hospitals with easier access to cited law and with further insight into potential legal situations relevant to document retention (e.g., including footnotes to section headings). Some of these enhancements include: 1) internal hyperlinks to the various sections and cross-references within the Schedule and hyperlinks to an Appendix of cited laws; 2) an Appendix that includes a sample legal hold memorandum and notice template to consider for document retention during reasonably foreseeable government investigations and litigation; 3) an Appendix of a sample email policy; 4) an Appendix of a sample electronic record retention guideline; and 5) a comment feature on GHA's website to allow for feedback on hyperlink functionality as well as recommendations for future versions.

The Schedule is posted to GHA's website. Document retention requirements change frequently and, to address this, updates are planned to be made on an ongoing basis for the next four years. Specifically, there will be biennial updates in 2018 and 2020 to confirm substantive material and update citations in the Schedule and in the Appendix of cited laws. In addition, if GHA becomes aware of any major changes in law or hospital practice between the biennial updates, the goal is to amend the affected portions of the Schedule and post the updated version to GHA's website.

Though the Schedule includes a thorough compilation of record retention laws that apply to documents routinely created by healthcare providers, particularly hospitals, it is impossible to develop a one-size-fits-all retention policy. Your hospital may generate records this Schedule does not contemplate; it may not be governed by certain sections, line items, or cited laws; or it may be subject to additional legal requirements that are not addressed (e.g., retention requirements for publicly traded companies under Sarbanes-Oxley or that apply only to government contractors, including, for instance, hospitals with research grants or those that provide healthcare to active or retired military under contract with the Department of Veterans' Affairs or the Department of Defense). A hospital may also be subject to varying retention requirements pursuant to third-party payor contracts, malpractice insurers, corporate integrity agreements, bond and financing covenants, or requirements of other entities with which the hospital transacts business. Moreover, developing a retention policy is not purely a legal exercise as there may be, and often are, other reasons to hold documents for a shorter or longer time, including storage capabilities, risk tolerance, historical and administrative value, specific circumstances, or other business reasons. Accordingly, this Schedule is provided as a benefit to GHA's members, but is *intended for informational purposes only and should not be* construed as legal

advice or opinion on particular matters. Hospitals should seek advice from their business, compliance, information technology, legal, and other departments when adopting and updating such policies.

GHA trusts you will find this Schedule a useful resource and welcomes any comments or questions you may have. GHA would like to thank the GHA In-House Counsel Association members of Sally Austin, Carol Todd, Keith Mauriello, and Tracy Dawson for their assistance, support, and leadership throughout this process. GHA would also like to thank Arnall Golden Gregory LLP for their time and effort in working on the Schedule.

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# BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Accounts Payable	Date of tax filing plus 6 years.	<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note:</i> In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

# BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Accounts Receivable	Date of tax filing plus 6 years.	<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

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# BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Annual Financial Reports	Permanent.	Though legal citations support a retention period of 6 years, organizations may maintain annual financial reports permanently for historical and administrative reasons.
		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		42 C.F.R. § $420.302$ (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

# BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Bank Accounts Reconciliation	Date of tax filing plus 6 years.	26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		$\frac{42 \text{ C.F.R. } \$ 420.302}{\text{to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).}$
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
Bank Deposit Slips	Date of tax filing plus 6 years.	26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

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## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Bank Statements	Date of tax filing plus 6 years.	<ul> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).</li> <li>Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).</li> <li>42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).</li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>

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## BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Budgets – Outdated and Not Currently in Use	At least 6 years.	There may be historical value in some records that could lead the hospital to keep them for a longer time period ( $e.g.$ , budgets for large construction projects).
		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		<u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		$\frac{42 \text{ C.F.R. } \$ 420.302}{\text{to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).}$
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

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## BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Cash Receipts (records that are not related to payment for health services) For payments for health services generally, see p. 10; for payments for DMEPOS, clinical laboratory services, imaging services, or home health service, see p. 11.	Date of tax filing plus 6 years.	<ul> <li><u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note:</i> In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions).</li> <li><u>Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3</u> (5 year retention for supporting documentation for Medicare cost reports).</li> <li><u>Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z)</u> (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).</li> <li><u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).</li> <li><u>O.C.G.A. § 10-11-2</u> (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>

## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Charge Slips to Patients	Date of tax filing plus 6 years.	<ul> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).</li> <li>Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).</li> <li>42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).</li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>

# BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Checks – Cancelled	Date of tax filing plus 6 years.	The hospital may wish to maintain certain checks for a longer time period as evidence of purchases for warranty and other reasons.
		O.C.G.A. § 10-12-12(a) (if a law requires retention of a check, that requirement is satisfied by retention of an electronic record of the information on the front and back of the check).
		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		<u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Check Registers	Date of tax filing plus 6 years.	26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
Claims and Charges to Patients, Fiscal Intermediaries, Third-Party Payors	6 years.	The Hospital's primary exposure for these records is under the False Claims Act, which has a 6-year statute of limitation and 10-year statute of repose. <u>31 U.S.C. § 3731(b)</u> .
For claims relating to DMEPOS, clinical laboratory services, imaging services, or home health service, see below, p. <u>11</u> ).		In more recent Corporate Integrity Agreements ("CIAs"), the OIG requires that documents relating to reimbursement from the Federal health care programs be retained for 6 years after the CIA's effective date ( <i>i.e.</i> , 1 year after the expiration of the 5-year CIA).

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## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Claims or Requests for Payment for Items of DMEPOS, Clinical Laboratory, Imaging Services, or Home Health Services Provided by the Hospital or Ordered by a Physician in the Hospital For other patient claims, see above, p. <u>10</u> ).	7 years.	<ul> <li><u>42 C.F.R. § 424.516(f)</u>; <u>Medicare Program Integrity Manual, Ch. 15 § 18</u> (BOTH physicians who order AND providers that furnish items of DMEPOS, clinical laboratory, imaging services, or covered home health services must maintain written and electronic documents (including the NPI of the physician who ordered/certified the services) relating to written orders and certifications and requests for payments for DMEPOS, clinical laboratory, imaging services, or covered home health services for 7 years from the date of service).</li> <li><u>42 C.F.R. §424.535(a)(10)</u> (provider who fails to comply with document retention requirements in 424.516(f) is <u>subject to revocation</u> of Medicare enrollment for a period of not more than 1 year).</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>In more recent Corporate Integrity Agreements ("CIAs"), the OIG requires that documents relating to reimbursement from the Federal health care programs be retained for 6 years after the CIA's effective date (<i>i.e.</i>, 1 year after the expiration of the 5-year CIA).</li> </ul>

## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Contracts and Supporting Documentation	Full term of contract plus 6 years. See comments regarding instruments signed under seal.	Some contracts expressly delineate that they are being signed "under seal." The statute of limitations for these contracts is 20 years. <u>O.C.G.A. § 9-3-23</u> . The hospital should retain any contracts that are signed under seal and their supporting documentation for 20 years. <u>O.C.G.A. § 9-3-24</u> (6 year statute of limitation for breach of written contracts not involving the sale of goods); <u>O.C.G.A. § 11-2-725</u> (4 year statute of limitation for breach of contract for the sale of goods). <u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note:</i> In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> . <u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years). <u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions). <u>Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3</u> (5 year retention for supporting documentation for Medicare cost reports). <u>Part 1: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z)</u> (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years). <u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).

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## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Corporate Records and Permits ( <i>e.g.</i> , Articles of Incorporation, Hospital and Medical Staff Bylaws, Board Minutes, Licenses, Certifications, Registrations and Permits, Certificate of Need Records, Determinations and Related Requests, Letters of Nonreviewability, State Health Planning Documents)	Permanent.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4003</u> (hospitals must have a permit); <u>Ga. Comp. R. &amp; Regs. 111-8-4005</u> (hospitals must submit the original copy of the application); <u>Interpretive Guideline citing Ga. Comp. R. &amp; Regs. 290-9-705</u>, recodified to Ga. Comp. R. &amp; Regs. 111-8-40.05 (hospitals should keep a copy of the application submitted to get a permit and any supporting documents).</li> <li><u>O.C.G.A. § 14-2-1601</u> (corporations must keep permanent records of minutes of all meetings of its shareholders and board of directors, executed consents evidencing all actions taken by the shareholders or board of directors without a meeting, a record of all actions taken by a committee of the board of directors in place of the board of directors and its committees).</li> </ul>
Donor Records and Correspondence	If the contributor attached a condition to the contribution: Permanent. Generally: 6 years from the date of tax filing.	<ul> <li>Hospitals may have a foundation that is a separate legal entity that handles monetary donations. This document retention schedule does not address the documents that foundation may maintain.</li> <li><u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions, including Anti-Kickback).</li> <li><u>15 U.S.C. § 15b</u> (4 years statute of limitation for antitrust claims).</li> </ul>

## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Financial Audits	Permanent.	Organizations often maintain annual financial reports permanently for historical and administrative reasons, even though legal citations support a retention period of 6 to 10 years.
		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.M.B. Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations (Non-profits that expend more than \$500,000 in federal money per year are required to submit financial audit reports. Records of those reports must be retained for 3 years).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Financial Correspondence	Date of tax filing plus 6 years.	<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		15 U.S.C. § 15b (4 years statute of limitation for antitrust claims).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Fire Drill Reports	3 years.	Ga. Comp. R. & Regs. 111-8-4015 (the hospital shall document participation of all areas of the hospital in quarterly fire drills).
		Ga. Comp. R. & Regs. 111-8-4014 (hospitals must develop and implement an effective hospital-wide safety program that includes a fire safety program including compliance with the applicable provisions of the <i>Life Safety Code</i> (NFPA 101), as enforced by the state fire marshal).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
		Joint Commission, Comprehensive Accreditation Manual – Environment of Care (hospitals must have processes to report and investigate incidents and issues, including fire safety management problems).
Joint Commission Records (e.g., original Joint Commission survey results, documents related to Joint Commission surveys, correspondence from Joint Commission)	Permanent.	The hospital may wish to maintain Joint Commission records permanently for historical purposes. <u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).

## BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Journals Ledgers, Ledger Cards	Date of tax filing plus 6 years.	<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
Registers		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
Medicare and Medicaid Cost Reports	6 years from date of filing.	<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part II: Policies and Procedures for Hospital Services, § 1002 (Medicaid cost reporting requirements); Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(R) (providers must retain Medicaid records for 6 years after the date of service. Records meeting the secure electronic signature requirements are acceptable).
		<u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions).

## BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Policies and Procedures – Outdated	<ul> <li>Policies relating to use of equipment/products, including Pharmacy policies: 10 years.</li> <li>Policies for Compliance, HIPAA Privacy, Human Resources, Marketing, Nursing, or Quality Assurance: 6 years.</li> <li>Other policies: At least 3 years.</li> <li>See also Document Retention Schedule for the department that maintains the policy.</li> </ul>	The hospital may wish to maintain policies for a longer period of time for historical purposes. O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury). <u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years). <u>45 C.F.R. § 164.530(i)</u> (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect). O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract. The Employee Handbooks should be maintained for this period for any claim that the Handbook constituted a contract between the employer and employee). O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i> , 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases). O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

# BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Quality Assurance Records	6 years. For quality assurance records that are Medical Staff Records, <i>see Medical Staff Records</i> , <i>p</i> . <u>66</u>	<ul> <li>Hospitals may consider keeping quality assurance records for 10 years to cover the statute of limitations for products liability and the statute of repose for False Claims Act liability.</li> <li>Although arguably not discoverable, quality assurance meeting records may be helpful to hospital and defense counsel in assessing malpractice claims and suits. In addition, the hospital may wish to consider keeping these records longer to access quality assurance records for trending and other administrative purposes.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>O.C.G.A. § 51-1-11</u> (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); <u>O.C.G.A. § 11-2-725</u> (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); <u>O.C.G.A. § 9-3-73</u> (2 year statute of limitation for malpractice actions, 5 year statute of limitations for personal injury).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li><u>O.C.G.A. § 9-3-72</u> (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> <li><u>O.C.G.A. § 10-11-2</u> (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years)</li> </ul>

## **BUSINESS, FINANCIAL, AND HOSPITAL ADMINISTRATION RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Rate Schedules	At least 6 years.	<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		<u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
Tax Exempt Status Application IRS Certification Letter	Permanent (or at least as long as the Hospital's exempt status is retained).	<u>26 C.F.R. § 301.6104(d)-1(a)</u> (tax exempt application must be available on-site as long as the organization retains tax exempt status. In addition, the annual information return (Form 990, Return of Organization Exempt From Income Tax, Form 990-PF, Return of Private Foundation, or any other version of Form 990 and Form 1065) should be available for public inspection for a period of three years beginning on the date the return is required to be filed or is filed, whichever is later).

# **COMPLIANCE RECORDS**<sup>\*</sup>

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Checks (Monthly) of the List of Excluded Individuals/Entities and of the Excluded Parties List System See comments regarding monthly check requirement.	6 years.	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>42 C.F.R. § 455.436; HHS-OIG Updated Special Advisory Bulletin on the Effect of Exclusion from Participation in Federal Health Care Programs (May 8, 2013) (state Medicaid agencies are required to conduct monthly checks to identify excluded providers); 76 Fed. Reg. 5,861, 5,898 (Feb. 2, 2011) (CMS recommends that states consider making this a requirement for all providers).</li> <li>Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(W) (providers are required to search the HHS-OIG and EPLS websites monthly to capture exclusions and reinstatements of employees and contracted persons or entities that have occurred since the last search).</li> <li>03/22/13 letter from Robert Finlayson, III, then DCH Inspector General (hospitals should check exclusion lists once a month. "The discovery that the employee of a contractor is on the exclusions list could affect Medicaid payment to the hospital. That discovery would apply to employees of contractors who provide both direct and indirect patient services").</li> </ul>
Compliance Investigations/Audits (both internal and government) (for example, activity notes, memos, other items generated or collected by Compliance Office) <i>See footnote to section.</i>	6 years after resolution and discontinuation of monitoring.	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (general Federal criminal statute of limitation of 5 years).</li> <li>O.C.G.A. § 16-14-8 (Georgia RICO statute of limitation of 5 years).</li> <li>In more recent Corporate Integrity Agreements ("CIAs"), the OIG requires that documents relating to compliance with the CIA or to reimbursement from the Federal health care programs be retained for 6 years after the CIA's effective date (1 year after expiration of the 5-year CIA).</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).</li> <li>9/18/13 email from Brian Looby, then Division Chief of Healthcare Facility Regulation at DCH: DCH has no document retention policies or recommendations.</li> </ul>

# **COMPLIANCE RECORDS**\*

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Compliance Log of Prior Year (including hotline calls reporting occurrences)	6 years.	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (general Federal criminal statute of limitation of 5 years).</li> <li>O.C.G.A. § 16-14-8 (Georgia RICO statute of limitation of 5 years).</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).</li> <li>9/18/13 email from Brian Looby, then Division Chief of Healthcare Facility Regulation at DCH: DCH has no document retention policies or recommendations.</li> <li>In more recent Corporate Integrity Agreements ("CIAs"), the OIG requires that documents relating to compliance with the CIA or to reimbursement from the Federal health care programs be retained for 6 years after the CIA's effective date (1 year after expiration of the 5-year CIA).</li> </ul>
Correspondence with OIG	10 years.	<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).

# **COMPLIANCE RECORDS**<sup>\*</sup>

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
HIPAA Compliance RecordsIncluding:HIPAA privacy rule required policies and proceduresPrivacy related communications required to be in writingPrivacy practices noticesDispositions of complaints Accounting of disclosuresOther actions, activities, or 	6 years from the date of creation or the date when it was last in effect, whichever is later.	<ul> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).</li> <li>45 C.F.R. § 164.528 (patients have a right to receive an accounting of all disclosures of protected health information made by the hospital in the previous 6 years).</li> </ul>
Internal Compliance Records (for example, reports which generally summarize compliance activities to the Board of Directors or from Compliance Liaisons to the Compliance Officer)	6 years.	<ul> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>18 U.S.C. § 3282</u> (general Federal criminal statute of limitation of 5 years).</li> <li><u>O.C.G.A. § 16-14-8</u> (Georgia RICO statute of limitation of 5 years).</li> <li><u>O.C.G.A. § 10-11-2</u> (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> <li>9/18/13 email from Brian Looby, then Division Chief of Healthcare Facility Regulation at DCH: DCH has no document retention policies or recommendations.</li> <li>In more recent Corporate Integrity Agreements ("CIAs"), the OIG requires that documents relating to compliance with the CIA or to reimbursement from the Federal health care programs be retained for 6 years after the CIA's effective date (1 year after expiration of the 5-year CIA).</li> </ul>

# **COMPLIANCE RECORDS**<sup>\*</sup>

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Manuals and Forms – Outdated <u>Including</u> :	6 years from date materials replaced or updated.	O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).
Compliance Manuals (including Code of Conduct and		<u>45 C.F.R. § 164.530(j)</u> (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).
Policies and Procedures) Coding Manuals		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
Training Manuals		<u>45 C.F.R. § 164.530(j)</u> (a covered entity must maintain required HIPAA documentation, including training materials and records of trainings, for 6 years after the date of its creation or the date to be the training of the second sec
Examples of all Forms in Use		the date when it was last in effect).          18 U.S.C. § 3282 (general Federal criminal statute of limitation of 5 years).
		O.C.G.A. § 16-14-8 (Georgia RICO statute of limitation of 5 years).
		9/18/13 email from Brian Looby, then Division Chief of Healthcare Facility Regulation at DCH: DCH has no document retention policies or recommendations.
		In more recent Corporate Integrity Agreements ("CIAs"), the OIG requires that documents relating to compliance with the CIA or to reimbursement from the Federal health care programs be retained for 6 years after the CIA's effective date (1 year after expiration of the 5-year CIA).

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# **COMPLIANCE RECORDS**<sup>\*</sup>

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Minutes of Compliance Committee Meetings	Permanent.	Many organizations' document retention policies recommend retaining minutes of Compliance Committee Meetings permanently. Some organizations may prefer a less conservative approach, such as 6 years.
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (general Federal criminal statute of limitation of 5 years).
		O.C.G.A. § 16-14-8 (Georgia RICO statute of limitation of 5 years).
		9/18/13 email from Brian Looby, then Division Chief of Healthcare Facility Regulation at DCH: DCH has no document retention policies or recommendations.
		In more recent Corporate Integrity Agreements ("CIAs"), the OIG requires that documents relating to compliance with the CIA or to reimbursement from the Federal health care programs be retained for 6 years after the CIA's effective date (1 year after expiration of the 5-year CIA).

# EMERGENCY DEPARTMENT

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Emergency Department Logs (in the original or legally reproduced form in hard copy, microfilm, microfiche, optical disks, computer disks, or computer memory)	5 years.	EMTALA <u>42 U.S.C. § 1395cc(a)(1)(I)(ii)</u> ; <u>42 C.F.R. § 489.20(r)(1)</u> ; <u>CMS State Operations</u> <u>Manual, Appendix V – Part II – Interpretive Guidelines – Responsibilities of Medicare</u> <u>Participating Hospitals in Emergency Cases, Tag A-2403/C-2403</u> (transferring and receiving hospitals must maintain medical and other records related to individuals transferred to or from the hospital for a period of 5 years from the date of the transfer).
Emergency Department Medical Records	Adults:         10 years from last discharge or contact that resulted in a record.         Minors:         Until the patient's 23 <sup>rd</sup> birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer.         See Medical Records Section, p. <u>62</u> .	<ul> <li>EMTALA requires emergency department medical records be kept a minimum of 5 years, but these records will need to be kept longer per the general medical record retention requirements. <i>See Medical Records Section, p. 62.</i></li> <li>EMTALA 42 U.S.C. § 1395cc(a)(1)(I)(ii); 42 C.F.R. § 489.20(r)(1); CMS State Operations Manual, Appendix V – Part II – Interpretive Guidelines – Responsibilities of Medicare Participating Hospitals in Emergency Cases, Tag A-2403/C-2403 (transferring and receiving hospitals must maintain medical and other records related to individuals transferred to or from the hospital for a period of 5 years from the date of the transfer).</li> </ul>
Patient Index, On-Call Schedules, Staffing Schedules	5 years.	EMTALA <u>42 U.S.C. § 1395cc(a)(1)(I)(ii); 42 C.F.R. § 489.20(r)(1); CMS State Operations</u> <u>Manual, Appendix V – Part II – Interpretive Guidelines – Responsibilities of Medicare</u> <u>Participating Hospitals in Emergency Cases, Tag A-2403/C-2403</u> (transferring and receiving hospitals must maintain medical and other records related to individuals transferred to or from the hospital for a period of 5 years from the date of the transfer).
Transfer Records	5 years.	EMTALA <u>42 U.S.C. § 1395cc(a)(1)(I)(ii); 42 C.F.R. § 489.20(r)(1); CMS State Operations</u> <u>Manual, Appendix V – Part II – Interpretive Guidelines – Responsibilities of Medicare</u> <u>Participating Hospitals in Emergency Cases, Tag A-2403/C-2403</u> (transferring and receiving hospitals must maintain medical and other records related to individuals transferred to or from the hospital for a period of 5 years from the date of the transfer).

# **ENVIRONMENTAL RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Asbestos Records ( <i>e.g.</i> , building components surveys, inspections, and maintenance records; operation and maintenance plans; exposure records; records of removal of asbestos or renovation)	<ul> <li>Permanently while asbestos remains in the building.</li> <li>If asbestos is removed from the building, 5 years after removal.</li> <li>If employees have been exposed, records must be maintained for term of employment plus 30 years, regardless of whether asbestos has been removed.</li> <li>See OSHA Records, p. <u>42</u>.</li> </ul>	<ul> <li>Building components surveys, inspections, and maintenance records should be maintained for the life of the building for administrative reasons and for use with future construction projects.</li> <li><u>29 C.F.R. §§ 1910.1001(m)</u>, <u>1910.1020(d)</u> (OSHA requires employers to keep records of all employee exposure to asbestos for term of employment plus 30 years. Certain required employee medical records, which are delineated in the law, must be maintained for duration of employment plus 30 years). <i>See OSHA Records, p. <u>42</u>.</i></li> <li><u>28 U.S.C. § 2462</u> (5 year statute of limitations for civil enforcement for violation of the Clean Air Act).</li> </ul>
Disposal of Biomedical Waste	3 years.	Ga. Comp. R. & Regs. 391-3-415 (disposal of biomedical waste).         O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).         Telephone call with Barbara Howard, Environmental Engineer, phone number 404-362-2572, 10/29/2013: Georgia EPD does not have a specific record retention requirement for records that an entity generates relating to the disposal of biomedical waste. A generator of biomedical waste should keep the records ( <i>i.e.</i> , either the purchase records for the disposal bins or the waste manifest) in accordance with its own policy.
Disposal of Hazardous Materials (all records regarding disposal of hazardous waste; <i>e.g.</i> , contracts for its transportation, contracts for its ultimate destination, and analyses of quantity and substance of waste disposed)	Permanent.	CERCLA, <u>42 U.S.C. § 9607(a)(3)</u> (the entity that generates hazardous substances is strictly liable for all damages caused by release of hazardous materials). <u>Ga. Comp. R. &amp; Regs. 391-3-1108</u> ; <u>Georgia EPD, Hazardous Waste Management Guide for Georgia Hospitals (September 2003)</u> (3 year retention period for signed copies of hazardous waste manifests and weekly inspection records of hazardous waste accumulation).
Emergency Generator	Life of equipment plus 5 years. Data for the 2 most recent years must be stored on-site.	There are separate environmental regulations for each type of emergency generator ( <i>e.g.</i> , generators fueled by propane, generators fueled by diesel, generators made before 2006, etc.). Retention periods in these regulations are generally 5 years, and data for the 2 most recent years must be stored on-site. <i>See, e.g.</i> , $40 \text{ C.F.R.} \\ $ $63.10(b)(1)$ .

# ENVIRONMENTAL RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Environmental Due Diligence for Construction Projects	Due diligence records showing the hospital made "all appropriate inquiry": Permanent.	CERCLA, <u>42 U.S.C. § 9601(35)(B)</u> ; <u>40 C.F.R. § 312</u> (required due diligence to establish the innocent landowner defense to CERCLA liability for environmental cleanup).
	Endangered Species Survey, if applicable: Permanent.	16 U.S.C. § 1538(a) (unlawful taking of endangered species).
	Jurisdictional Waters Survey and Jurisdictional Determination from the Army Corps of Engineers, if applicable: Permanent.	See Clean Water Act, <u>33 U.S.C. § 1311(a)</u> ; <u>33 C.F.R. § 331.2</u> ; <u>U.S. Army Corps of Engineers</u> , <u>Regulatory Guidance Letter No. 08-02 (June 26, 2008)</u> .
Records for Equipment or Storage Tanks (records for equipment that is potentially a source of air emissions or discharge to water or land)	10 years or life of equipment plus 5 years, whichever is longer.	There are separate environmental regulations for each type of equipment that is potentially a source of air emissions or discharge to water or land ( <i>e.g.</i> , boilers, PCB transformers, hydraulic elevators, etc.). Retention periods in these regulations generally vary between 2-5 years.
Hospital/Medical/Infectious Waste Incinerators	Life of equipment plus 5 years.	40 C.F.R. § 60.58c(b) (required 5-year retention period of certain reports).
Mold Contamination and Abatement Records	At least 2 years, but see comments. If employees have been exposed, records must be maintained for term of employment plus 30 years, regardless of whether asbestos has been removed. <i>See OSHA Records, p. <u>42</u>.</i>	O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury). 29 C.F.R. § 1910.1020(d) (if records include records of monitoring or sampling of employee exposure to toxic substances or other hazards, OSHA generally requires retention for employees' term of employment plus 30 years). <i>See OSHA Records, p.</i> <u>42</u> .

# HOUSEKEEPING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Cleaning Logs (logs to confirm general areas of the hospital have been cleaned according to schedule)	3 years (or long enough to be able to confirm who did the work or who approved it if there are any questions on surveys or concerns regarding quality of work).	<ul> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> <li>O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>42 C.F.R. § 482.42; CMS State Operations Manual, Appendix A – Regulations and Interpretive Guidelines § 482.42, Tag A-0747 (hospitals must provide a sanitary environment to avoid sources and transmission of infections and communicable diseases. There must be an active program for the prevention, control, and investigation of infections and communicable diseases).</li> <li>CDC Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008, available at http://www.cdc.gov/hicpac/pdf/guidelines/Disinfection_Nov_2008.pdf.</li> </ul>
Cleaning Records ( <i>e.g.</i> , duty rosters, assignment sheets)	3 years.	<ul> <li>The hospital should keep these records long enough to be able to confirm who did the work if there are any questions on surveys or concerns regarding quality of work.</li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10).</li> <li>O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>42 C.F.R. § 482.42; CMS State Operations Manual, Appendix A – Regulations and Interpretive Guidelines § 482.42, Tag A-0747 (hospitals must provide a sanitary environment to avoid sources and transmission of infections and communicable diseases; there must be an active program for the prevention, control, and investigation of infections and communicable diseases).</li> <li>CDC Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008, available at http://www.cdc.gov/hicpac/pdf/guidelines/Disinfection_Nov_2008.pdf.</li> </ul>

# HOUSEKEEPING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Exterminator Records	3 years.	The hospital should keep these records long enough to be able to confirm who did the work if there are any questions on surveys or concerns regarding quality of work.
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
		<u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10).
		O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).
		<u>42 C.F.R. § 482.42; CMS State Operations Manual, Appendix A – Regulations and Interpretive</u> <u>Guidelines § 482.42, Tag A-0747</u> (hospitals must provide a sanitary environment to avoid sources and transmission of infections and communicable diseases; there must be an active program for the prevention, control, and investigation of infections and communicable diseases).
Housekeeping and Exterminator Contracts	Full term of contract plus 6 years.	O.C.G.A. § 9-3-24 (6 year statute of limitation for breach of written contract).
		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to contracts valued over \$10,000 for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

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# HOUSEKEEPING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Housekeeping Policies and Procedures – Outdated	3 years.	<ul> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> <li>O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>42 C.F.R. § 482.42; CMS State Operations Manual, Appendix A – Regulations and Interpretive Guidelines § 482.42, Tag A-0747 (hospitals must provide a sanitary environment to avoid sources and transmission of infections and communicable diseases; there must be an active program for the prevention, control, and investigation of infections and communicable diseases).</li> <li>CDC Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008, available at http://www.cdc.gov/hicpac/pdf/guidelines/Disinfection_Nov_2008.pdf.</li> </ul>

## HUMAN RESOURCES / PERSONNEL RECORDS\*

#### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Advertisements about Job Openings, Promotions, Training Programs, or Opportunities for Overtime Work	Medical staff positions: 6 years. Non-medical staff positions: 1 year. <i>See footnote to section.</i>	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions, including Anti-Kickback).</li> <li>29 C.F.R. § 1627.3(b) (employers must maintain any advertisements or notices to the public or to employees relating to job openings, promotions, training programs, or opportunities for overtime work for 1 year).</li> </ul>
Accident Reports Related to Employees	5 years following the end of the calendar year the records cover.	<ul> <li>29 C.F.R. § 1904.33 (employers must maintain the OSHA 300 Log, the privacy case list, the annual summary, and the OSHA 301 Incident Report form for 5 years following the end of the calendar year that the records cover).</li> <li>29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year. If a discrimination case is brought, records must be maintained until final disposition of the case).</li> <li>O.C.G.A. § 34-9-82(a) (the right to workers' compensation shall be barred unless a claim is filed within 1 year after injury. If payment of weekly benefits has been made or remedial treatment has been furnished by the employer on account of the injury, the claim may be filed within 1 year after the date of the last remedial treatment furnished by the employer or within 2 years after the date of the last payment of weekly benefits).</li> <li>O.C.G.A. § 9-3-33 (2 year statute of limitation for personal injuries).</li> </ul>

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Applications for Employment For applications from physicians, see Medical Staff Records, p. <u>66</u> .	Accepted Applications: Term of employment plus 1 year. Rejected Applications: At least 1 year. <i>See footnote to section.</i>	<ul> <li>For rejected applications, hospitals may consider maintaining these records for a length of time that would cover re-application by such applicants, which may be more than 1 year.</li> <li><u>29 C.F.R. § 1627.3(b)</u> (job applications, resumes, and any other form of employment inquiry submitted in response to a job posting must be retained for 1 year from the date of the personnel action to which any records relate).</li> <li><u>29 C.F.R. § 1602.14</u> (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4012</u> (the hospital must maintain personnel records that contain the employment application or resume).</li> </ul>
Benefit Records Pension Plan Records ( <i>e.g.</i> , including administrative materials, beneficiary materials, IRS forms, plan, plan summary, plan amendments, COBRA documents, long term disability claims granted and denied)	Plan and Plan Amendments: Permanent. Other Benefit and Pension Plan Records: 6 years after filing date of documents that used the information.	<ul> <li>Plan and Plan Amendments should be retained permanently for historic purposes.</li> <li>29 U.S.C. § 1027 (ERISA requires a retention period of 6 years after filing date of documents that used the information).</li> <li>29 C.F.R. § 1627.3(b) (employee benefit plans, including pension and insurance records, must be retained for 1 year from the date of the personnel action to which any records relate).</li> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li>O.C.G.A. § 48-7-111 (records of remunerations to employees must be maintained for 4 years after the tax is due or the tax is paid, whichever is later).</li> <li>29 C.F.R. § 1620.32; 29 C.F.R. §§ 516.2, 516.11-12 (2 year retention period for wage data, explanations of pay differentials, and other required information to show compliance with the Equal Pay Act).</li> <li>29 C.F.R. § 516.5 (3 year retention requirement for payroll records, collective bargaining agreements, and related documentation).</li> </ul>

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Checks (Monthly) of the List of Excluded Individuals/Entities and of the Excluded Parties List System See comments regarding monthly check requirement.	6 years.	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>42 C.F.R. § 455.436; HHS-OIG Updated Special Advisory Bulletin on the Effect of Exclusion from Participation in Federal Health Care Programs (May 8, 2013) (state Medicaid agencies are required to conduct monthly checks to identify excluded providers); 76 Fed. Reg. 5,861, 5,898 (Feb. 2, 2011) (CMS recommends that states consider making this a requirement for all providers).</li> <li>Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(W) (providers are required to search the HHS-OIG and EPLS websites monthly to capture exclusions and reinstatements of employees and contracted persons or entities that have occurred since the last search).</li> <li>03/22/13 letter from Robert Finlayson, III, then DCH Inspector General (hospitals should check exclusion lists once a month. "The discovery that the employee of a contractor is on the exclusions list could affect Medicaid payment to the hospital. That discovery would apply to employees of contractors who provide both direct and indirect patient services").</li> </ul>
Collective Bargaining Agreements and Related Documentation	Duration of agreement plus 3 years.	<u>29 C.F.R. § 516.5</u> (3 year retention requirement for payroll records, collective bargaining agreements, and related documentation).
Complaints of Handicap Discrimination and Relevant Employment Records of the Charging Party and Employees in Similar Positions	3 years.	<u>29 C.F.R. § 32.49</u> (programs that receive federal financial assistance must maintain records related to complaints of handicap discrimination for 3 years).

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Contracts of Employment For contracts with physicians, see Medical Staff Records, p. <u>66</u> .	Contract term plus 6 years.	<ul> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).</li> <li>29 C.F.R. § 516.5 (3 year retention requirement for payroll records, collective bargaining agreements, and related documentation, including some employment contracts).</li> <li>29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year. If a discrimination case is brought, records must be maintained until final disposition of the case).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-4012 (the hospital must maintain personnel records that contain the employment application or resume, dates of hire and position changes, job descriptions, all evaluations of performance or competencies since the date of hire or at least the last 5 years, credible evidence of current registration, license, or certification, evidence of completion of inservice training as required by the hospital, and evidence of completion of any requirements of the occupational health program at the hospital).</li> </ul>
Correspondence with Employment Agencies	1 year from date job order submitted. See footnote to section.	29 C.F.R. § 1627.3(b) (job orders submitted by the employer to an employment agency for recruitment of personnel must be retained for 1 year).

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Disciplinary Action Records for Non-Physician Staff For disciplinary action records for physicians, see Medical Staff Records, p. <u>66</u> .	Term of employment plus 6 years.	<ul> <li>Collective Bargaining Agreements may specify a retention period for these records.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>O.C.G.A. § 9-3-24</u> (6 year statute of limitations for breach of written contract); <u>O.C.G.A. § 9-3-25</u> (4 year statute of limitation for breach of oral contract).</li> <li><u>29 C.F.R. § 1627.3(b)</u> (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate).</li> <li><u>29 C.F.R. § 1602.14</u> (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4012</u> (the hospital must maintain personnel records that contain the employment application or resume, dates of hire and position changes, job descriptions, all evaluations of performance or competencies since the date of hire or at least the last 5 years, credible evidence of current registration, license, or certification, evidence of completion of inservice training as required by the hospital, and evidence of completion of any requirements of the occupational health program at the hospital).</li> </ul>
Employee Background Checks	Term of employment plus 6 years.	<ul> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose).</li> <li><u>O.C.G.A. § 9-3-33</u> (2 year statute of limitations for personal injury).</li> </ul>

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
DESCRIPTION         Employee Certification and Qualifications         (certification, licenses, etc.)         For certification records for physicians, see Medical Staff Records, p. <u>66</u> .	Term of employment plus 6 years.	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>29 C.F.R. § 1627.3(b) (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate).</li> <li>29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year. If a discrimination case</li> </ul>
		is brought, records must be maintained until final disposition of the case). <u>Ga. Comp. R. &amp; Regs. 111-8-4012</u> (the hospital must maintain personnel records that contain the employment application or resume, dates of hire and position changes, job descriptions, all evaluations of performance or competencies since the date of hire or at least the last 5 years, credible evidence of current registration, license, or certification, evidence of completion of in- service training as required by the hospital, and evidence of completion of any requirements of the occupational health program at the hospital).

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Employee Handbooks and Policy and Procedure Manuals – Outdated	6 years from the date it when it was last in effect.	O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract. The Employee Handbooks should be maintained for this period for any claim that the Handbook constituted a contract between the employer and employee).
		<u>45 C.F.R. § 164.530(j)</u> (a covered entity must maintain required HIPAA documentation, including training materials and records of trainings, for 6 years after the date of its creation or the date when it was last in effect).
		29 C.F.R. § 825.500 (3 year retention requirement for records required under the Family and Medical Leave Act, including payroll data, dates FMLA leave is taken, and documents describing employee benefits or employer policies and practices regarding leave).
		29 C.F.R. § 1627.3(b) (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate. Employers must also maintain employee benefit plans, copies of any seniority systems and merit systems for at least 1 year after the plans are terminated).
Employment Eligibility Verification Forms (USCIS Form I-9)	3 years after the date of hire or 1 year after termination, whichever is longer.	<u>8 C.F.R. § 274a.2(b)(2)(i)(A)</u> (employers must retain the I-9 for all employees for 3 years after the date of hire or 1 year after termination, whichever is longer).
Equal Pay Records	3 years from time record is created.	<u>29 C.F.R. § 1620.33</u> (2 year statute of limitations for action to recover unpaid wages under the Equal Pay Act; 3 year statute of limitations for an action if the violation was willful).
		29 C.F.R. § 1620.32; 29 C.F.R. §§ 516.2, 516.11-12 (2 year retention period for wage data, explanations of pay differentials, and other required information to show compliance with the Equal Pay Act).
		<u>29 C.F.R. § 1627.3(b)</u> (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate).
		29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Evaluations for Performance or Competencies	5 years.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4012</u> (the hospital must maintain all evaluations of performance or competencies since the date of hire or at least the last 5 years).</li> <li><u>29 C.F.R. § 1627.3(b)</u> (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate).</li> <li><u>29 C.F.R. § 1602.14</u> (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).</li> </ul>
Family Medical Leave Act Records	3 years.	29 C.F.R. § 825.500 (3 year retention requirement for records required under the Family and Medical Leave Act, including payroll data, dates FMLA leave is taken, and documents describing employee benefits or employer policies and practices regarding leave).
Grievance Records (general employee grievances or complaints) Dispute Resolution Records	Term of employment plus 3 years.	The grievance records should be retained for the length that the current Collective Bargaining Agreement is in place between the employer and the Union, typically three years. Grievances or complaints of employees should be maintained for the same amount of time as personnel records. 29 C.F.R. § 1627.3(b) (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate). 29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Job Classifications – Outdated	3 years.	<ul> <li><u>29 C.F.R. § 1620.32; 29 C.F.R. §§ 516.2, 516.11-12</u> (2 year retention period for wage data, explanations of pay differentials, and other required information to show compliance with the Equal Pay Act; 3 year statute of limitations if violation was willful).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4012</u> (the hospital must maintain personnel records that contain the employment application or resume, dates of hire and position changes, job descriptions, all evaluations of performance or competencies since the date of hire or at least the last 5 years, credible evidence of current registration, license, or certification, evidence of completion of inservice training as required by the hospital, and evidence of completion of any requirements of the occupational health program at the hospital).</li> <li><u>29 C.F.R. § 1627.3(b)</u> (advertisements or notices to the public or to employees relating to job openings, promotions, training programs, or opportunities for overtime work must be retained for 1 year from the date of the personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).</li> </ul>

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Locum Tenens Arrangements, Documents	Term of contract plus 6 years.	<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).
		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i> , 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).
		O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).
		<u>29 C.F.R. § 1627.3(b)</u> (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate).
		29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).
		42 C.F.R. § 420.302 (HHS must be granted access to contracts valued over \$10,000 for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
OSHA Records	Employee exposure records: At least 30 years with exceptions.	29 C.F.R. § 1910.1020(d)(1)(ii) Maintain exposure records at least 30 years with following exceptions:
		<ol> <li>Background data: 1 year, so long as sampling results, collection methodology (sampling plan), description of methods used, and summary of relevant background data are retained at least 30 years.</li> <li>Material safety data sheets and chemical inventory or other records concerning identity of substance or agent: No specified period so long as some record of substance or agent identity, where, and when it was used is retained at least 30 years.</li> <li>Biological monitoring results designated as exposure records by specific occupational safety and health standards: Must be maintained as required by specific standards.</li> <li><u>29 C.F.R. § 1910.1020</u> does not mandate the form, manner, or process by which employer preserves a record so long as information is preserved and retrievable, except chest x-rays files shall be preserved in original state.</li> </ol>
	Employee Medical Records: Term of employment plus 30 years.	29 C.F.R. § 1910.1020(d)(1)(i) (medical record for each employee must be retained for the duration of employment plus 30 years. Exceptions: (i) health insurance claims records maintained separately from employer's medical program and its records; (ii) certain first aid records; and (iii) records of employees who worked less than 1 year for employer if provided to employee upon termination).
		<u>29 C.F.R. § 1910.1030(h)</u> (medical records for each employee with occupational exposure to bloodborne pathogens must be maintained for the duration of employment plus 30 years).
(continued on next page)		<u>29 C.F.R. § 1910.1020</u> does not mandate the form, manner, or process by which employer preserves a record so long as information is preserved and retrievable, except chest x-rays files shall be preserved in original state.

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
OSHA Records (continued from previous page)	OSHA Logs and Summary Forms: 5 years following the end of the calendar year that the records cover.	<u>29 C.F.R. § 1904.33</u> (employers must maintain the OSHA 300 Log, the privacy case list, the annual summary, and the OSHA 301 Incident Report form for 5 years following the end of the calendar year that the records cover).
		29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).
		<u>29 C.F.R. § 1627.3(b)</u> (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate).
	Training Records for Employees with Occupational Exposure to Bloodborne Pathogens: 3 years.	29 C.F.R. § 1910.1030 (training records for employees with occupational exposure to bloodborne pathogens must be maintained for 3 years after the date of the training).

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Payroll Records ( <i>e.g.</i> , hours worked, leaves of absence, overtime, vacation, sick leave entries, time cards, wages paid, deduction authorizations, registers and journals, and garnishment records)	4 years after tax is due or paid, whichever is later.	<ul> <li>Hospitals may consider maintaining these records for longer (e.g., for 6 years) to cover any related breach of contract lawsuits.</li> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).</li> <li>26 C.F.R. § 31.6001-1(e)(2) (records relating to payments to employees and payroll taxes must be maintained for 4 years after tax filing).</li> <li>26 C.F.R. § 31.6001-2 (employers subject to FICA must keep records of all payments to employees); 26 C.F.R. § 31.6001-4 (employers subject to the Federal Unemployment Tax must keep records of all payments to employees and to the state unemployment fund).</li> <li>O.C.G.A. § 48-7-111 (records of payments to employees must be maintained for 4 years after the tax is due or the tax is paid, whichever is later).</li> <li>29 C.F.R. § 1627.3(a) (all payroll records must be retained for 3 years).</li> <li>29 C.F.R. § 516.2, 516.11-12 (employers must maintain wage data and other required information to show compliance with the Fair Labor Standards Act).</li> <li>29 C.F.R. § 516.2, 516.11-12 (employers must maintain wage data and other required information to show compliance with the Fair Labor Standards Act).</li> <li>29 C.F.R. § 516.2, 516.11-12 (employers must maintain wage data, and other required information to show compliance with the Fair Labor Standards Act).</li> <li>29 C.F.R. § 516.2, 516.11-12 (employers must maintain wage data, and other required information to show compliance with the Fair Labor Standards Act).</li> <li>29 C.F.R. § 516.2, 516.12-12 (2 year retention period for wage data, explanations of pay differentials, and other required information to show compliance with the Equal Pay Act).</li> <li>29 C.F.R. § 516.6 (2 year retention requirement for time cards, productivity records, and other records used to determine an employee's earnings, wage rate tables, and any records of additions to or deductions from wages paid).</li> <li>O.C.G.A. § 34-2-11 (1 year retention of employment records, including daily and weekly hours</li></ul>

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Personnel Records (to the extent not otherwise described in this section) See also Medical Staff Records, p. <u>66</u> .	Term of employment plus 6 years. But note longer retention requirements for (1) employee medical records and exposure records and (2) records relating to physicians. See OSHA Records, p. <u>42</u> and Medical Staff Records, p. <u>66</u> .	<ul> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). But note: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose).</li> <li>26 C.F.R. § 31.6001-1(e)(2) (records relating to payments to employees and payroll taxes must be retained for 4 years after tax filing); O.C.G.A. § 48-7-111 (records of payments to employees must be maintained for 4 years after the tax is due or the tax is paid, whichever is later).</li> <li>29 C.F.R. § 1627.3(a) (all payroll records must be retained for 3 years).</li> <li>29 C.F.R. § 825.500 (3 year retention requirement for records required under the Family and Medical Leave Act, including payroll data, dates FMLA leave is taken, and documents describing employee benefits or employer policies and practices regarding leave).</li> <li>29 C.F.R. § 516.5 (3 year retention requirement for payroll records, collective bargaining agreements, and related documentation, including some employment contracts); 29 C.F.R. § 516.23 (additional recordkeeping requirements for hospitals who compensate employees for overtime based on a work period of 14 consecutive days).</li> <li>29 C.F.R. § 516.6 (2 year retention requirement for time cards, productivity records, and other records used to determine an employee's earnings).</li> <li>O.C.G.A. § 34-2-11 (1 year retention of employment records).</li> <li>(Ga. Comp. R. &amp; Regs. 111-8-4012 (hospital must maintain personnel records that contain the employment application or resume, dates of hire and position changes, job descriptions, all evaluations of</li></ul>

\* Human resources records that are not specifically addressed herein should be retained for the term of employment plus 6 years.

## HUMAN RESOURCES / PERSONNEL RECORDS\*

#### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Substance Abuse Testing For substance abuse testing for physicians, see Medical Staff Records, p. <u>66</u> .	Term of employment plus 6 years.	<ul> <li>29 C.F.R. § 1627.3(b)(1)(v) (the results of any physical examination where such examination is considered by the employer in connection with any personnel action shall be retained for 1 year from the date of the personnel action).</li> <li>O.C.G.A. § 9-3-24 (6 year statute of limitation for breach of written contract).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> </ul>
Termination Records For termination records for physicians, see Medical Staff Records, p. <u>66</u> .	6 years after termination.	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract); O.C.G.A. § 9-3-25 (4 year statute of limitation for breach of oral contract).</li> <li>29 C.F.R. § 1627.3(b) (records relating to layoff or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate).</li> <li>29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).</li> </ul>

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

#### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Training Materials – Outdated	Trainings involving uses of medical devices: 10 years. HIPAA trainings: 6 years.	45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation, including training materials and records of trainings, for 6 years after the date of its creation or the date when it was last in effect).
	For training of patient care staff: 5 years. For training of non-patient care staff: 3 years.	<ul> <li><u>29 C.F.R. § 1627.3(b)</u> (records relating to selection for training must be retained for 1 year from the date of the personnel action to which any records relate).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4012</u> (the hospital must maintain personnel records that contain the employment application or resume, dates of hire and position changes, job descriptions, all evaluations of performance or competencies since the date of hire or at least the last 5 years, credible evidence of current registration, license, or certification, evidence of completion of inservice training as required by the hospital, and evidence of completion of any requirements of the occupational health program at the hospital).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li><u>O.C.G.A. § 9-3-72</u> (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> <li><u>O.C.G.A. § 9-3-73</u> (2 year statute of limitation for personal injury).</li> </ul>
Unemployment Compensation Payments and Records	4 years.	<ul> <li><u>26 C.F.R. §§ 31.6001-1(e)(2)</u> (records relating to payments to employees and payroll taxes must be maintained for 4 years after tax filing).</li> <li><u>26 C.F.R. § 31.6001-2</u> (employers subject to FICA must keep records of all payments to employees).</li> <li><u>26 C.F.R. § 31.6001-4</u> (employers subject to the Federal Unemployment Tax must keep records of all payments to employees and to the state unemployment fund).</li> </ul>

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## HUMAN RESOURCES / PERSONNEL RECORDS\*

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
W-2, W-4 Forms	4 years.	<ul> <li><u>26 C.F.R. §§ 31.6001-1(e)(2)</u> (records relating to payments to employees and payroll taxes must be maintained for 4 years after tax filing).</li> <li><u>26 C.F.R. § 31.6001-2</u> (employers subject to FICA must keep records of all payments to employees).</li> </ul>
Workers' Compensation Records	Accident Reports: 2 years.	<ul> <li>O.C.G.A. § 9-3-33 (2 year statute of limitation for personal injuries).</li> <li>O.C.G.A. § 34-9-80 (every injured employee shall give notice of the accident in person to the employer immediately or as soon thereafter as immediately practicable; in the event that within 30 days after the accident the employee has failed to give notice, a written notice must be given).</li> <li>O.C.G.A. § 34-9-82(a) (the right to workers' compensation shall be barred unless a claim is filed within 1 year after injury. If payment of weekly benefits has been made or remedial treatment has been furnished by the employer on account of the injury, the claim may be filed within 1 year after the date of the last remedial treatment furnished by the employer or within 2 years after the date of the last payment of weekly benefits).</li> </ul>
	<ul> <li>Benefit Claim Forms: 1 year with the following exceptions:</li> <li>(i) if the case is pending before the Worker's Compensation Board, retain records for as long as the case is active;</li> <li>(ii) if the hospital has furnished remedial treatment to the employee on account of the injury, retain claim form for 1 year after the date of the last remedial treatment furnished;</li> <li>(iii) if the hospital has paid weekly benefits to the employee, retain form for 2 years after the date of the last payment of weekly benefits.</li> </ul>	O.C.G.A. § 34-9-82(a) (the right to compensation shall be barred unless a claim is filed within 1 year after injury. If payment of weekly benefits has been made or remedial treatment has been furnished by the employer on account of the injury, the claim may be filed within 1 year after the date of the last remedial treatment furnished by the employer or within 2 years after the date of the last payment of weekly benefits).

\* Human resources records that are not specifically addressed herein should be retained for the term of employment plus 6 years.

# LABORATORY RECORDS\*

### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Autopsy Reports (Non-Forensic Autopsies)	Retention of copies should be treated as medical records and filed with the patient's medical record and maintained for 10 years. See Medical Records Generally, p. <u>64</u> .	<ul> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4018(3)(a)</u> (report of autopsy results should be included in medical record).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4018(1)(h)</u> (hospital must preserve medical records in the hospital's format of choice for "at least until the fifth anniversary of the patients' discharges"); O.C.G.A. § 31-33-2 (the 5 year rule for hospitals is an exception from the general rule, which requires all other providers to maintain records for 10 years).</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose).</li> </ul>
Blood and Blood-Testing Records, Blood Donor Records, Blood Transfusion Records, Blood Bank Records, and Immunohematology Reports	Records for blood or blood components with no expiration date: Permanent Other records: The later of: (i) 10 years after the records of processing are completed; (ii) 10 years from the date of disposition of the blood or blood component; or (iii) 6 months after the latest expiration date for the individual product.	<ul> <li><u>21 C.F.R. § 606.160</u> ("Records shall be retained for such interval beyond the expiration date for the blood or blood component as necessary to facilitate the reporting of any unfavorable clinical reactions. You must retain individual product records no less than 10 years after the records of processing are completed or 6 months after the latest expiration date for the individual product, whichever is the later date. When there is no expiration date, records shall be retained indefinitely"); <u>42 C.F.R. § 493.1105(a)(ii)</u> (hospital must retain immunohematology, blood bank, blood product, and transfusion records as specified in <u>21 C.F.R. § 606.160</u>).</li> <li><u>42 C.F.R. § 482.27</u> (a hospital must maintain records of the source and disposition of all units of blood and blood components for at least 10 years from the date of disposition in a manner that permits prompt retrieval).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-1026</u> (Immunohematology records must be retained for 5 years).</li> </ul>

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# LABORATORY RECORDS\*

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Cytology Reports	10 years.	<ul> <li>42 C.F.R. § 493.1105(a)(6)(ii) (hospital must retain Pathology test records for 10 years); 42</li> <li>C.F.R. 493.643(c)(3)(vi) (for the purpose of determining the fee for determination of program compliance, the specialty of Pathology includes Cytology and Histopathology).</li> <li>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18 (BOTH physicians who order AND providers that furnish clinical laboratory services must maintain written and electronic documents relating to written orders and certifications and requests for payments for those services for 7 years).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-1026 (Cytology records must be retained for 5 years); Ga. Comp. R. &amp; Regs. 111-8-1015 (all slides for Exfoliative Cytology should be retained for at least 5 years for comparison to later exams).</li> </ul>

# LABORATORY RECORDS\*

### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Equipment Records (e.g., calibration and validation, maintenance and inspection, operating instructions and manuals) See Environmental Records, p. 27 and Radiology and Nuclear Medicine Records, p. 104 for additional requirements for equipment that is a source of air emissions or discharges to water or land and equipment that uses radiation.	Life of equipment or 2 years, whichever is longer.	<ul> <li>Hospitals may consider maintaining these records for 10 years to cover the statute of limitations for products liability and the statute of repose for False Claims Act liability.</li> <li>42 C.F.R. § 493.1105 (quality systems assessment records and system performance specifications must be retained for the period of time the laboratory uses them, but no less than 2 years).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-1009(b) (documentation of validation of each quantitative method shall be maintained for a period of at least 2 years).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-1009(i) (a copy of each procedure should be maintained for 2 years after the procedure is discontinued).</li> <li>42 C.F.R. § 482.41(c)(2) (facilities, supplies, and equipment must be maintained to ensure an acceptable level of safety).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-4014 (hospitals must have a program to inspect, monitor, and maintain biomedical equipment, electrical equipment, and emergency power generators).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> </ul>

# LABORATORY RECORDS\*

### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Errors – Laboratory Errors	In Test Results: 5 years.	<ul> <li><u>42 C.F.R. § 493.903(d)</u> (the proficiency testing program acting as a designated agent of the government will maintain the laboratory's performance records for 5 years or such time as may be necessary for any legal proceeding).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> </ul>
	Records of inadequately prepared slides, unsatisfactory specimens, and associated notifications in Cytology labs: 5 years.	Ga. Comp. R. & Regs. 111-8-1015 (records of inadequately prepared slides, unsatisfactory specimens, and associated notifications should be retained for 5 years).
Histopathology	10 years.	$\frac{42 \text{ C.F.R. } \$ 493.1105(a)(6)(ii)}{493.643(c)(3)(vi)} \text{ (Pathology test records must be retained for 10 years); } \frac{42 \text{ C.F.R.}}{493.643(c)(3)(vi)} \text{ (for the purpose of determining the fee for determination of program compliance, the specialty of Pathology includes Cytology and Histopathology).}$
		<u>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18</u> (BOTH physicians who order AND providers that furnish clinical laboratory services must maintain written and electronic documents relating to written orders and certifications and requests for payments for those services for 7 years).
		Ga. Comp. R. & Regs. 111-8-1026 (Surgical Pathology records must be retained for 10 years). Ga. Comp. R. & Regs. 111-8-1015 (stained Histopathology slides must be retained for at least 10 years. Tissue blocks must be retained for at least 2 years).

# LABORATORY RECORDS\*

### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Orders for Clinical Laboratory Services and Related Documentation	Same retention period as other medical records: <u>Adults:</u> 10 years from last discharge or contact that resulted in a record. <u>Minors:</u> If the patient is a minor, until the patient's 23 <sup>rd</sup> birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer. <i>See Medical Records Generally, p. <u>64</u>.</i>	<ul> <li>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18 (BOTH physicians who order AND providers that furnish items of DMEPOS, clinical laboratory, imaging services, or covered home health services must maintain written and electronic documents (including the NPI of the physician who ordered/certified the services) relating to written orders and certifications and requests for payments for DMEPOS, clinical laboratory, imaging services, or covered home health services for 7 years).</li> <li>42 C.F.R. §424.535(a)(10) (provider who fails to comply with document retention requirements in 424.516(f) is <i>subject to revocation</i> of Medicare enrollment for a period of not more than 1 year).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-4018(1)(h) (hospital must preserve medical records in the hospital's format of choice for "at least until the fifth anniversary of the patients' discharges." If the patient is a minor, the records must be retained for at least 5 years past the age of majority); O.C.G.A. § 31-33-2 (the 5 year rule for hospitals is an exception from the general rule, which requires all other providers to maintain records for 10 years); Interpretive Guideline citing Ga. Comp. R. &amp; Regs. 111-8-4024(2)(c) (hospital must retain films, scans, and other images for at least 5 years after the date of the last procedure unless the release of the original image is required for the patient. For minors, they must be retained for 5 years after the minor reaches the age of majority).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> </ul>
Pathology	10 years.	42 C.F.R. § 493.1105(a)(6)(ii) (Pathology test records must be retained for 10 years).

\* This section addresses retention requirements for the documentation of laboratory tests, assays, and examinations. Retention requirements for specimens (e.g., slides, tissue blocks, etc.) are not addressed in this schedule.

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# LABORATORY RECORDS\*

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Patient Test Records and Instrument Printouts (copies maintained in addition to the patient's medical record)	Pathology Records: 10 years.	<ul> <li>42 C.F.R. § 493.1105(a)(6)(ii) (Pathology test records must be retained for for 10 years);</li> <li>42 C.F.R. 493.643(c)(3)(vi) (for the purpose of determining the fee for determination of program compliance, the specialty of Pathology includes Cytology and Histopathology).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-1026 (surgical pathology records must be retained for 10 years. Cytology records must be retained for 5 years).</li> <li>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18 (BOTH physicians who order AND providers that furnish clinical laboratory services must maintain written and electronic documents relating to written orders and certifications and requests for payments for those services for 7 years).</li> </ul>
	Other Patient Testing Records: 7 years.	<ul> <li><u>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18</u> (BOTH physicians who order AND providers that furnish clinical laboratory services must maintain written and electronic documents relating to written orders and certifications and requests for payments for those services for 7 years).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-1026</u> (Immunohematology records must be maintained for 5 years. General laboratory records must be retained for 2 years).</li> <li><u>42 C.F.R. § 493.1105(a)(3)</u> (patient test records, including instrument printouts, must be retained for 2 years).</li> </ul>

# LABORATORY RECORDS\*

### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Personnel Records as to Qualification	Term of employment plus 6 years.	<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
For certification records for physicians, see Medical Staff		Ga. Comp. R. & Regs. 111-8-1006(1)(h) (laboratories must keep current written documentation that demonstrates that each employee meets personnel qualifications).
Records, p. <u>66</u> .		<u>Ga. Comp. R. &amp; Regs. 111-8-4012</u> (the hospital must maintain personnel records that contain the employment application or resume, credible evidence of current registration, license, or certification, evidence of completion of in-service training as required by the hospital, and evidence of completion of any requirements of the occupational health program at the hospital).
		O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose).
		<u>29 C.F.R. § 1602.14</u> (all personnel records must be retained for 1 year; if a discrimination case is brought, records must be maintained until final disposition of the case).
Procedure Manuals – Outdated	2 years after the procedure has been discontinued.	<u>42 C.F.R. § 493.1251</u> (a laboratory must have written procedure manual for all tests, assays, and examinations it performs); <u>42 C.F.R. § 493.1105(a)(2)</u> (2 year retention period for test procedures).
		Ga. Comp. R. & Regs. 111-8-1009(i) (a copy of each procedure should be maintained for 2 years after the procedure is discontinued).
		These outdated materials should also be maintained for purposes of DCH, Medicare, and Joint Commission surveys.
Proficiency Testing Records and Records of Remedial Actions for an	At least 2 years after satisfactory completion of the proficiency testing.	<u>42 C.F.R. § 493.801(b)(5); 42 C.F.R. § 493.1105(a)(4)</u> (laboratories must maintain all records relating to proficiency testing for 2 years).
Unacceptable Score		<u>42 C.F.R. §§ 493.823–865</u> (for each of the laboratory subspecialties, if a laboratory receives an unsatisfactory testing event score, remedial action must be documented. Documentation must be maintained for 2 years after the date of participation in the proficiency testing).
		Ga. Comp. R. & Regs. 111-8-1023(d) (all records of proficiency testing must be maintained and available for inspection for at least 2 years).

# LABORATORY RECORDS\*

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Quality Control Records	Surgical Pathology records: 10 years.	Ga. Comp. R. & Regs. 111-8-1026(c) (Surgical Pathology records must be retained for 10 years). 42 C.F.R. § 493.1105(a)(3) (hospital must retain quality control records for 2 years).
	Immunohematology and Cytology records: 5 years.	Ga. Comp. R. & Regs. 111-8-1026 (records of Surgical Pathology must be retained for 10 years. Records of Immunohematology and Cytology must be retained for 5 years. General laboratory records and quality control records must be retained for 2 years).         42 C.F.R. § 493.1105(a)(3) (hospital must retain quality control records for 2 years).
	General laboratory quality control records: 2 years.	42 C.F.R. § 493.1105(a)(3) (hospital must retain quality control records as required by 42 C.F.R. §§ 493.1252–1289 for 2 years).
		Ga. Comp. R. & Regs. 111-8-1026(a) (general laboratory records and quality control records must be retained for 2 years).

# LABORATORY RECORDS\*

### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Request for Tests (copies maintained in addition to the patient's medical record) <i>See Medical Records, p. <u>62</u></i> .	Requests for Surgical Pathology tests: 10 years.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 111-8-1026</u> (records of Surgical Pathology must be retained for 10 years. Records of Immunohematology and Cytology must be retained for 5 years. General laboratory records and quality control records must be retained for 2 years).</li> <li><u>42 C.F.R. § 424.516(f)</u>; <u>Medicare Program Integrity Manual, Ch. 15 § 18</u> (BOTH physicians who order AND providers that furnish clinical laboratory services must maintain written and electronic documents relating to written orders and certifications and requests for payments for those services for 7 years).</li> <li><u>42 C.F.R. § 493.1105(a)(1)</u> (2 year retention requirement for requests for tests and documents supporting the requests for tests).</li> </ul>
	Requests for other tests: 7 years.	<ul> <li><u>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18</u> (BOTH physicians who order AND providers that furnish clinical laboratory services must maintain written and electronic documents relating to written orders and certifications and requests for payments for those services for 7 years).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-1026(a) and (b)</u> (records of Immunohematology and Cytology must be retained for 5 years. General laboratory records and quality control records must be retained for 2 years).</li> <li><u>42 C.F.R. § 493.1105(a)(1)</u> (2 year retention requirement for requests for tests and documents supporting the requests for tests).</li> </ul>
Sperm Bank, Embryology, and Assisted Reproductive Technology (ART) Records	10 years beyond the date of final disposition or disposal of all specimens obtained during each patient's ART cycle. Records must be retained on site for 2 years.	Ga. Comp. R. & Regs. 111-8-1017(2)(g) (ART laboratories must retain records for 10 years beyond the date of final disposition or disposal of all specimens obtained during each patient's ART cycle. Records must be retained on site for 2 years).
Tissue Bank Records	7 years.	<u>Ga. Comp. R. &amp; Regs. 111-8-1016</u> (tissue bank records, including procedures followed, donor information, and other required information, must be retained for 7 years. Storage temperature records need only be retained for 5 years).
Validation of Quantitative Methods	Period of time the method is used or 2 years, whichever is longer.	Ga. Comp. R. & Regs. 111-8-1009(b) (quantitative methods should be validated before they are used. Documentation of validation shall be maintained for the period of time that the method is used or for 2 years, whichever is longer).

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# LABORATORY RECORDS\*

#### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Waived/Exempt Screening and Monitoring Test Records	2 years.	<u>Ga. Comp. R. &amp; Regs. 111-8-1020(3)</u> (records for exempt screening and monitoring tests must be retained outside of the medical record for at least 2 years).
(copies maintained in addition to the patient's medical record)		
See also Orders for Clinical Laboratory Services and Related Documentation, p. <u>53</u> .		

# MARKETING AND PUBLIC RELATIONS RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Advertisements and Marketing Materials that are No Longer in Use ( <i>e.g.</i> , radio or television advertisements, newspaper clippings, press releases, printed materials for the general public or for limited release, media advertisements, in-house publications, sales materials, internet/email advertisements, etc.)	At least 6 years.	<ul> <li>The hospital may wish to permanently retain materials with historical value.</li> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions, including Anti-Kickback).</li> <li><u>O.C.G.A. § 9-3-31</u> (4 year statute of limitation for injuries to personalty, including actions brought under the Georgia Uniform Deceptive Trade Practices Act or the federal Lanham Act).</li> <li><u>O.C.G.A. § 10-1-401</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10).</li> <li><u>O.C.G.A. § 9-3-33</u> (2 year statute of limitation for invasion of privacy action. 1 year statute of limitation for invasion of privacy action. 1 year statute of limitation action).</li> <li><u>29 C.F.R. § 1627.3(b)</u> (employers must maintain any advertisements or notices to the public or to employees relating to job openings, promotions, training programs, or opportunities for overtime work for 1 year).</li> </ul>

# MARKETING AND PUBLIC RELATIONS RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Contracts for Advertising or Public Relations Services	Full contract term plus 6 years.	<ul> <li>O.C.G.A. § 9-3-24 (6 year statute of limitation for breach of written contracts).</li> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions, including Anti-Kickback).</li> <li>Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).</li> <li>Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).</li> <li>42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).</li> </ul>
Permission to Release Information and Use Photographs for Marketing Purposes	Full contract term plus 6 years.	<ul> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).</li> <li>O.C.G.A. § 9-3-33 (2 year statute of limitation for invasion of privacy action. 1 year statute of limitation for defamation action).</li> </ul>
Photographs (taken for marketing purposes but which are not ultimately published)	No required retention period.	The hospital may wish to permanently retain photographs with historical value.

# MARKETING AND PUBLIC RELATIONS RECORDS

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Policies and Procedures – Outdated	At least 6 years.	<ul> <li>The hospital may wish to keep these records longer for administrative purposes.</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation, including training materials and records of trainings, for 6 years after the date of its creation or the date when it was last in effect).</li> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions, including Anti-Kickback).</li> <li>O.C.G.A. § 9-3-31 (4 year statute of limitation for injuries to personalty, including actions brought under the Georgia Uniform Deceptive Trade Practices Act or the federal Lanham Act).</li> <li>O.C.G.A. § 10-1-401 (2 year statute of limitation under Fair Business Practices Act).</li> </ul>

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# MEDICAL RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Birth Certificates	An original filing is mandated with the local registrar of the county in which the birth occurred. Retention of copies should be treated as medical records of a minor and kept until the patient's 23 <sup>rd</sup> birthday. <i>See Medical Records Generally, p. <u>64</u>.</i>	<ul> <li>O.C.G.A. § 31-10-9 (certificate of birth for each live birth shall be filed with the State Office of Vital Records within five days of the birth).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-40.18(1)(h) (hospital must preserve medical records in the hospital's format of choice for "at least until the fifth anniversary of the patients' discharges"); O.C.G.A. § 31-33-2 (the 5 year rule for hospitals is an exception from the general rule, which requires all other providers to maintain records for 10 years).</li> </ul>
Cancer Registry Files (copies of cancer registry information submitted, annual reports)	10 years.	Georgia Comprehensive Cancer Registry – Policy and Procedure Manual for Reporting Facilities (hospitals must submit annual reports of new cancer diagnoses); O.C.G.A. § 31-12-2 (DPH can require reporting of certain diseases).Telephone call to Judy Andrews, Georgia Center for Cancer Statistics at Emory University, Rollins School of Public Health, phone number 404-727-8700, 12/03/2013 (Ms. Andrews confirmed that the state cancer registry does not require a hospital to maintain the filings it makes to the registry for any specific period of time. She thought 10 years would be more than adequate. She noted that a hospital that has a specific agreement to maintain data on cancer diagnoses may keep these records longer. A hospital may also wish to maintain its own cancer registry internally, which may be kept longer than 10 years for historical purposes).
Death Certificates	An original filing is mandated with the local registrar of the county in which the death occurred. Retention of copies should be treated as medical records and filed with the patient's medical record and maintained for 10 years. <i>See Medical Records Generally, p. <u>64</u>.</i>	<ul> <li>O.C.G.A. § 31-10-15 (certificate of death must be filed with the local registrar of the county in which the death occurred or the body was found within 10 days of the death).</li> <li>Ga. Comp. R. &amp; Regs. 511-1-320 (hospital may partially complete a death certificate and give it to the funeral director for completion and filing. For deaths of infants less than age 1, the hospital shall complete the death certificate and file it with the appropriate local registrar).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-4018(1)(h) (hospital must preserve medical records in the hospital's format of choice for "at least until the fifth anniversary of the patients' discharges"); O.C.G.A. § 31-33-2 (the 5 year rule for hospitals is an exception from the general rule, which requires all other providers to maintain records for 10 years).</li> </ul>

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# MEDICAL RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Films, scans, images and reports	Same retention period as other medical records: <u>Adults:</u> 10 years from last discharge or contact that resulted in a record. <u>Minors:</u> If the patient is a minor, until the patient's 23 <sup>rd</sup> birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer. <i>See Medical Records Generally, p. <u>64</u>.</i>	<ul> <li>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18 (BOTH physicians who order AND providers that furnish items of DMEPOS, clinical laboratory, imaging services, or covered home health services must maintain written and electronic documents (including the NPI of the physician who ordered/certified the services) relating to written orders and certifications and requests for payments for DMEPOS, clinical laboratory, imaging services, or covered home health services for 7 years).</li> <li>42 C.F.R. §424.535(a)(10) (provider who fails to comply with document retention requirements in 424.516(f) is <i>subject to revocation</i> of Medicare enrollment for a period of not more than 1 year).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-4024(2)(c) (hospital must retain films, scans, and other images for at least 5 years after the date of the last procedure unless the release of the original image is required for the patient. For minors, they must be retained for 5 years after the minor reaches the age of majority).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> </ul>
Index to Medical Records/Card Files	Permanent.	The index to medical records and card files may be helpful for administrative and historical purposes.

# MEDICAL RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Medical Records Generally	Adults: 10 years from last discharge or contact that resulted in a record. <u>Minors:</u> Until the patient's 23 <sup>rd</sup> birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer.	Ga. Comp. R. & Regs. 111-8-4018(1)(h) (a hospital must preserve medical records in the hospital's format of choice "at least until the fifth anniversary of the patients' discharges." If the patient is a minor, the records must be retained until the minor is 23 (5 years after majority)); O.C.G.A. § 31-33-2 (5 year rule for hospitals is an exception to the general rule that requires all other providers to maintain records for 10 years); Interpretive Guideline citing Ga. Comp. R. & Regs. 290-9-718, recodified to Ga. Comp. R. & Regs. 111-8-4018 (age of majority is 18). Ga. Comp. R. & Regs. 360-302(16)(a) (unprofessional conduct for which a physician can be subject to discipline includes failure to maintain patient records for a period of at least 10 years after the patient's last office visit).
	While the Georgia hospital regulations arguably allow for a shorter retention period, most hospitals retain and other sources recommend retaining medical records as proposed above.	<u>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18</u> (BOTH physicians who order AND providers that furnish items of DMEPOS, clinical laboratory, imaging services, or covered home health services must maintain written and electronic documents (including the NPI of the physician who ordered/certified the services) relating to written orders and certifications and requests for payments for those items and services for 7 years).
		<u>42 C.F.R. § 482.24(b)(1); Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3</u> (medical records must be retained in their original or legally reproduced form for at least 5 years).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(R) (providers must retain Medicaid records for 6 years after the date of service. Records meeting the secure electronic signature requirements are acceptable).
		42 C.F.R. 485.638(c) (critical access hospitals must maintain medical records for at least 6 years from the date of last entry or if the records may be needed in any pending proceeding).
		31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i> , 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases); O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).
		Contracts with payors may have specific retention requirements for medical records. For example, Medicare HMO contracts often require a document retention period of 10 years, and some Tricare agreements that require specific retention periods.

# MEDICAL RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Orders of DMEPOS, clinical laboratory, imaging services, or covered ordered/certified home health services which the hospital provided or a physician in the hospital ordered	Same retention period as other medical records: <u>Adults:</u> 10 years from last discharge or contact that resulted in a record. <u>Minors:</u> If the patient is a minor, until the patient's 23 <sup>rd</sup> birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer. <i>See Medical Records Generally, p. <u>64</u>.</i>	<ul> <li>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18 (BOTH physicians who order AND providers that furnish items of DMEPOS, clinical laboratory, imaging services, or covered home health services must maintain written and electronic documents (including the NPI of the physician who ordered/certified the services) relating to written orders and certifications and requests for payments for DMEPOS, clinical laboratory, imaging services, or covered home health services for 7 years).</li> <li>42 C.F.R. §424.535(a)(10) (provider who fails to comply with document retention requirements in 424.516(f) is <i>subject to revocation</i> of Medicare enrollment for a period of not more than 1 year).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-4018(1)(h) (hospital must preserve medical records in the hospital's format of choice for "at least until the fifth anniversary of the patients' discharges." If the patient is a minor, the records must be retained for at least 5 years past the age of majority); O.C.G.A. § 31-33-2 (the 5 year rule for hospitals is an exception from the general rule, which requires all other providers to maintain records for 10 years); Interpretive Guideline citing Ga. Comp. R. &amp; Regs. 111-8-40.24(2)(c) (hospital must retain films, scans, and other images for at least 5 years after the date of the last procedure unless the release of the original image is required for the patient. For minors, they must be retained for 5 years after the minor reaches the age of majority).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> </ul>

# MEDICAL STAFF RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Medical Staff Records	At least 30 years.	Hospitals should retain medical staff records for a sufficient period to cover the length of time for a practitioner's career so that the records are accessible if the practitioner reapplies to the
Including: Medical Staff Personnel Files		medical staff. For example, maintaining peer review files for 30 to 50 years would likely cover this time period. There is a documented case in which a practitioner reapplied for medical staff privileges 18 years after being removed from the same medical staff.
Resident, Intern, and Fellow Personnel Files		No specific federal or state record retention requirements for these records beyond those for all personnel records have been identified. Some sources reviewed include Medicare Conditions of Participation (42 C.F.R. § 482.22), National Practitioner Data Bank Regulations (45 C.F.R. Part
Credentialing and Certification Files		60), and Georgia Composite Medical Board Licensing Laws.
Medical Staff Applications (accepted and rejected)		O.C.G.A. § 43-34-174(b) (hospital must maintain a current copy of the licensing certificate for each physician who practices in the hospital).
Medical Staff Committee Records (including minutes, reports, etc.)		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
Impaired Physician Files		O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).
Peer Review Files		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
For peer review or other quality assurance records not related to an individual physician, see Quality Assurance Records, p. <u>19</u> .		O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i> , 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases); O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).
		29 C.F.R. § 1627.3(b) (records relating to promotion, demotion, transfer, selection for training, layoff, recall, or discharge of an employee must be retained for 1 year from the date of the personnel action to which any records relate).
		29 C.F.R. § 1602.14 (all personnel records must be retained for 1 year. If a discrimination case is brought, records must be maintained until final disposition of the case).

# NURSING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Meeting Minutes	Quality assurance meeting minutes: 6 years. See Quality Assurance Records, p. <u>19</u> . Administrative meeting minutes: 3 years.	<ul> <li>Hospitals may consider keeping quality assurance records for 10 years to cover the statute of limitations for products liability and the statute of repose for False Claims Act liability.</li> <li>Although arguably not discoverable, quality assurance meeting records may be helpful to hospital and defense counsel in assessing malpractice claims and suits. In addition, the hospital may wish to consider keeping these records longer to access quality assurance records for trending and other administrative purposes.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li><u>O.C.G.A. § 9-3-72</u> (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> <li><u>O.C.G.A. § 10-11-2</u> (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years)</li> </ul>
Operating Room Records and Charge Sheets	10 years. See Medical Records Generally, p. <u>64</u> .	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> </ul>

# NURSING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Organ Donation Logs	10 years after date of transplant, distribution, disposition or expiration of donor's tissue.	<ul> <li><u>21 C.F.R. § 1270.33(h)</u> (records concerning suitability of donor shall be retained for 10 years beyond date of transplantation, distribution, disposition, or expiration, whichever is latest).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-2807(3)</u> (6 year retention period for eye bank records).</li> </ul>
Patient Logs (logs of patient names, admission and discharge dates, and physician names which are not part of the medical record)	Emergency Department Logs: 5 years. See Emergency Department Logs, p. <u>26</u> . Logs for other departments: 3 years.	<ul> <li>EMTALA <u>42 U.S.C. 1395cc(a)(1)(I)(ii); 42 C.F.R. 489.20(r)(1); CMS State Operations Manual, Appendix V – Part II – Interpretive Guidelines – Responsibilities of Medicare Participating Hospitals in Emergency Cases, Tag A-2403/C-2403 (transferring and receiving hospitals must maintain medical and other records related to individuals transferred to or from the hospital for a period of 5 years from the date of the transfer).</u></li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>
Policies and Procedures – Outdated	Policies involving uses of medical devices: 10 years. Other policies: 6 years.	<ul> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> </ul>

# NURSING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Pump Records (e.g., calibration, maintenance and inspection, operating instructions and manuals) See Environmental Records, p. <u>27</u> for additional requirements for equipment that is a source of air emissions or discharges to water or land.	10 years or life of equipment plus 5 years, whichever is longer.	<ul> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>42 C.F.R. § 482.41(c)(2) (facilities, supplies, and equipment must be maintained to ensure an acceptable level of safety).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-4014 (hospitals must have a program to inspect, monitor, and maintain biomedical equipment, electrical equipment, and emergency power generators).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> </ul>

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# NURSING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Quality Assurance Records	6 years. For quality assurance records that are Medical Staff Records, <i>see Medical Staff Records</i> , <i>p</i> . <u>66</u> .	<ul> <li>Hospitals may consider keeping these records for 10 years to cover the statute of limitations for products liability and the statute of repose for False Claims Act liability.</li> <li>Although arguably not discoverable, quality assurance meeting records may be helpful to hospital and defense counsel in assessing malpractice claims and suits. In addition, the hospital may wish to consider keeping these records longer to access quality assurance records for trending and other administrative purposes.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>O.C.G.A. § 51-1-11</u> (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); <u>O.C.G.A. § 11-2-725</u> (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); <u>O.C.G.A. § 9-3-33</u> (2 year statute of limitations for personal injury).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li><u>O.C.G.A. § 9-3-72</u> (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> </ul>

# NURSING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Refrigerator Temperature Records (for refrigerators where blood, drugs, organs, etc. are stored)	5 years.	<ul> <li>Hospitals may consider keeping these records for 10 years to cover the statute of limitations for products liability.</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-1016</u> (storage temperature records for tissue banks must be retained for 5 years).</li> <li><u>O.C.G.A. § 51-1-11</u> (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); <u>O.C.G.A. § 11-2-725</u> (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); <u>O.C.G.A. § 9-3-33</u> (2 year statute of limitations for personal injury).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> </ul>
Staffing Patterns and Schedules	5 years.	<ul> <li>Plaintiffs often seek staffing records during discovery.</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose);</li> <li>O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> </ul>

# NURSING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Sterilization Records and Graphs, Including Autoclaves See Environmental Records, p. <u>27</u> , for additional requirements for equipment that is a source of air emissions or discharges to water or land.	10 years.	<ul> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> <li>42 C.F.R. § 482.42; CMS State Operations Manual, Appendix A – Regulations and Interpretive Guidelines § 482.42; Tag A-0747 (hospitals must provide a sanitary environment to avoid sources and transmission of infections and communicable diseases. There must be an active program for the prevention, control, and investigation of infections and communicable diseases).</li> <li>CDC Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008, available at http://www.cdc.gov/hicpac/pdf/guidelines/Disinfection_Nov_2008.pdf.</li> </ul>
Training Materials for Nursing Staff – Outdated	Trainings involving uses of medical devices: 10 years. HIPAA trainings: 6 years. Other trainings: 5 years.	<ul> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation, including training materials and records of trainings, for 6 years after the date of its creation or the date when it was last in effect).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); McCord v. Lee, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> </ul>

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## **PHARMACY RECORDS\***

#### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Adverse Drug Reaction Reports	5 years.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 480-1306(9)</u> (adverse drug reaction reports must be readily available for inspection).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> </ul>
Alcohol Inventory – Records Pertaining to Ethyl Alcohol and Tax Free Alcohol	3 years.	Ga. Comp. R. & Regs. 480-1306(9)(alcohol and flammables reports must be readily available for inspection).27 C.F.R. § 22.164(a)(records relating to tax free alcohol must be retained for 3 years and must be kept on-site); 27 C.F.R. § 22.165(a) (records may be kept in any form that accurately reproduces the original record and that forms a durable medium for reproducing and preserving the original record).27 C.F.R. § 22.161 (records that must be retained include records reflecting receipt, shipment, usage, destruction and claims relating to tax-free alcohol); 27 C.F.R. § 22.162 (semi-annual inventory of tax-free alcohol must be retained).The federal regulation requiring that tax free alcohol records be retained for 3 years permits the appropriate Alcohol and Tobacco Tax and Trade ("TTB") officer to add an additional 3 years period to the retention period. 27 C.F.R. § 22.164. Marilyn Brinker, a TTB Agent for the Atlanta region (202-453-3147), confirmed in a telephone call on January 14, 2014 that records 
Automated or Robotic Pharmacy Systems Records	2 years.	Ga. Comp. R. & Regs. 480-1019(d) (an electronic or hard copy record of medications produced by an automated or robotic pharmacy system must be maintained for 2 years. The records should include identification of the person stocking/filling the system and, if a pharmacy intern or registered pharmacy technician, the name of the pharmacist providing the supervision). Ga. Comp. R. & Regs. 480-2703 (records of dispensing original and refill prescriptions must be retained for 2 years).

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Committee Minutes (e.g., Pharmacy and Therapeutics Committee, Pharmacy Nursing Liaison Committee, Nutrition Support Committee)	Quality assurance meeting minutes: 6 years. See Quality Assurance Records, p. <u>19</u> . Administrative meeting minutes: 3 years.	<ul> <li>Hospitals may consider keeping quality assurance records for 10 years to cover the statute of limitations for products liability and the statute of repose for False Claims Act liability.</li> <li>Although arguably not discoverable, quality assurance meeting records may be helpful to hospital and defense counsel in assessing malpractice claims and suits. In addition, the hospital may wish to consider keeping these records longer to access quality assurance records for trending and other administrative purposes.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> <li><u>O.C.G.A. § 51-1-11</u> (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); <u>O.C.G.A. § 11-2-725</u> (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); <u>O.C.G.A. § 9-3-33</u> (2 year statute of limitations for personal injury).</li> <li><u>O.C.G.A. § 10-11-2</u> (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Controlled Substances: Records of Distributions and Purchases	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li>21 C.F.R. § 1304.04(a) (controlled substances records must be retained for at least 2 years); 21 C.F.R. § 1304.04(b) (records must be retained on-site); 21 C.F.R. § 1304.04(c) (registrants may maintain records on an in-house computer system); 21 C.F.R. § 1304.04(b) (prescription records may be maintained on off-site computers if the records are readily retrievable in-house and comply with 21 C.F.R. § 1311).</li> <li>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(1) (inventories and records of all controlled substances listed in Schedules I and II must be maintained separately from all other records of the pharmacy).</li> <li>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)–(3) (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy or in such form that the information required is "readily retrievable" from other pharmacy records).</li> <li>O.C.G.A. § 16-13-39; 21 C.F.R. § 1304.22(c); 42 C.F.R. § 482.25(a)(3) (complete and accurate records must be kept reflecting all controlled substances on hand, received, sold, dispensed or otherwise disposed of).</li> <li>DEA Pharmacist's Manual, Section VI (all records concerning controlled substances must be maintained for at least 2 years) (records of dispensing original and refill prescriptions must be retained for 2 years).</li> <li>Ga. Comp. R. &amp; Regs. 480-2705 (a pharmacy may use an automated data processing system for purposes of the drugs dispensed if certain requirements set forth in Ga. Comp. R. &amp; Regs. 480-2705 (a pharmacy may use an automated data processing system for purposes of the drugs dispensed if certain requirements set forth in Ga. Comp. R. &amp; Regs. 480-2705 (are met).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of</li></ul>

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Controlled Substances: Inventory	2 years.	Ga. Comp. R & Regs. 480-1306(6)(e) (hospital pharmacies must maintain a "perpetual" inventory of Schedule II substances and accountability of such drugs must be by a Proof of Use form).         21 U.S.C. § 827(a)(1); 21 C.F.R. § 1304.11(c); Ga. Comp. R. & Regs. 480-1306(9) (registrants must do a biennial inventory of controlled substances and maintain the records readily accessible and on-site for 2 years).
		<ul> <li>21 C.F.R. § 1304.04(a) (controlled substances records must be retained for at least 2 years);</li> <li>21 C.F.R. § 1304.04(b) (records must be retained on-site); 21 C.F.R. § 1304.04(c) (registrants may maintain records on an in-house computer system).</li> <li>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(1) (inventories, records, and prescriptions of all controlled substances listed in Schedules I and II must be maintained separately from all other records of the pharmacy).</li> <li>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)–(3) (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy or in such form that the information required is "readily retrievable" from other pharmacy records).</li> </ul>
		DEA Pharmacist's Manual, Section VI (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).

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## **PHARMACY RECORDS**\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Controlled Substances: Proof of Use Forms	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li><u>Ga. Comp. R. &amp; Regs. 480-1306(6)(a)</u> (proof of use of controlled substances and such other drugs as may be specified by an appropriate committee of the hospital must be submitted to the pharmacy on forms provided by the pharmacy).</li> <li><u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained for at least 2 years); <u>21 C.F.R. § 1304.04(b)</u> (records must be retained on-site); <u>21 C.F.R. § 1304.04(c)</u> (registrants may maintain records on an in-house computer system); <u>21 C.F.R. § 1304.04(h)(5)</u> (prescription records may be maintained on off-site computers site the records are readily retrievable in-house and comply with 21 C.F.R. § 1311).</li> <li>21 U.S.C. § 827(b); <u>21 C.F.R. § 1304.04(h)(1)</u> (inventories, records, and prescriptions of all controlled substances listed in Schedules I and II must be maintained separately from all other records of the pharmacy).</li> <li><u>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)-(3)</u> (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy).</li> <li><u>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)-(3)</u> (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy or in such form that the information required is "readily retrievable" from other pharmacy records).</li> <li><u>Ga. Comp. R &amp; Regs. 480-1306(6)(e)</u> (hospital pharmacies must maintain a "perpetual" inventory of Schedule II substances and accountability of such drugs must be by a Proof of Use form).</li> <li><u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li></ul>

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Controlled Substances: Schedule I or II – Order Form (DEA Form 222) for Schedule I or II Controlled Substances	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li><u>21 C.F.R. § 1305.13(a)</u> (a purchaser of Schedule I or Schedule II controlled substances must retain Copy 3 of each order form).</li> <li><u>21 C.F.R. § 1305.15(d)</u> (a purchaser must also retain all copies of each unaccepted or defective order form and each statement attached thereto).</li> <li><u>21 C.F.R. § 1305.17(c)</u> (DEA Form 222 must be maintained separately from all other records and must be retained for 2 years).</li> <li><u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> </ul>

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Controlled Substances: Schedule II – Partially-Filled Prescription for Schedule II Controlled Substances for Patients in Long Term Care Facilities or Who are Terminally III	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li><u>21 C.F.R. § 1306.13(b)</u> (for each partial filling, the dispensing pharmacist shall record on the back of the prescription (or on another appropriate record, uniformly maintained, and readily retrievable) the date of the partial filling, quantity dispensed, remaining quantity authorized to be dispensed, and the identification of the dispensing pharmacist); <u>21 C.F.R. § 1306.13(c)</u> (these records may be computerized if certain requirements are met).</li> <li><u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained for at least 2 years); <u>21 C.F.R. § 1304.04(b)</u> (records must be retained on-site); <u>21 C.F.R. § 1304.04(c)</u> (registrants may maintain records on an in-house computer system); <u>21 C.F.R. § 1304.04(h)(5)</u> (prescription records may be maintained on off-site computers if the records are readily retrievable in-house and comply with 21 C.F.R. § 1311).</li> <li><u>21 L.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(1)</u> (inventories, records, and prescriptions of all controlled substances listed in Schedules I and II must be maintained separately from all other records of the pharmacy).</li> <li><u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li> <li><u>0.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>0.C.G.A. § 9-3-71</u> (dr minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in <u>0.C.G.A. § 9-3-71</u> applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> </ul>

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Controlled Substances: Schedule II, III, IV or V – Record Book of Schedule II-V Substances that do NOT Require a Prescription that are Dispensed by the Pharmacy	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li><u>21 C.F.R. § 1306.26</u> (records must be kept for all non-prescription Schedule II, III, IV or V controlled substances that are dispensed).</li> <li><u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained for at least 2 years); <u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained on-site); <u>21 C.F.R. § 1304.04(c)</u> (registrants may maintain records on an in-house computer system).</li> <li><u>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(1)</u> (inventories, records, and prescriptions of all controlled substances listed in Schedules I and II must be maintained separately from all other records of the pharmacy).</li> <li><u>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)-(3)</u> (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy or in such form that the information required is "readily retrievable" from other pharmacy records).</li> <li><u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-71</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> </ul>

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Controlled Substances: Schedule III & IV – Medication Records that List Refills of Schedule III & IV Substances	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li><u>21 C.F.R. § 1306.22</u> (for each refill, the dispensing pharmacist shall record on the back of the prescription (or on another appropriate record, uniformly maintained, and readily retrievable) the date of filled or refilled, quantity dispensed, remaining quantity authorized to be dispensed, and the identification of the dispensing pharmacist. The pharmacy may use an automated data processing system for refill information if the requirements of 21 C.F.R. § 1306.22(b) are met).</li> <li><u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained for at least 2 years); <u>21 C.F.R. § 1304.04(b)</u> (records must be retained on-site); <u>21 C.F.R. § 1304.04(c)</u> (registrants may maintain records on an in-house computer system); <u>21 C.F.R. § 1304.04(h)(5)</u> (prescription records may be maintained on off-site computers if the records are readily retrievable in-house and comply with 21 C.F.R. § 1311).</li> <li><u>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)-(3)</u> (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy or in such form that the information required is "readily retrievable" from other pharmacy records).</li> <li><u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-71</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in <u>O.C.G.A. § 9-3-71</u> applies to an action based upon the conduct</li></ul>

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Controlled Substances: Schedule V – Sales of Schedule V Substances without a Prescription	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li><u>Ga. Comp. R. &amp; Regs. 480-1903</u> (logbooks of sales of pseudoephedrine Schedule V Controlled Substances must be retained for 2 years).</li> <li><u>Ga. Comp. R. &amp; Regs. 480-1901(b)(2)</u> (to sell, dispense, or otherwise dispose of a non-pseudoephedrine Schedule V Controlled Substance, pharmacists must create records of the date of the transaction, the name, kind, quantity and intended use of the drug).</li> <li><u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained for at least 2 years);</li> <li><u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained for at least 2 years);</li> <li><u>21 C.F.R. § 1304.04(b)</u> (records must be retained on-site); <u>21 C.F.R. § 1304.04(c)</u> (registrants may maintain records on an in-house computer system).</li> <li><u>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)-(3)</u> (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy or in such form that the information required is "readily retrievable" from other pharmacy records).</li> <li><u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> </ul>
Credit Memo for Returns Made to Manufacturer/Distributor	3 years.	<ul> <li><u>21 C.F.R. § 203.23(b)</u>; <u>21 C.F.R. § 203.20</u> (a hospital's return of a prescription drug is exempt from the prohibition of re-sale if the hospital forwards a copy of each credit memo to the manufacturer and retains a copy of each credit memo for its records).</li> <li><u>Ga. Comp. R. &amp; Regs. 480-707</u> (pharmacies can return expired drugs to the wholesale distributor for full credit or replacement for up to six months after the labeled expiration date).</li> <li><u>O.C.G.A. § 10-11-2</u> (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Dangerous Drug Records (received, purchased, sold, or dispensed)	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li>O.C.G.A. § 16-13-72(6) (records of all dangerous drugs received, purchased, sold, dispensed or otherwise disposed of must be retained for 2 years).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> <li>DEA Pharmacist's Manual, Section VI (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li> </ul>
Drug Therapy Modification – Patient Records	10 years after the drug therapy modification protocol with the physician expires.	<u>Ga. Comp. R. &amp; Regs. 480-3505(2)</u> (if a pharmacist has entered into a drug therapy modification protocol with a physician, patient records for those patients covered by the protocol must be retained for 10 years after the protocol expires).

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## **PHARMACY RECORDS**\*

#### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Emergency Kits/Night Cabinets Inventory & Related Records	2 years.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 480-1306(9)</u> (inventories of emergency kits and night cabinets must be readily available for inspection).</li> <li><u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained for at least 2 years);</li> <li><u>21 C.F.R. § 1304.04(b)</u> (records must be retained on-site); <u>21 C.F.R. § 1304.04(c)</u> (registrants may maintain records on an in-house computer system); <u>21 C.F.R. § 1304.04(h)(5)</u> (prescription records may be maintained on off-site computers if the records are readily retrievable in-house and comply with 21 C.F.R. § 1311).</li> <li><u>21 U.S.C. § 827(b)</u>; <u>21 C.F.R. § 1304.04(h)(1)</u> (inventories, records, and prescriptions of all controlled substances listed in Schedules I and II must be maintained separately from all other records of the pharmacy).</li> <li><u>21 U.S.C. § 827(b)</u>; <u>21 C.F.R. § 1304.04(h)(2)–(3)</u> (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy or in such form that the information required is "readily retrievable" from other pharmacy records).</li> </ul>
Inspection Reports – Monthly Internal Inspections	5 years. If a deficiency is noted: 5 years after the deficiency has been resolved.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 480-1310(1)</u> (the Director of Pharmacy or a qualified designee must inspect all matters within his/her jurisdiction and responsibility at least monthly and make written records of such).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> </ul>

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## **PHARMACY RECORDS**\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Inspection Reports – State and Federal Inspections	5 years. If a deficiency is noted: 5 years after the deficiency has been resolved.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 480-13-10(2)</u> (the Board of Pharmacy conducts inspections at least once every 2 years).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> </ul>

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Inventory See also Alcohol Inventory, p. 73, and Controlled Substances: Inventory, p. 76.	Alcohol Inventory: 3 years. Other Inventory: 2 years.	<ul> <li>27 C.F.R. § 22.164 (records relating to tax free alcohol must be retained for 3 years and must be kept on-site); 27 C.F.R. § 22.165 (records may be kept in any form that accurately reproduces the original record and that forms a durable medium for reproducing and preserving the original record).</li> <li>Ga. Comp. R. &amp; Regs. 480-1306(9) (inventories of the pharmacy must be readily available for inspection).</li> <li>O.C.G.A. § 16-13-39; 21 C.F.R. § 1304.22(c); 42 C.F.R. § 482.25(a)(3) (complete and accurate records must be kept reflecting all controlled substances on hand, received, sold, dispensed or otherwise disposed of).</li> <li>21 C.F.R. § 1304.04(a) (controlled substances records must be retained for at least 2 years); 21 C.F.R. § 1304.04(b) (records must be retained on-site); 21 C.F.R. § 1304.04(c) (registrants may maintain records on an in-house computer system); 21 C.F.R. § 1304.04(h)(5) (prescription records may be maintained on off-site computers if the records are readily retrievable in-house and comply with 21 C.F.R. § 1301.04(h)(1) (inventories, records, and prescriptions of all controlled substances listed in Schedules I and II must be maintained separately from all other records of the pharmacy).</li> <li>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)-(3) (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy).</li> <li>21 U.S.C. § 827(b); 21 C.F.R. § 1304.04(h)(2)-(3) (inventories, records, and prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy erecords).</li> <li>Ga. Comp. R. &amp; Regs. 480-1306(6)(e) (hospital pharmacies must maintain a "perpetual" inventory of Schedule II substances is required and accountability of such drugs must be by a proof of use form).</li> <li>DEA Pharmacist's Manual, Section VI (all records concerning controlled substances must be maintain</li></ul>

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Invoices	Date of tax filing plus 6 years.	<ul> <li><u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute</li> </ul>
		of repose of 10 years).
		<u>18 U.S.C. § 3282</u> (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids. § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract for the sale of goods).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
		O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product).
		21 C.F.R. § 1304.04(a) (invoices for controlled substances (but not order forms) may be kept at a central location, if the pharmacy has notified the DEA of its intentions to keep central records).

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Medication Error Reports	5 years.	O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i> , 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).
Patient Profiles – Maintained in the Pharmacy	2 years from the date of the last entry in the profile record.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li>O.C.G.A. § 26-4-83; Ga. Comp. R. &amp; Regs. 480-1306(2)(d) (the patient profile or the ability to generate such profile electronically shall be under the control of the Director of Pharmacy for 2 years).</li> <li>Ga. Comp. R. &amp; Regs. 480-3101(a)(3) (a patient record must be maintained for not less than 2 years from the date of the last entry in the profile record).</li> <li>Ga. Comp. R. &amp; Regs. 480-1306(9) (patient profiles must be readily available for inspection).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> </ul>
Poison – Log of Sales of Poison	5 years.	O.C.G.A. § 26-4-161 (the book that lists the log of sales of the poisons enumerated in O.C.G.A. § 26-4-160 must be preserved for 5 years).

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
DESCRIPTION Policies and Procedures – Outdated	10 years.	<ul> <li>The hospital may wish to maintain policies for a longer period of time for historical purposes.</li> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (general Federal criminal statute of limitation of 5 years).</li> <li>O.C.G.A. § 16-14-8 (Georgia RICO statute of limitation of 5 years).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).</li> </ul>
		<u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Prescriptions (original, refill, or transferred prescriptions)	2 years.	<ul> <li>A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.</li> <li><u>Ga. Comp. R. &amp; Regs. 480-27-03</u> (records of dispensing original and refill prescriptions must be retained for 2 years).</li> <li><u>21 C.F.R. § 1304.04(a)</u> (controlled substances records must be retained for at least 2 years);</li> <li><u>21 C.F.R. § 1304.04(b)</u> (records must be retained on-site); <u>21 C.F.R. § 1304.04(c)</u> (registrants may maintain records on an in-house computer system); <u>21 C.F.R. § 1304.04(c)</u> (registrants may maintaine do noff-site computers if the records are readily retrievable in-house and comply with 21 C.F.R. § 1311).</li> <li><u>21 U.S.C. § 827(b)</u>; <u>21 C.F.R. § 1304.04(h)(1)</u> (prescriptions of all controlled substances listed in Schedules I and II must be maintained separately from all other records of the pharmacy).</li> <li><u>21 U.S.C. § 827(b)</u>; <u>21 C.F.R. § 1304.04(h)(2)-(3)</u> (prescriptions for controlled substances listed in Schedules III, IV and V must be maintained either separately from all other records of the pharmacy or in such form that the information required is "readily retrievable" from other pharmacy records).</li> <li><u>Ga. Comp. R. &amp; Regs. 480-2705</u> (a pharmacy may use an automated data processing system for purposes of the drugs dispensed if certain requirements set forth in Ga. Comp. R. &amp; Regs. 480-2705 and Ga. Comp. R. &amp; Regs. 480-2706 are met).</li> <li><u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-71</u> (and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medicati</li></ul>

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Quality Assurance Records	6 years. For quality assurance records that are Medical Staff Records, <i>see Medical Staff Records, p. <u>66</u>.</i>	<ul> <li>Hospitals may consider keeping these records for 10 years to cover the statute of limitations for products liability and the statute of repose for False Claims Act liability.</li> <li>Although arguably not discoverable, quality assurance meeting records may be helpful to hospital and defense counsel in assessing malpractice claims and suits. In addition, the hospital may wish to consider keeping these records longer to access quality assurance records for trending and other administrative purposes.</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li><u>O.C.G.A. § 51-1-11</u> (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); <u>O.C.G.A. § 11-2-725</u> (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); <u>O.C.G.A. § 9-3-33</u> (2 year statute of limitations for personal injury).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>Robinson v. Williamson</i>, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).</li> <li><u>DEA Pharmacist's Manual, Section VI</u> (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).</li> </ul>

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Recall Records (records of a manufacturer's recall)	10 years.	<u>Ga. Comp. R. &amp; Regs. 480-1306(9)</u> (the Director of Pharmacy shall develop and implement a policy and procedure to assure that all drugs within the hospital included on a recall are returned to the pharmacy for proper destruction).
		O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).
		O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); Robinson v. Williamson, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).
Remote Entry Records	2 years.	Ga. Comp. R. & Regs. 480-1304(5) (the remote entry pharmacist must maintain records of any and all records entered for the hospital for a minimum of 2 years).
Standard Ward Inventory (Floor Stock) Records and Surveys of Usage Trends	2 years.	Ga. Comp. R. & Regs. 480-1301(i)       (the Director of Pharmacy or his/her pharmacist designee must maintain a copy of the list of items on the standard ward inventory).         Ga. Comp. R. & Regs. 480-1306(10)       (records relating to the standard ward inventory, including the monthly surveys of usage trends, must be retained for 2 years).         Ga. Comp. R. & Regs. 480-1306(9)       (standard ward inventories must be readily available for inspection).

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## PHARMACY RECORDS\*

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RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Signature Logs	2 years.	A hospital may wish to retain such records for 5 years, the statute of repose for malpractice actions, to allow their use in defense of a malpractice suit.
		Ga. Comp. R. & Regs. 480-2703 (records of dispensing original and refill prescriptions must be retained for 2 years).
		Ga. Comp. R. & Regs. 480-1903 (logbooks of sales of pseudoephedrine Schedule V Controlled Substances must be retained for 2 years).
		Ga. Comp. R. & Regs. 480-1901(b)(2) (to sale, dispense, or otherwise dispose of a non- pseudoephedrine Schedule V Controlled Substance, pharmacists must create records of the date of the transaction, the name, kind, quantity and intended use of the drug).
		21 C.F.R. § 1304.04(a) (controlled substances records must be retained for at least 2 years); 21 C.F.R. § 1304.04(b) (records must be retained on-site); 21 C.F.R. § 1304.04(c) (registrants may maintain records on an in-house computer system); 21 C.F.R. § 1304.04(h)(5) (prescription records may be maintained on off-site computers if the records are readily retrievable in-house and comply with 21 C.F.R. § 1311).
		DEA Pharmacist's Manual, Section VI (all records concerning controlled substances must be maintained for at least 2 years for inspection and copying by duly authorized DEA officials).
		O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); Robinson v. Williamson, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).

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# PHYSICIAN AGREEMENT RECORDS

## Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Agreements and Contracts with Physicians	Term of contract plus 6 years.	<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
(e.g., Physician Recruitment		O.C.G.A. § 9-3-24 (6 year statute of limitation for breach of written contract).
Agreement, Consulting Agreements, Space Lease Agreements, Personnel Lease, Clinic Service Agreements, etc.)		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>42 C.F.R. § 411.357(e)</u> (Stark law provides that records of the actual costs and the passed- through amounts are to be maintained for a period of at least 6 years to satisfy the exception to the referral prohibition related to compensation arrangements).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to contracts valued over \$10,000 for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).

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# PROPERTY AND EQUIPMENT RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Building Blueprints	Permanent. Updated by architect as projects are completed.	Hospitals may consider these records invaluable. In addition, records concerning historic development could be helpful in any environmental or land use litigation.
Building Plans and Specifications	Permanent. Updated by architect as projects are completed.	Hospitals may consider these records invaluable. In addition, records concerning historic development could be helpful in any environmental or land use litigation.
Equipment Records (e.g., calibration, maintenance and inspection, operating instructions and manuals) See Environmental Records, p. 27 and Radiology and Nuclear Medicine Records, p. 104 for additional requirements for equipment that is a source of air emissions or discharges to water or land and equipment that uses radiation.	Life of equipment or 10 years, whichever is longer.	<ul> <li><u>O.C.G.A. § 51-1-11</u> (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); <u>O.C.G.A. § 11-2-725</u> (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); <u>O.C.G.A. § 9-3-33</u> (2 year statute of limitations for personal injury).</li> <li><u>42 C.F.R. § 482.41(c)(2)</u> (facilities, supplies, and equipment must be maintained to ensure an acceptable level of safety).</li> <li><u>Ga. Comp. R. &amp; Regs. 111-8-40.14</u> (hospitals must have a program to inspect, monitor, and maintain biomedical equipment, electrical equipment, and emergency power generators).</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> </ul>

# PROPERTY AND EQUIPMENT RECORDS

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Pump Records (e.g., calibration, maintenance and inspection, operating instructions and manuals) See Environmental Records, p. <u>27</u> for additional requirements for equipment that is a source of air emissions or discharges to water or land.	10 years or life of equipment plus 5 years, whichever is longer.	<ul> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>42 C.F.R. § 482.41(c)(2) (facilities, supplies, and equipment must be maintained to ensure an acceptable level of safety).</li> <li>Ga. Comp. R. &amp; Regs. 111-8-4014 (hospitals must have a program to inspect, monitor, and maintain biomedical equipment, electrical equipment, and emergency power generators).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> </ul>

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# PROPERTY AND EQUIPMENT RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Purchase Orders for Equipment	Life of the equipment or 10 years, whichever is longer.	O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product).
		<u>26 U.S.C. § 6501</u> (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note:</i> In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
		<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		O.C.G.A. § 11-2-725 (4 year statute of limitations for breach of contract for the sale of goods).
		$\frac{42 \text{ C.F.R. } \$ 420.302}{42 \text{ C.F.R. } \$ 420.302}$ (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

# **PROPERTY AND EQUIPMENT RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Recall Records (records of a manufacturer's recall)	10 years.	<u>Ga. Comp. R. &amp; Regs. 480-1306(9)</u> (the Director of Pharmacy shall develop and implement a policy and procedure to assure that all drugs within the hospital included on a recall are returned to the pharmacy for proper destruction).
		O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).
		O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); Robinson v. Williamson, 245 Ga. App. 17 (Ga. Ct. App. 2000) (statute of limitation in O.C.G.A. § 9-3-71 applies to an action based upon the conduct of a pharmacist in dispensing medication upon a doctor's prescription).
Work Orders – Internal Orders	Work orders for repair, maintenance, or calibration of equipment: Life of the equipment or 10 years, whichever is longer. Other work orders: At least 3 years.	42 C.F.R. § 482.41(c)(2) (facilities, supplies, and equipment must be maintained to ensure an acceptable level of safety).         Ga. Comp. R. & Regs. 111-8-4014 (hospitals must have a program to inspect, monitor, and maintain biomedical equipment, electrical equipment, and emergency power generators).         31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
		O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).

## **PROPERTY AND EQUIPMENT RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Work Orders – External Orders	Work orders for repair, maintenance, or calibration of equipment: Life of the equipment or 10 years, whichever is longer.	26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i> : In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i> .
	Other work orders: Date of tax filing plus 6 years.	<u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
		18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).
		Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).
		Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).
		O.C.G.A. § 11-2-725 (4 year statute of limitations for breach of contract for the sale of goods).
		<u>42 C.F.R. § 420.302</u> (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).
		O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
		O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).

## PURCHASING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Packing Slips Receiving Reports	Date of tax filing plus 6 years.	<ul> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). But note: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at any time.</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).</li> <li>Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).</li> <li>Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).</li> <li>42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).</li> <li>O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract for the sale of goods).</li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>
Price List Files	At least 4 years.	O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract for the sale of goods). O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).

## PURCHASING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
<ul> <li>Purchase Invoices, Purchase Orders, and Purchase Requests</li> <li>See also Purchase Orders for Equipment, p. <u>97</u>.</li> <li>See also Checks (Monthly) of the List of Excluded Individuals/Entities and of the Excluded Parties List System, p. <u>21</u>.</li> </ul>	Date of tax filing plus 6 years.	<ul> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).</li> <li>Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).</li> <li>Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).</li> <li>42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).</li> <li>O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract for the sale of goods).</li> <li>O.C.G.A. § 11-21 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product).</li> </ul>

## PURCHASING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Purchase Orders for Equipment See also Checks (Monthly) of the List of Excluded Individuals/Entities and of the Excluded Parties List System, p. <u>21</u> .	Life of the equipment or 10 years, whichever is longer.	<ul> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product).</li> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (5 year statute of limitation for criminal fraud actions).</li> <li>Medicare Claims Processing Manual, Ch. 1, §§ 110.1, 110.3 (5 year retention for supporting documentation for Medicare cost reports).</li> <li>Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).</li> <li>O.C.G.A. § 11-2-725 (4 year statute of limitations for breach of contract for the sale of goods).</li> <li>42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).</li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>
Returned Goods Credit	4 years.	O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract for the sale of goods).

## PURCHASING RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Supplier and Vendor Files (Internal files containing information on suppliers/vendors but not evidencing specific hospital purchases) See also Checks (Monthly) of the List of Excluded Individuals/Entities and of the Excluded Parties List System, p. <u>21</u> .	6 years or term of contract plus 4 years, whichever is longer.	<ul> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>Part I: Policies and Procedures for Medicaid/PeachCare for Kids, § 106(Z) (providers must maintain complete information about the ownership of any subcontractor with whom it had business transactions totaling more than \$25,000 during the previous 12 months and information regarding any significant business transactions between the provider and a wholly-owned supplier or between the provider and any subcontractor, during the previous 6 years).</li> <li>42 C.F.R. § 420.302 (HHS must be granted access to many contracts for goods and services and to books, documents, and records necessary to verify their costs. Retention period for this purpose is 4 years after expiration of said contracts).</li> <li>O.C.G.A. § 11-2-725 (4-year statute of limitation for breach of contract, warranty for the sale of goods).</li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>

### **RADIOLOGY AND NUCLEAR MEDICINE RECORDS**\*

#### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Afterloader Units, Teletherapy Units, and Gamma Stereotactic Radiosurgery Units	Records of Five-Year Inspection for Teletherapy and Gamma Stereotactic Surgery Units: Duration of the use of the unit.	Ga. Comp. R. & Regs. 391-3-1705(114) (records of the five-year inspections for teletherapy and gamma stereotactic radiosurgery units must be retained for the duration of the use of the unit).
(Records of installation, maintenance, adjustment, and repair, full calibrations, periodic spot- checks, and other required inspections) See also Surveys of all Therapeutic	All other records: 3 years.	Ga. Comp. R. & Regs. 391-3-1705(106)       (3 year retention period for records of the installation, maintenance, adjustment, and repair of remote afterloader units, teletherapy units, and gamma stereotactic radiosurgery units).         Ga. Comp. R. & Regs. 391-3-1705(108)       (3 year retention period for records of full calibrations of the teletherapy, remote afterloader, and stereotactic radiosurgery units).
Units, p. <u>112</u> .		Ga. Comp. R. & Regs. 391-3-1705(109)(3 year retention period for records of each periodicspot-check of teletherapy units).Ga. Comp. R. & Regs. 391-3-1705(110)(3 year retention period for records of each periodicspot-check of remote afterloader units).
		<ul> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(111)</u> (3 year retention period for records of each periodic spot-check of Gamma Stereotactic Radiosurgery units).</li> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(112)</u> (3 year retention period for records of records of additional technical requirements for mobile remote afterloader units).</li> <li><u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> </ul>
Air Sampling, Surveys, and Bioassays Results Ambient Radiation Exposure Records	Permanent.	Ga. Comp. R. & Regs. 391-3-1703(14)(g). (c)       (must retain all required forms and records regarding air sampling and release of radioactive effluents into the environment until the Department terminates each pertinent license).         Ga. Comp. R. & Regs. 391-3-1705(95)       (3 year retention period for records of surveys of ambient radiation exposure).

\* This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

### **RADIOLOGY AND NUCLEAR MEDICINE RECORDS**\*

#### Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Brachytherapy and Sealed Sources (Records of accoutability, inventory, calibration measurements, and leakage tests) See also Surveys of all Therapeutic Units, p. <u>112</u> .	3 years after the last use of the source or after the record is made, whichever is longer.	Ga. Comp. R. & Regs. 391-3-1705(103) (3 year retention period for accountability of all brachytherapy sources in storage or in use).Ga. Comp. R. & Regs. 391-3-1705(94) (3 year retention period for semi-annual physical inventory of sealed sources and brachytherapy sources).Ga. Comp. R. & Regs. 391-3-1705(104) (records of calibrations on brachytherapy sources must be retained for 3 years after the last use of the source).Ga. Comp. R. & Regs. 391-3-1705(104) (records of calibrations on brachytherapy sources must be retained for 3 years after the last use of the source).Ga. Comp. R. & Regs. 391-3-1703(14)(d) (3 year retention period after the record is made for tests for leakage or contamination of sealed sources).31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).
Directives (Records of written directives required for some nuclear medicine patients)	3 years.	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(88)</u> (3 year retention period). <u>Ga. Comp. R. &amp; Regs. 391-3-1705(19)</u> (written directives required for some nuclear medicine patients).
Disposal of Radioactive Materials	Generally: Permanent.	<u>Ga. Comp. Rules &amp; Regs. 391-3-1703(14)(i)</u> ("The licensee shall retain the records required" by the Rule "until the Department terminates each pertinent license requiring the record");
See footnote to section.	Licensed decay-in-storage material with a half-life of less than 120 days: 3 years.	Ga. Comp. R. & Regs. 391-3-1705(98) (3 year retention period for records of the disposal of licensed decay-in-storage material with a half-life of less than 120 days).
Dosimetry equipment	Permanent.	Ga. Comp. R. & Regs. 391-3-1705(107) (records of the calibration, inter-comparison, and comparisons of dosimetry equipment must be maintained for the duration of the license). <u>31 U.S.C. § 3731(b)</u> (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).

\* This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-.05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

### **RADIOLOGY AND NUCLEAR MEDICINE RECORDS\***

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Equipment Records for "Radiation Machines"	Receipt, transfer or disposal of equipment: Life of equipment plus 3 years	Ga. Comp. R. & Regs. 290-5-2207(1)(f) (required to keep records showing the receipt, transfer, or disposal of radiation machines).O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).
	Maintenance records: Life of equipment.	<u>Ga. Comp. R. &amp; Regs. 290-5-2207(1)(g)</u> (required to keep records of all major maintenance and/or modifications performed on each radiation machine and transfer said records to any subsequent owner of the equipment).
Mammography Records	10 years from last discharge or contact that resulted as a record. See Medical Records Generally, p. <u>64</u> .	<ul> <li><u>21 C.F.R. § 900.12(c)(4)(i)</u> (a facility that performs mammograms must maintain films and reports in a permanent medical record of the patient for at least 5 years, or at least 10 years if no additional mammograms of the patient are performed at the facility).</li> <li><u>42 C.F.R. § 424.516(f)</u>; <u>Medicare Program Integrity Manual, Ch. 15 § 18</u> (BOTH physicians who order AND providers that furnish imaging services must maintain written and electronic documents (including the NPI of the physician who ordered/certified the services) relating to written orders and certifications and requests for payments for imaging services for 7 years).</li> </ul>

<sup>\*</sup> This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

## **RADIOLOGY AND NUCLEAR MEDICINE RECORDS**\*

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Medical Records, not Including Mammography Records ( <i>e.g.</i> , films, scans, images and reports)	Adults: 10 years from last discharge or contact that resulted as a record. <u>Minors:</u> Until the patient's 23 <sup>rd</sup> birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer. <i>See Medical Records Generally, p. <u>64</u>.</i>	<ul> <li>EPD regulation of radioactive materials requires that some portions of the medical record be kept for a minimum of 3 years (<i>e.g.</i>, radiation dose records, records of patients released containing radioactive drugs or implants, records of exposure to pregnant or nursing mothers, etc.), but these records will need to be kept for the longer period of time required for medical records generally.</li> <li>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18 (BOTH physicians who order AND providers that furnish imaging services must maintain written and electronic documents (including the NPI of the physician who ordered/certified the services) relating to written orders and certifications and requests for payments for imaging services for 7 years).</li> <li>42 C.F.R. § 442.535(a)(10) (provider who fails to comply with document retention requirements in 424.516(f) is <i>subject to revocation</i> of Medicare enrollment for a period of not more than 1 year).</li> <li>42 C.F.R. § 482.26(d) (hospitals must retain records of radiological services, including copies of reports and printouts, films, scans, and other image records, for 5 years).</li> <li>42 C.F.R. § 482.53(d) (hospitals must retain copies of nuclear medicine records, including interpretations, consultations, and procedures, for 5 years).</li> <li>42 C.F.R. § 482.53(d) (hospitals must retain copies of nuclear medicine records, including interpretations, consultations, and procedures, for 5 years).</li> <li>42 C.F.R. § 482.53(d) (hospitals must retain copies of nuclear medicine records, including interpretations, consultations, and procedures, for 5 years).</li> <li>43 C.F.R. § 482.53(d) (hospitals must retain copies of nuclear medicine records, including interpretations, consultations, and procedures, for 5 years).</li> <li>43 C.F.R. § 482.53(d) (hospitals must retain copies of nuclear medicine records, including interpretations, consultations, and procedures for 5 years).</li> </ul>

<sup>\*</sup> This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-.05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

### **RADIOLOGY AND NUCLEAR MEDICINE RECORDS\***

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Misadministrations See footnote to section.	At least 3 years.	<ul> <li>Hospitals may consider maintaining these records for 5 years to cover the statute of repose for medical malpractice or for longer in the event of exposure to members of the public.</li> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(89)</u> (3 year retention period).</li> <li><u>O.C.G.A. § 9-3-71</u> (2 year statute of limitation for malpractice actions, 5 year statute of repose); <u>O.C.G.A. § 9-3-73</u> (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10).</li> <li><u>But note: Ga. Comp. R. &amp; Regs. 391-3-1703(14)(h)</u> (must retain all required forms and records regarding doses to individual members of the public until the Department terminates each pertinent license. Upon termination, retention obligations continue for some documents).</li> </ul>
Mobile Services See also Surveys of all Therapeutic Units, p. <u>112</u> .	3 years.	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(97)</u> (3 year retention period for documentation of administrative and technical requirements that apply to the mobile use of radioactive materials).
Occupational Radiation Exposure History	Permanent.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1703(14)(g). (e)</u> (must retain all required forms and records regarding employee exposure to radiation until the Department terminates each pertinent license. Upon termination, retention obligations continue for some documents).</li> <li><u>29 C.F.R. § 1910.1020(d)</u> (if records include records of monitoring or sampling of employee exposure to toxic substances or other hazards, OSHA generally requires retention for at least 30 years). See OSHA Records, p. <u>42</u>.</li> </ul>
Records of Packages Received Containing Radioactive Materials	3 years.	<u>Ga. Comp. R. &amp; Regs, 391-3-1703(14)(c), (12)(f)(2)</u> (3 year retention period after record is made).
Records Regarding Pregnant and Nursing Mothers (Certain records of a dose given to	Records of a dose given to a fetus or nursing child: 3 years.	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(90)</u> (3 year retention period for records of a dose given to an embryo/fetus or nursing child).

\* This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

### **RADIOLOGY AND NUCLEAR MEDICINE RECORDS\***

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
an embryo, nursing child, or nursing mother)	Records of instructions given to breast-feeding mothers who received radioactive drugs or implants: 3 years after date of release.	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(96)</u> (3 year retention period after the date of release for instructions given upon release to breast-feeding mothers who received radioactive drugs or implants).
Radiation Exposure Records See footnote to section.	5 years after termination of the individual's employment or association with the registrant.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 290-5-2207(1)(c)</u> (5 year retention period after termination of the individual's employment or association with the registrant for records of individual radiation exposure).</li> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(93)</u> (3 year retention period for records of dosages of unsealed radioactive material for medical use).</li> <li><u>But note: Ga. Comp. R. &amp; Regs. 391-3-1703(14)(c)(2)(i)-(ii)</u> (must retain all required forms, records and results regarding surveys to determine the dose from external sources of radiation used, in the absence of or in combination with individual monitoring data, in the assessment of individual dose equivalents, and of measurements and calculations used to determine individual intakes of radioactive material and used in the assessment of internal dose, until the Department terminates each pertinent license. Upon termination, retention obligations continue for some documents).</li> </ul>
Radiation Protection Program Records	Provisions of the program: Permanent.	<u>Ga. Comp. R. &amp; Regs. 391-3-1703(14)(b)</u> (must retain documentation of provisions of the program "until the Department terminates each pertinent license requiring the record").
See also Records of Safety Instruction and Training Records, p. <u>111</u>	Records of authority, responsibilities, actions taken, and safety program changes: 5 years	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(86)-(87)</u> (5 year retention period).
	Audits and other reviews of program content and implementation: 3 years after record is made.	Ga. Comp. R. & Regs. 391-3-1703(14)(b) (3 year retention period after record is made).
Radionuclide Purity Records	3 years.	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(99)</u> (3 year retention period for records of radionuclide contaminant concentration tests).

\* This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

### **RADIOLOGY AND NUCLEAR MEDICINE RECORDS**\*

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Requests for Imaging Services	7 years from the date of service.	<ul> <li>42 C.F.R. § 424.516(f); Medicare Program Integrity Manual, Ch. 15 § 18 (BOTH physicians who order AND providers that furnish imaging services must maintain written and electronic documents (including the NPI of the physician who ordered/certified the services) relating to written orders and certifications and requests for payments for imaging services for 7 years).</li> <li>42 C.F.R. §424.535(a)(10) (provider who fails to comply with document retention requirements in 424.516(f) is <u>subject to revocation</u> of Medicare enrollment for a period of not more than 1 year).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>42 C.F.R. § 482.26(d) (hospitals must retain records of radiological services, including copies of reports and printouts, films, scans, and other image records, for 5 years).</li> <li>42 C.F.R. § 482.53(d) (hospitals must retain copies of nuclear medicine records, including interpretations, consultations, and procedures, for 5 years).</li> </ul>
Records of Release of Individuals Containing Radioactive Drugs or Implants	3 years after the date of release.	Ga. Comp. R. & Regs. 391-3-1705(96) (3 year retention period after the date of release).
Reports of Overexposure	Permanent.	Ga. Comp. R. & Regs. 391-3-1703(14)(g), (e)(must retain all required forms and records regarding employee exposure to radiation until the Department terminates each pertinent license. Upon termination, retention obligations continue for some documents).Ga. Comp. R. & Regs. 391-3-1703(14)(h)(must retain all required forms and records regarding doses to individual members of the public until the Department terminates each pertinent license. Upon termination, retention obligations continue for some documents).

\* This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

### **RADIOLOGY AND NUCLEAR MEDICINE RECORDS\***

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Safety Instruction and Training Records (Training of Nuclear Medicine Technologists, Radiation Therapists, all personnel caring for patients or human research subjects who have received therapy with a radioactive drug or implant and cannot be released, and all individuals who operate remote afterloader units, teletherapy units, and gamma stereotactic radiosurgery units)	3 years after the last date the individual was authorized to act in such role at the licensee's facility.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(100)</u> (records of training for Nuclear Medicine Technologists and Radiation Therapists must be retained for 3 years after the last date the individual was authorized to act in such role at the licensee's facility).</li> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(101)</u> (must maintain required employee training records for 3 years after the last date the individual was authorized to act in such role at the licensee's facility).</li> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(101)</u> (sets forth general recordkeeping requirements for training for all personnel caring for patients or human research subjects who have received therapy with a radioactive drug and cannot be released).</li> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(58)</u> (sets forth general recordkeeping requirements for training for all personnel caring for patients or human research subjects who have received therapy with a radioactive implants and cannot be released).</li> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(58)</u> (sets forth general recordkeeping requirements for training for all personnel caring for patients or human research subjects who have received therapy with a radioactive implants and cannot be released).</li> <li><u>Ga. Comp. R. &amp; Regs. 391-3-1705(70)</u> (sets forth general recordkeeping requirements for training for all individuals who operate remote afterloader units, teletherapy units, and gamma stereotactic radiosurgery units).</li> </ul>

<sup>\*</sup> This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

### **RADIOLOGY AND NUCLEAR MEDICINE RECORDS**\*

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Survey Instruments (Records of calibrations and	Records that assure that required tests were performed: Until EPD 3 years.	<u>Ga. Comp. R. &amp; Regs. 391-3-1702(6)(c)(3)(iv)</u> (records that "assure that the tests required by" regulation are performed must be "maintained for three years.")
(Records of carloratoris and leak tests) See also Dosimetry Equipment, p. <u>105</u> .	Survey Instrument Calibration: 3 years.	Ga. Comp. R. & Regs. 391-3-1705(92) (3 year retention period for records of calibrations of survey instrument – specific rule for healing arts uses).         Ga. Comp. R. & Regs. 391-3-1703(14)(c), (8)(a) (3 year retention period for records of calibrations of survey instruments – general rule).         Ga. Comp. R. & Regs. 391-3-1705(91) (3 year retention period for records of calibrations of instruments used to measure the activity of unsealed radioactive material).
	Leak Tests and tests of the on/off mechanism and indicator: 3 year after performance of the next required leak test.	Ga. Comp. R. & Regs. 391-3-1702(6)(c)3.(iv) (3 year retention period).
Surveys of Exposure to Patients and Human Research Subjects	3 years.	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(102)</u> (3 year retention period of surveys after source implant and removal and surveys of patients and research subject treated with a remote afterloader unit).
Strontium-90: Records of the Decay of Sr-90 Sources	Life of the source.	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(105)</u> (records of the activity of a strontium 90 source must be retained for the life of the source).
Surveys of Therapeutic Treatment Units	Duration of the use of the unit.	<u>Ga. Comp. R. &amp; Regs. 391-3-1705(113)</u> (records of radiation surveys of treatment units must be maintained for the duration of the use of the unit).

<sup>\*</sup> This section focuses on the retention requirements for the use of radionuclides in the healing arts as listed in <u>Ga. Comp. R. & Regs. 391-3-17-05</u>. Though it touches on regulations from other sections of Ga. Comp. R. & Regs. 391-3-17, it is not comprehensive for all potential situations involving radioactive materials, as hospitals do not often face such situations. Please note that in the event of any accident involving radioactive materials (e.g., overexposure, employee exposure, spills, etc.), a general rule is to maintain related documentation permanently.

The U.S. Nuclear Regulatory Commission ("NRC") regulates nuclear materials, including medical equipment that uses radiation. However, Georgia has entered into an agreement with the NRC to assume NRC regulatory authority within the state. Atomic Energy Act of 1954, 42 U.S.C. § 2021.

### **RESEARCH RECORDS**<sup>\*</sup>

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Contracts with Study Sponsor or Principal Investigator and Supporting Documentation See footnote to section.	At least 10 years.	<ul> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract).</li> <li>26 U.S.C. § 6501 (6 year statute of limitation from date of filing for tax audits for omission of gross income greater than \$5,000. Any tax may be assessed within 3 years). <i>But note</i>: In the event of a false return, fraud, or failure to file a return, the tax may be assessed at <i>any time</i>.</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>I8 U.S.C. § 3282 (5 year statute of limitation for malpractice actions, 5 year statute of repose); O.C.G.A. § 9-3-73 (for minors who are under age 5 when malpractice occurred, the statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> </ul>
Institutional Review Board Reviews and Records (copies of all research proposals reviewed, protocols, progress reports, meeting minutes, reports of injuries to patients, sample informed consent, etc.) See footnote to section.	3 years after completion of the research.	<ul> <li><u>21 C.F.R. § 56.115</u> (documentation of IRB activity for research regulated by the FDA must be retained for 3 years after completion of research).</li> <li><u>45 C.F.R. § 46.115</u>; <u>7 C.F.R. § 1c.115</u> (documentation of IRB activity for all research involving human subjects that is supported by federal agencies or otherwise subject to federal regulations must be retained for 3 years after completion of research).</li> </ul>

<sup>\*</sup> The retention period for records of clinical trials and other research should be made on a case-by-case basis. The retention periods required by federal regulations are short, but records are typically maintained for much longer for various reasons, including: (1) protection of any intellectual property rights that result from the research; (2) document retention requirements imposed by the research sponsor; (3) medical malpractice exposure; (4) products liability exposure in all states where the drug or device is eventually marketed; (5) terms of the contracts with the study sponsor or principal investigator, including indemnification provisions; and (6) the scientific and historical value of the data. All data that is part of a patient's medical record should be retained for the entire period required for medical records generally. *See Medical Records Generally*, *p.* <u>64</u>.

## **RESEARCH RECORDS**<sup>\*</sup>

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Records Relating to Clinical Research on Drugs See footnote to section.	Medical Records:Adults:10 years from last discharge or contact that resulted in a record.Minors:Until the patient's 23rd birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer.See Medical Records Section, p. 62.	FDA regulation of retention of research data does not exempt hospitals from maintaining the entire medical record, including records of research participation, for the entire period of time required for medical records generally.
	Case Histories: At least 2 years (but see comments). See also Institutional Review Board Reviews and Records, p. <u>113</u> .	Though FDA regulations only require case histories be kept for two years, data is typically retained significantly longer. Data should be maintained long enough to protect any intellectual property related to the work ( <i>i.e.</i> , patents) and to satisfy any requirements of the research sponsor. There may also be historical and scientific value to the data. Additionally, all records that are part of a patient's medical record should be maintained for the longer period of time required for medical records generally. <u>21 C.F.R. § 312.62</u> (2 year retention period for case histories, including the case report forms and supporting data. Retention period starts when drug is approved or, if it is not approved, when the investigation is terminated and FDA is notified). There may be records of certain types of studies the hospital may wish to maintain longer, including the following: (1) studies involving children; (2) OB/reproductive research; (3) genetic research; (4) radiation research; and (5) research on people of child-bearing years.
	Disposition of an Investigational Drug: 2 years after the drug is approved or investigation is discontinued and FDA is notified. (Including: Dates, quantity, use by subjects, and other records FDA requires be maintained)	<u>21 C.F.R. § 312.62</u> (2 year retention period for records of the disposition of an investigational drug. Retention period starts when drug is approved or, if it is not approved, when the investigation is terminated and FDA is notified).

<sup>\*</sup> The retention period for records of clinical trials and other research should be made on a case-by-case basis. The retention periods required by federal regulations are short, but records are typically maintained for much longer for various reasons, including: (1) protection of any intellectual property rights that result from the research; (2) document retention requirements imposed by the research sponsor; (3) medical malpractice exposure; (4) products liability exposure in all states where the drug or device is eventually marketed; (5) terms of the contracts with the study sponsor or principal investigator, including indemnification provisions; and (6) the scientific and historical value of the data. All data that is part of a patient's medical record should be retained for the entire period required for medical records generally. *See Medical Records Generally*, *p.* <u>64</u>.

## **RESEARCH RECORDS**<sup>\*</sup>

Upon issuance of a formal legal hold, all purging should be suspended as specified in the legal hold. A sample legal hold memorandum is provided at Appendix C.

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Records Relating to Clinical Research on Medical Devices See footnote to section.	<ul> <li>Medical Records:</li> <li><u>Adults:</u> 10 years from last discharge or contact that resulted in a record.</li> <li><u>Minors:</u> Until the patient's 23<sup>rd</sup> birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer.</li> <li><i>See Medical Records Section, p. <u>62</u>.</i></li> </ul>	FDA regulation of retention of research data does not exempt hospitals from maintaining the entire medical record, including records of research participation, for the entire period of time required for medical records generally.
	Case Histories: at least 2 years ( <i>but see comments</i> ). See also Institutional Review Board Reviews and Records, p. <u>113</u> .	Though FDA regulations only require case histories be kept for two years, data is typically retained significantly longer. Data should be maintained long enough to protect any intellectual property related to the work ( <i>i.e.</i> , patents) and to satisfy any requirements of the research sponsor. There may also be historical and scientific value to the data. Additionally, all records that are part of a patient's medical record should be maintained for the longer period of time required for medical records generally. <u>21 C.F.R. § 812.140</u> (2 year retention period for case histories, including the case report forms and supporting data. Retention period starts when drug is approved or, if it is not approved, when the investigation is terminated and FDA is notified). There may be records of certain types of studies the hospital may wish to maintain longer, including the following: (1) studies involving children; (2) OB/reproductive research; (3) genetic research; (4) radiation research; and (5) research on people of child-bearing years.
	Other Records: 2 years after device is approved or investigation is discontinued and FDA is notified. (Including: Disposition, receipt, or use of an investigational device; protocols; observations; adverse event reports; and all other records FDA requires be maintained)	21 C.F.R. § 812.140 (2 year retention period for records of the disposition, receipt, or use of an investigational device. Retention period starts when drug is approved or, if it is not approved, when the investigation is terminated and FDA is notified).

\* The retention period for records of clinical trials and other research should be made on a case-by-case basis. The retention periods required by federal regulations are short, but records are typically maintained for much longer for various reasons, including: (1) protection of any intellectual property rights that result from the research; (2) document retention requirements imposed by the research sponsor; (3) medical malpractice exposure; (4) products liability exposure in all states where the drug or device is eventually marketed; (5) terms of the contracts with the study sponsor or principal investigator, including indemnification provisions; and (6) the scientific and historical value of the data. All data that is part of a patient's medical record should be retained for the entire period required for medical records generally. *See Medical Records Generally*, *p.* <u>64</u>.

### **RESEARCH RECORDS**<sup>\*</sup>

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Records Relating to Other Clinical Research See footnote to section.	Medical Records: <u>Adults:</u> 10 years from last discharge or contact that resulted in a record. <u>Minors:</u> Until the patient's 23 <sup>rd</sup> birthday or 10 years from last discharge or contact that resulted in a record, whichever is longer. <i>See Medical Records Section, p. <u>62</u>.</i>	Regulation of retention of research data does not exempt hospitals from maintaining the entire medical record, including records of research participation, for the entire period of time required for medical records generally.
	Other Clinical Research Records: At least 2 years ( <i>but see comments</i> ). See also Institutional Review Board Reviews and Records, p. <u>113</u> .	This retention period is extrapolated from the requirements for research on drugs and devices. Most data is typically retained significantly longer than 2 years. Data should be maintained long enough to protect any intellectual property related to the work and to satisfy any requirements of the research sponsor. There may also be historical and scientific value to the data. Additionally, all records that are part of a patient's medical record should be maintained for the longer period of time required for medical records generally. There may be records of certain types of studies the hospital may wish to maintain for longer, including the following: (1) studies involving children; (2) OB/reproductive research; (3) genetic research; (4) radiation research; and (5) research on people of child-bearing years.

<sup>\*</sup> The retention period for records of clinical trials and other research should be made on a case-by-case basis. The retention periods required by federal regulations are short, but records are typically maintained for much longer for various reasons, including: (1) protection of any intellectual property rights that result from the research; (2) document retention requirements imposed by the research sponsor; (3) medical malpractice exposure; (4) products liability exposure in all states where the drug or device is eventually marketed; (5) terms of the contracts with the study sponsor or principal investigator, including indemnification provisions; and (6) the scientific and historical value of the data. All data that is part of a patient's medical record should be retained for the entire period required for medical records generally. *See Medical Records Generally*, *p.* <u>64</u>.

### **RESEARCH RECORDS**<sup>\*</sup>

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Records Relating to Non-Clinical Research ( <i>e.g.</i> , documentation records, raw data, master schedule sheet, summaries of training, experience, and job descriptions, records of maintenance and calibration of equipment, etc.) See footnote to section.	<ul> <li>If the non-clinical research supports an Investigational New Drug ("IND") application or an investigational device exemption ("IDE"): 5 years after the data is submitted to the FDA in support of an application.</li> <li>If the non-clinical research does NOT support an IND or an IDE: The lesser of: <ul> <li>5 years after the data is submitted to the FDA in support of an application; or</li> <li>2 years after the application for a research or marketing permit is approved or 2 years after research terminates if no permit is approved.</li> </ul> </li> </ul>	21 C.F.R. § 58.195 (5 or 2 year retention period for records relating to non-clinical research, including data and administrative records).

<sup>\*</sup> The retention periods required by federal regulations are short, but records are typically maintained for much longer for various reasons, including: (1) protection of any intellectual property rights that result from the research; (2) document retention requirements imposed by the research sponsor; (3) medical malpractice exposure; (4) products liability exposure in all states where the drug or device is eventually marketed; (5) terms of the contracts with the study sponsor or principal investigator, including indemnification provisions; and (6) the scientific and historical value of the data. All data that is part of a patient's medical record should be retained for the entire period required for medical records generally. *See Medical Records Generally, p. 64.* 

## **RISK MANAGEMENT RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Accident / Incident Reports and Unusual Occurrence Reports	10 years.	<ul> <li>Applicable Statutes of Limitations: <ul> <li>O.C.G.A. § 9-3-24 (written contracts - 6 years);</li> <li>O.C.G.A. § 9-3-25 (oral contracts - 4 years);</li> <li>O.C.G.A. § 9-3-27 (against fiduciaries - 10 years);</li> <li>O.C.G.A. § 9-3-30 (trespass or damage to realty - 4 years);</li> <li>O.C.G.A. § 9-3-31 (personalty - 4 years);</li> <li>O.C.G.A. § 9-3-32 (personal property - 4 years);</li> <li>O.C.G.A. § 9-3-32 (personal property - 4 years);</li> <li>O.C.G.A. § 9-3-33 (personal injury - 2 years);</li> <li>O.C.G.A. § 9-3-31 (medical malpractice - 2 years with 5 years statute of repose);</li> <li>O.C.G.A. § 9-3-72 (foreign bodies - 1 year from discovery);</li> <li>O.C.G.A. § 9-3-73 (medical malpractice statute of limitations tolled if minor was under age 5 at occurrence).</li> <li>O.C.G.A. § 1904.33 (employers must maintain the OSHA 300 Log, the privacy case list, the annual summary, and the OSHA 301 Incident Report form for 5 years following the end of the calendar year that the records cover).</li> </ul> </li> <li>Joint Commission, Comprehensive Accreditation Manual – Environment of Care (hospitals must have processes to report and investigate incidents and issues, including injuries to patients or others in the hospital's facilities, occupational illnesses, including injuries to patients or others in the hospital's facilities, occupational illnesses, including injuries to patients or others in the hospital's facilities, hazardous materials and waste spills, fire safety management problems, medical/laboratory equipment problems, and utility systems management problems).</li> </ul>
Appraisal Reports (property, building, equipment or grounds appraisals)	Permanent.	These records are often kept permanently for certificate of need purposes and for business reasons.
Complaints of Handicap Discrimination and Relevant Employment Records of the Charging Party and Employees in Similar Positions	3 years.	29 C.F.R. § 32.49 (programs that receive federal financial assistance must maintain records related to complaints of handicap discrimination for 3 years).

## **RISK MANAGEMENT RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Insurance Documents (including current and expired policies, correspondence and pre- certifications, claims, releases and settlements, surety bonds, fidelity bonds)	Permanent.	"Old" exposures occur fairly often necessitating review of policies and the documents supporting the insurance policy transaction. Unknown continuing torts do trigger coverage, especially as to environmental liability, professional liability, and premise liability.
Medical Device Reports (MDR) and Records of MDR Reportable Events	2 years.	<ul> <li>Hospitals may wish to retain these records for 10 years, the statute of limitation for products liability actions.</li> <li><u>21 C.F.R. § 803.18</u> (user facilities, including hospitals, must retain a medical device reporting file relating to an adverse event for 2 years after the date of the event).</li> <li><u>O.C.G.A. § 51-1-11</u> (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); <u>O.C.G.A. § 11-2-725</u> (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); <u>O.C.G.A. § 9-3-33</u> (2 year statute of limitations for personal injury).</li> </ul>
Medical Device Tracking Records	Useful life of the device.	21 C.F.R. § 821.60 (medical device tracking reports must be retained for the useful life of the device).

## **RISK MANAGEMENT RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Patient Complaints	Relating to drugs or devices: 10 years. Other complaints: 6 years.	<ul> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>18 U.S.C. § 3282 (general Federal criminal statute of limitation of 5 years).</li> <li>O.C.G.A. § 16-14-8 (Georgia RICO statute of limitation of 5 years).</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases); O.C.G.A. § 9-3-72 (statute of limitations for foreign objects left in a patient's body is 1 year after object is discovered).</li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>

## **RISK MANAGEMENT RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Policies and Procedures – Outdated	<ul> <li>Policies relating to use of equipment/products, including Pharmacy policies: 10 years.</li> <li>Other policies (e.g., Billing, Compliance, HIPAA Privacy, Human Resources, Marketing, Nursing, Patient Care, Quality Assurance, etc.): 6 years.</li> <li>Security policies: At least 3 years.</li> <li>See also Document Retention Schedule for the department that maintains the policy.</li> </ul>	<ul> <li>The hospital may wish to maintain policies for a longer period of time for historical purposes.</li> <li>O.C.G.A. § 51-1-11 (statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>31 U.S.C. § 3731(b) (False Claims Act civil fraud actions statute of limitation of 6 years; statute of repose of 10 years).</li> <li>45 C.F.R. § 164.530(j) (a covered entity must maintain required HIPAA documentation for 6 years after the date of its creation or the date when it was last in effect).</li> <li>O.C.G.A. § 9-3-24 (6 year statute of limitations for breach of written contract. The Employee Handbooks should be maintained for this period for any claim that the Handbook constituted a contract between the employer and employee).</li> <li>O.C.G.A. § 9-3-71 (2 year statute of limitation for malpractice actions, 5 year statute of limitations ends at age 7 and the statute of repose ends at age 10); <i>McCord v. Lee</i>, 286 Ga. 179 (2009) (recognizing a "new injury" exception to the statute of limitations in misdiagnosis cases).</li> <li>O.C.G.A. § 10-11-2 (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>

## **RISK MANAGEMENT RECORDS**

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Recall Records (records of a manufacturer's recall)	10 years.	Ga. Comp. R. & Regs. 480-1306(9)(the Director of Pharmacy shall develop and implement a policy and procedure to assure that all drugs within the hospital included on a recall are returned to the pharmacy for proper destruction).O.C.G.A. § 51-1-11(statute of limitation for products liability for the manufacturer is 10 years from the date of the first sale of the product); O.C.G.A. § 11-2-725 (4 year statute of limitation for breach of contract or breach of warranty for the sale of goods); O.C.G.A. § 9-3-33 (2 year 

## SECURITY AND TRANSPORTATION RECORDS

RECORD DESCRIPTION	RETENTION PERIODS	COMMENTS
Security Departmental Policies and Procedures – Outdated	3 years.	<ul> <li><u>Ga. Comp. R. &amp; Regs. 111-8-4015</u> (hospitals must develop and implement an effective hospital-wide safety program that includes security procedures for controlling access to sensitive areas, an incident monitoring system, and other safety policies).</li> <li><u>O.C.G.A. § 10-11-2</u> (unless there is a specific retention requirement, business records required to be kept may be destroyed after 3 years).</li> </ul>
Security Incident Reports	4 years.	<ul> <li>O.C.G.A. § 9-3-30 (4 year statute of limitation for trespass and damage to realty).</li> <li>O.C.G.A. § 9-3-31 (4 year statute of limitation for damage to personal property).</li> <li>O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> <li>Joint Commission, Comprehensive Accreditation Manual – Environment of Care (hospitals must have processes to report and investigate incidents and issues, including security incidents).</li> </ul>
Shuttle Logs and Daily Dispatch Logs	4 years.	<ul> <li>O.C.G.A. § 9-3-30 (4 year statute of limitation for trespass and damage to realty).</li> <li>O.C.G.A. § 9-3-31 (4 year statute of limitation for damage to personal property).</li> <li>O.C.G.A. § 9-3-33 (2 year statute of limitations for personal injury).</li> </ul>

## Appendix A:

### Sample Electronic Record Retention Guidelines for Georgia Law

## **Electronic Patient Health Records**

- Under Georgia law, any healthcare provider may, in its sole discretion, create, maintain, transmit, receive, and store a patient's health record in an electronic format.
- A healthcare provider may temporarily or permanently convert patient health records into an electronic format.
- A healthcare provider is not required to maintain separate tangible copies of electronically stored patient health records.
- A tangible copy of a patient's health record reproduced from an electronically stored record is considered an original for purposes of providing copies to patients or other authorized parties and for introduction of the patient's health records into evidence in administrative or court proceedings.
- Electronic patient health records must comply with federal laws governing the security and confidentiality of a patient's personal health information.
- Hospital health records that are converted to or stored as electronic records must be readable and capable of being reproduced in paper format upon request.
- These guidelines also apply to psychiatric, psychological, or other mental health records of a patient.

### **Electronic Records Generally**

- Any record required to be retained under Georgia law can be maintained electronically so long as the electronic record:
  - (1) Accurately reflects the information in the original record after it was first generated in its final (paper or electronic) form; and
  - (2) Remains accessible for the retention period required by law.
- If Georgia law requires a record to be presented or retained in its original form, or provides consequences if it is not presented or retained in its original form, the law will still be considered fulfilled so long as an electronic record of the document is maintained in accordance with the requirements above.

- It is permissible to satisfy the requirements above by using the services of another person so long as that person also complies.
- There may be instances where a Georgia governmental agency specifies additional retention obligations for records subject to its jurisdiction. Such obligations are not precluded by the requirements above.
- A record retained as an electronic record in accordance with the requirements above satisfies any law that requires retention of a record for evidentiary, audit, or like purposes unless a law enacted after July 1, 2009 specifically prohibits the use of an electronic record for the specified purpose.
- There may be instances in which an original paper record should not be destroyed due to administrative or historical reasons, even though an electronic version of the document exists.

### **Relevant Sources**

- O.C.G.A. § 31-33-8 (Electronic Records; Application to Psychiatric, Psychological, or Other Mental Health Records)
- O.C.G.A. § 31-33-1 (Definition of Patient, Provider, Record)
- O.C.G.A. § 10-12-12 (Retention of Electronic Records)
- O.C.G.A. § 10-12-2 (Definitions Relevant to Electronic Records)
- Ga. Comp. R. & Regs. 111-8-40-.18 (Rules and Regulations for Hospitals, Medical Records)
- 28 U.S.C. § 1732 (Record Made in Regular Course of Business; Photographic Copies) (photographic copies of business records or reproductions of electronic records are acceptable as evidence in federal court)
- Centers for Medicare & Medicaid Services, "Medical Record Retention and Media Formats for Medical Records," <u>MLN Matters</u>, No. SE 1022 (2010) (Medicare program does not have requirements for the media formats for medical records)

### Appendix B:

### Sample E-Mail Retention and Acceptable Use Policy

### Intent

This policy establishes acceptable uses for e-mails, as well as retention practices for e-mail retained on active servers.

### Scope

This retention policy applies to:

- 1. All e-mail systems and services provided or funded (in whole or in part) by the Health System;
- 2. All e-mail account users/holders at the Health System (both temporary and permanent); and
- 3. All e-mail messages sent or received using the Health System's e-mail systems.

### **Procedural Guidelines**

### A. General Provisions Regarding E-mails

- 1. **E-mail Privileges:** E-mail is a critical mechanism for business communications at the Health System. However, use of the Health System's e-mail systems and services are a privilege, not a right, and therefore must be used with respect and in accordance with the goals of the Health System. This policy outlines appropriate and inappropriate use of the Health System's e-mail systems and services in order to minimize disruptions to services and activities. This policy also defines the e-mail retention strategy at the Health System. All associates who use electronic forms of communication should familiarize themselves with this policy.
- 2. Account Activation: E-mail access at the Health System is controlled through individual accounts and passwords. Each user of the Health System's e-mail system is required to read a copy of this E-mail Retention and Acceptable Use Policy prior to receiving an e-mail access account and password. It is the responsibility of the associate to protect the confidentiality of their account and password information. Only a subset of associates of the Health System will receive an e-mail account. E-mail accounts may be granted to third-party non-employees (for example, temporary contract workers) on a case-by-case basis.
- **3.** General Expectations of Users: The Health System often delivers important communications via e-mail. As a result, associates of the Health System with e-mail accounts are expected to check their e-mail in a consistent and timely manner so that they are aware of important Health System announcements and updates, as well as for fulfilling business and role-oriented tasks. E-mail users are responsible for mailbox management, including organization and cleaning. If a user subscribes to a mailing list, he or she must be aware of how to unsubscribe from the list and is responsible for doing so in the event that his or her current e-mail address changes.

4. Access Termination: The Health System may terminate e-mail access at any time for any reason, including but not limited to disciplinary reasons as outlined in this policy. E-mail access will be terminated when the associate or third party terminates his or her association with the Health System, unless other arrangements are made. The Health System is under no obligation to store or forward the contents of an individual's e-mail inbox/outbox after access is terminated or after the term of his or her employment has ceased.

### B. Appropriate Use Standards

- 1. **E-mail as Business Tool:** Associates at the Health System are encouraged to use e-mail to further the goals and objectives of the Health System. The types of activities that are encouraged include:
  - a. Communicating with fellow associates, business associates of the Health System, and clients within the context of an individual's assigned responsibilities.
  - b. Acquiring or sharing information necessary or related to the performance of an individual's assigned responsibilities.
  - c. Participating in educational or professional development activities.
- 2. **Professionalism and Courtesy**: E-mail users are expected to remember that e-mail sent from the Health System's e-mail accounts reflects on the Health System. E-mail users must maintain a high degree of professional and personal courtesy and conduct. The Health System's policies against discrimination, sexual harassment and any other kind of unlawful harassment apply fully to the e-mail system.
- 3. **Discretion in Communications and HIPAA:** Keep in mind that all e-mail messages sent outside of the Health System may continue to exist for decades. Therefore, a good rule is not to communicate anything that you would not feel comfortable being made public. Demonstrate particular care when using the "Reply All" command during e-mail correspondence to ensure the resulting message is not delivered to unintended recipients. Use caution when communicating confidential or sensitive information via e-mail, and ensure that all communications comply with the Health System's policies on protected health information under HIPAA.
- 4. System Conservation: The Health System's e-mail systems and services are not to be used for purposes that could be reasonably expected to strain storage or bandwidth (for example e-mailing large attachments instead of pointing to a location on a shared drive). Individual e-mail use will not interfere with others' use and enjoyment of the Health System's e-mail system and services.
- 5. **Inappropriate Use:** The following activities are deemed inappropriate uses of the Health System's e-mail systems and services, and are strictly prohibited:
  - a. Use of e-mail for illegal or unlawful purposes, including copyright infringement, obscenity, libel, slander, fraud, defamation, plagiarism, harassment, intimidation,

forgery, impersonation, soliciting for illegal pyramid schemes, and computer tampering (for example, spreading of computer viruses).

- b. Use of e-mail in any way that violates the Health System's policies, rules, or administrative orders.
- c. Viewing, copying, altering, or deletion of e-mail accounts or files belonging to the Health System or another individual without authorized permission.
- d. Sending of unreasonably large e-mail attachments. The total size of an individual e-mail message sent (including attachment) should be 10 MB or less.
- e. Opening e-mail attachments from unknown or unsigned sources. Attachments are the primary source of computer viruses and should be treated with utmost caution.
- f. Sharing e-mail account passwords with another person, or attempting to obtain another person's e-mail account password. E-mail accounts are only to be used by the registered user.
- g. Excessive personal use of the Health System e-mail resources. The Health System allows limited personal use for communication with family and friends, independent learning, and public service so long as it does not interfere with staff productivity, pre-empt any business activity, or consume more than a trivial amount of resources.
- h. The Health System prohibits personal use of its e-mail systems and services for unsolicited mass mailings, non-Health System commercial activity, political campaigning, and dissemination of chain letters.
- i. Transmittal of offensive, threatening or discriminatory statements or language that disparages others including, but not limited to, messages based on race, national origin, gender, sexual orientation, age, disability, religion, or any other characteristic protected by law.
- j. Sending or soliciting sexually oriented, obscene, or pornographic messages or images.
- k. Expression of personal opinions in blogs, e-mails, or on the internet using Health System credentials unless the user has obtained prior consent from the Health System.
- 6. **Personal E-mail Accounts**: Associates may not utilize personal e-mail accounts (e.g., gmail, yahoo, etc.) to conduct Health System business or to transmit Health System or patient information. If Health System related matters are transmitted on a personal e-mail accounts, the Associate will provide the Health System, upon discovery and demand, access to all personal e-mail accounts for the purpose of retrieving Health System-related e-mails.

## C. <u>Retention</u>

1. **Retention by Exception:** E-mail is not a document storage system. E-mail should only be retained if: (i) it has lasting value criteria due to the nature of the content; (ii) there is a formal legal hold initiated by the Health System in accordance with this Policy; (iii) a legal requirement necessitates retention; or (iv) the e-mail is subject to the retention periods set forth in the Health System's document retention schedule. Data files on the

Health System's network should be managed by the owner/creator of the files according to the Health System's retention policies.

- 2. Alternative Storage Prohibited: Saving e-mails to locations other than the Health System's network is not authorized. Likewise, saving e-mails as a message file (.msg) is not authorized and is against the spirit of this guideline.
- 3. **Default Retention Periods:** E-mails and attachments that are retained on active e-mail services for longer than \_\_\_\_\_\_ days will be automatically deleted. This auto-delete policy applies to messages within all e-mail folders (inbox, sent items, outbox, drafts, personal, etc.) stored on active e-mail servers. Except for e-mails that are saved on the Health System's network, the Health System will not retain e-mail past \_\_\_\_\_ days in any form: no local copies, no backups, and no archive.
- 4. **Deleted E-mail Folder:** E-mails and attachments that are retained by users in the "deleted items" folder on active e-mail services for longer than \_\_\_\_\_ days will be automatically deleted.
- 5. **Storage Limits:** In addition to the automatic deletion schedules, the Health System may in its discretion establish individual user account storage limitations for excessive e-mails on active e-mail services that are less than \_\_\_\_\_ days old. Upon reaching the storage limitation, the user will be required to manually delete e-mails from the active e-mail services in order to free space for new e-mails.
- 6. Litigation Hold: When certain types of litigation are pending or threatened against the Health System or its associates, the Health System may be required to preserve documents and records that pertain to the issues. The issuance of a litigation hold is dependent upon many factors and will generally involve input and consultation from outside counsel. A litigation hold directive must be issued to the legal custodians of those documents by the Health System's Compliance Officer or General Counsel. A litigation hold directive overrides this policy, as well as any records destruction schedules or policies that may have otherwise called for the transfer, disposal or destruction of relevant documents, until the hold has been cleared by the Health System's Compliance Officer or General Counsel. E-mails and accounts of terminated associates that have been placed on litigation hold status will be maintained by the Information Services Department until the hold is released. No associate who has received a litigation hold directive may alter or delete an electronic record that falls within the scope of that hold. Those associates are required to provide access to or copies of electronic records that they have downloaded, saved, or moved to some other storage account or device.

### D. Monitoring and Confidentiality

1. **No Expectation of Privacy**: The e-mail systems and services used at the Health System are owned by the Health System and are therefore the Health System's property. This gives the Health System the right to monitor any and all e-mail traffic passing through its e-mail system. The Health System, in its discretion as owner of the e-mail system,

reserves and may exercise the right to monitor, access, retrieve, and delete any matter stored in, created, received, or sent over the e-mail system, for any reason and without the permission of any employee. This monitoring may include, but is not limited to, inadvertent reading by information services staff during the normal course of managing the e-mail system, review by the legal team during the e-mail discovery phase of litigation, observation by management in cases of suspected abuse or to monitor associate efficiency. Associates have no reasonable expectation of privacy when it comes to business and personal use of the Health System's e-mail system.

- 2. Access Limited: Even though the Health System has the right to retrieve and read any e-mail messages, those messages should still be treated as confidential by other employees and accessed only by the intended recipient. Employees are not authorized to retrieve or read any e-mail messages that are not sent to them. Any exception to this policy must receive prior approval.
- 3. Confidential, Proprietary, and Protected Health Information: Unless authorized to do so, associates are prohibited from using e-mail to transmit confidential information to outside parties. Associates may not access, send, receive, solicit, print, copy or reply to confidential or proprietary information about the Health System, its employees, clients, suppliers, and other business associates. Confidential information includes, but is not limited to, client lists, credit card numbers, Social Security numbers, associate performance reviews, salary details, trade secrets, passwords, and information that could embarrass the Health System and its associates if the information were disclosed to the public. All communications involving protected health information of patients must adhere to the Health System's policies and procedures on HIPAA.

## E. Failure to Comply

Violations of this policy will be treated like other infractions at the Health System. Allegations of misconduct will be adjudicated according to established procedures. Sanctions for inappropriate use on the Health System's e-mail systems and services may include, but are not limited to, one or more of the following:

- 1. Temporary or permanent revocation of e-mail access;
- 2. Disciplinary action according to applicable Health System policies;
- 3. Termination of employment; or
- 4. Legal action according to applicable laws and contractual agreements.

### F. <u>Acknowledgement</u>

I acknowledge that I have read and understand the Health System's E-mail Retention and Acceptable Use Policy. If I have any questions about this Policy, I will seek clarification from the Human Resources Department.

I understand that my use of the Health System's e-mail and internet systems constitutes my consent to, and full understanding of, all the terms and conditions of this Policy. In

System, and (2) I have no expectation of privacy in connection with the use of these systems or with the transmission, receipt, or storage of information in these systems. I acknowledge and consent to the Health System's monitoring of my use of the e-mail system and the internet at any time at its discretion, including printing and reading all e-mails entering, leaving, or stored in the system.

Signature:

Date:\_\_\_\_\_

Print Name:\_\_\_\_\_

# Appendix C:

## Sample Legal Hold Memorandum (Attached)

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### SAMPLE LEGAL HOLD MEMORANDUM

### [HEALTH SYSTEM LETTERHEAD]

RE:	<b>URGENT</b> : Legal Hold in connection with [Matter]	
DATE:	[Date]	
CC:	[Legal Hold Attorney]	
FROM:	[Health System Representative]	
TO:	Distribution List (Attached)	

We need your assistance to meet our legal obligation to preserve all potentially relevant information—in any form, be it electronic or paper—in connection with the above-referenced [Matter]. This memorandum institutes what is called a "legal hold." Please review the following carefully and, until further notice, adhere to the outlined legal hold policy. If you do not abide by the legal hold, [Health System] could be exposed to severe penalties for failing to preserve potentially relevant information to the [Matter].

At the end of this memorandum, there is an acknowledgment form that we need for you to complete, sign, and return via fax or e-mail by no later than **[Date + One Week]** certifying that you have read and understand your obligations as outlined in this memorandum.

#### 1. What Must be Preserved

Here are the categories of "documents" that we need you to preserve—*i.e.*, protect from deletion:

- a. Any and all documents about... [Define categories broadly]
- b. ...
- c. All storage media or other sources of information that contain these relevant documents.

These categories are broad. That is by design. In applying this policy, if you are unsure about whether something falls within the above categories, please preserve it. It is better to be over-inclusive than under-inclusive when it comes to preserving potentially relevant data. And please do not attempt Confidential, Attorney-Health System Privileged, and Work Product Protected

to determine what, in your opinion, is relevant to the issues between the parties. Courts often define relevance more broadly than the parties, and—again—it is better to be over-inclusive in cases of doubt.

It is also important to note that we are using the term "documents" very broadly. "Documents" means not only hard copy documents, but also electronic data, including e-mail, instant messages, text messages, voice-mail, word processing documents, spreadsheets, databases, calendars, contact messenger information, audio recordings, video recordings, and all other kinds of electronic information. In short, it includes anything that contains or conveys information.

The phrase "storage media or other sources," should be understood to include all hard copy files, computer hard drives, removable media (*e.g.*, CDs, DVDs, and USB or "thumb" drives), laptop or desktop computers, networked servers and drives, back-up tapes or drives, PDAs, iPhones, iPads, BlackBerry, or other handheld devices, and any other locations where hard copy and electronic data is stored. Keep in mind that any of the above-mentioned sources of relevant information may include personal computers or e-mail accounts you use or have access to at home, or other locations.

### 2. How to Preserve

As of now, any documents or data that falls within the categories listed above must be preserved. This means not only being careful not to affirmatively delete any documents or data that fall within the categories listed above, but taking steps to make sure that nothing is deleted automatically. [Identify any known "custodial" operations that could impact documents that need to be preserved.] And be careful not to alter the data by saving it to a new location—the idea is to "preserve it in place."

Please note that our preservation obligation applies to all versions of a document, regardless of the format. For example, if a particular document exists in both hard copy and in e-mail, both versions must be saved. Similarly, if the same document resides in the files of more than one person, each person's copy must be preserved.

**Regarding instant messages and text messages,** as noted above, you should save any instant messages or text messages containing information that falls within the categories of information that must be preserved, identified

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above. Going forward, however, please do not engage in any text or instant messaging conversations about this matter or that would fall within one of the categories listed above. If you happen to receive a text or instant message that would fall within this legal hold, please copy the text of that message into an email and respond to it via e-mail. That way, we are able to properly preserve those conversations.

**Regarding information on personal e-mail accounts**, if you use or have ever used personal internet e-mail accounts, such as gMail, Hotmail, or Yahoo!, for [Health System's] business purposes, please indicate that in the space provided on the acknowledgment form so that we can take the requisite steps to preserve any potentially relevant material stored on those accounts.

### 3. Distribution of this Legal Hold memorandum

This Legal Hold Memorandum is being sent to you because you have been identified as someone who may have documents relevant to [Matter]. If, after a diligent search, you do not have any relevant documents in your possession, custody, or control, please notify me via e-mail.

Also, please take a moment to review the attached Distribution List. If there are other employees whom you believe may also possess documents or evidence related to [the Matter] but who are not identified on the Distribution List, please advise me immediately.

### 4. Other Instructions

Please do NOT discuss (either in person, by telephone, by e-mail, or by text message) the [Matter] amongst yourselves or with any third party without prior approval from the legal team. Unless a member of the legal team is involved in such discussions, those conversations may not be protected by any privilege, and so the people involved may be required to testify about what they remember having been said. Since memories may differ, if our personnel are later called upon to testify as witnesses, this can lead to needless doubts about their credibility. Be aware that anything you say about this dispute other than with the legal team may be introduced into evidence, so please conduct yourself accordingly.

[Matter] Legal Hold Memo [Date]

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Thank you for your cooperation regarding this important matter. As always, if you have any questions, please do not hesitate to contact me or our outside legal counsel:

• [Attorney Name—Phone Number—E-mail Address]

[Matter] Legal Hold Memo [Date]

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**Distribution List** 

[Matter] Legal Hold Memo [Date]

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#### Acknowledgment Form

\*\*Please return by fax or e-mail by [Date + One Week]\*\*\*

Fax No.: [Health System Fax?]

E-Mail: [Health System E-mail]

From:

### (Please print your full name here)

This acknowledges that I have read the Legal Hold Memorandum dated [Date], and that I understand and will comply with the obligations outlined therein with respect to [Matter].

#### Signature:

### (Please sign here)

- 1. I believe that the following employees, not listed on the Distribution List, may possess documents or evidence relevant to this lawsuit:
- 2. I \_\_\_\_\_ (have or have never) used a personal e-mail account for [Health System's] business purposes.
- 3. I \_\_\_\_\_ (do or do not) have voice-mails, instant messages, or text messages containing information that falls within the categories of information that must be preserved, identified above.
- 4. I \_\_\_\_\_ (do or do not) have information that falls within the categories of information that must be preserved, identified above, that is stored on the Internet (a/k/a "The Cloud")—*e.g.*, Google Docs, Dropbox, Evernote, Salesforce.com.