



Waikato DHB / Pinnacle – Practice Guidelines

Guidelines for the Electronic Storage of Patient Images

For use by:
Practice Managers
General Practitioners
Practice Liaison



Version History

Version	Date	Changed By	Revision Description
1.0	22 Jan 2008		Release Version

1. Introduction

The availability of low cost high resolution digital cameras has increased the likelihood that digital patient images will be taken, and used when referring a patient to another service.

Hospital services, particularly dermatology and plastics, are increasingly likely to request digital images to accompany patient referrals to assist with triage.

This document has been created to assist GP practices to store clinical images, to assist with easy management and retrieval at a later date.

This guideline has been informed by:

- Image management issues identified during pilot of electronic referrals
- Waikato DHB dermatology guidelines for referral
- Waikato DHB image management policies and procedures

This document is intended to provide guidance for General Practice which may be adapted to local conditions, depending upon the availability and use of digital cameras and configuration of practice IT systems.

2. Safe Storage of Digital Images

The safe storage of digital patient images requires that the images are kept safe from loss, and inappropriate access, and that the patient's privacy and confidentiality is maintained.

Ideally the images should be stored in a well managed repository or imported into the practice's patient management system. However for most practices the value of importing digital images into their patient management system is not sufficient to justify the effort. The large file sizes of digital images can cause problems for some GP patient management systems.

The alternative method of safe storage of digital images is to set a network directory for all GPs in a practice to store their digital images.

Digital images should not be stored on individual GP workstations, the potential of loss in the case of hardware failure or when that workstation is upgraded, or for inappropriate access is a risk that should not be taken.

Storing images on GP workstations prevents access to the images by other GPs in the same practice who may see the patient on a future visit.

Use of a shared networked drive also ensures that the image store is backed up, unlike directories on most GP workstations.

If necessary discuss your practice's requirements with your IT support vendor, they will be best able to configure your IT systems to support these requirements.

3. Guidelines for File Naming

Using a systematic naming convention for digital images ensures that the image is able to be easily found again. Systematic naming conventions which include the patient identifier and name also ensure that images are less likely to be associated with the wrong patient.

It is useful for identification purposes to name the image using the patient’s NHI. If there are multiple images, add a suffix e.g., “ABC1234a.JPG”.

Optionally describing the area being photographed as part of the filename for single images, or as part of the directory name for series of images. Good descriptions assist in deleting / archiving unwanted images after the images are no longer required.

4. Requirement for Documentation in the Patient Notes

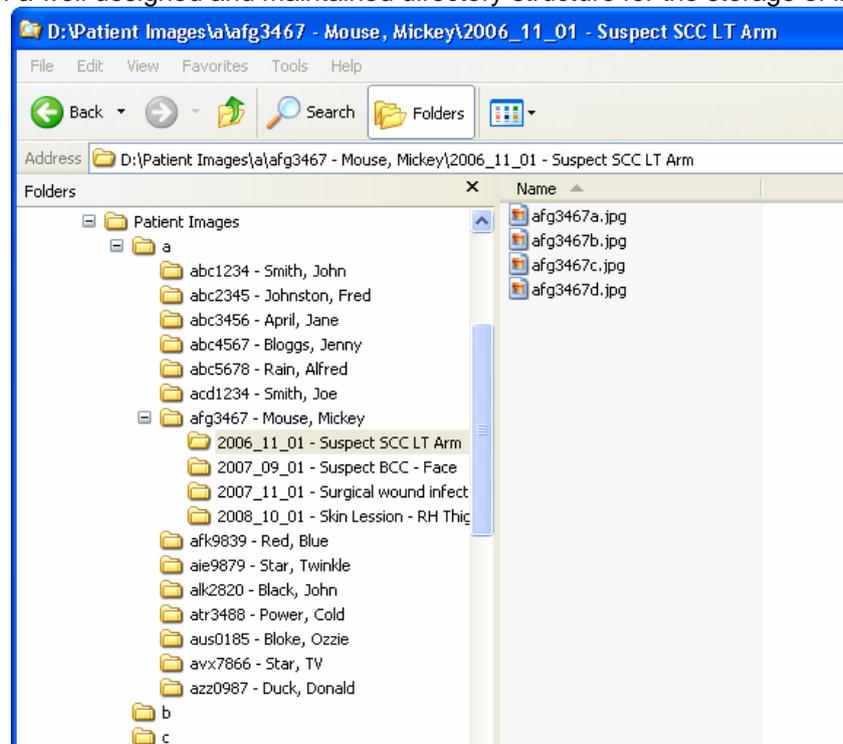
In the circumstance where images are being stored external to the practice’s patient management system the consultation record should include the fact that images were taken to alert the GP and other GPs of their existence in the image directory for future reference. This also ensures that the patient’s medical record is kept as complete as possible.

5. Guidelines for Directory Setup

When using a network directory for the storage of clinical images:

- Store each patient’s images in a separate sub-directory
- Name each patient’s image sub-directory with NHI and patient name
- **Do not** store images in separate directories for each GP – it makes them harder to find for other GPs
- Large practices may need to use subdirectories based on the first letter of the patient’s NHI (giving 26 subdirectories a - z)

Example of a well designed and maintained directory structure for the storage of images.



6. Directory Management & Archive

Practices should agree retention periods for digital images, after which the images are no longer expected to be relevant to patient care.

Typical retention period may be between 10 – 30 years, after which all images would be deleted.

It may be possible to agree a much shorter timeframe for deletion images relating to common medical conditions such as common skin lesions, i.e. retention of common skin cancers may not be required after 1 year.

Practices should also delete digital images of deceased patients, a reasonable time after notification of their death – as long as there are no outstanding medical / legal issues surrounding their deaths.

Practices may wish to annually review their digital image store, as a mechanism for systematically deleting material that is no longer within the practice retention periods.

Practices should also transfer patient images for patients who have moved to another practice or geographic area, as they would for any part of a patient's medical record when transferring practices.

NB: Privacy Act, principle 9: *An agency that holds personal information shall not keep that information for longer than is required for the purposes for which the information may lawfully be used.* i.e. Digital images should not be retained for longer than required for the care of the patient.

The Privacy Act also allows digital images to be retained for longer than the typical retention periods where that retention support ongoing care of a patient. Thus images of a childhood condition required for lifetime care of the patient could be retained for the lifetime of the patient.

7. Patient Consent

It would be a very rare case that the patient was not aware that an image was being taken. However the patient must be informed of the purpose for which the images are being taken.

Taking Images for Referral

Where the images are intended to be transmitted as part of a referral; the patient must be informed that the images are to be electronically transmitted (or sent as prints) to the hospital.

8. Security

The requirements of good IT house-keeping should encompass much of the security requirements for maintaining the security and confidentiality of the images.

These include:

- Regular scheduled backup of the information (to avoid loss)
- Provision of virus checking on all workstations and servers (to avoid loss)
- Firewalls and internet security systems (to avoid unwanted intrusion)
- Patient confidentiality agreements with staff and contractors able to access the network, which includes respect of the privacy and confidentiality of the patients' information
- Access controls on the network directory such that only appropriate users of the practice network can access the directory where images are stored (to avoid unwanted access)
- Individual logons for all staff in a practice, no generic logons (where one logon is used by multiple staff).
- Regular requirement for users to change their passwords
- Disabling of staff logons once they are no longer employed by the practice

Many of these aspects of good security may need to be discussed with your IT service provider.