

OREGON STATE UNIVERSITY
STUDENT HEALTH SERVICES
POLICY/PROCEDURE

TITLE: Occupational Medicine Confidentiality Policy

APPLICATION: Occupational Medical Staff

RELATED POLICIES/PROCEDURES: Confidentiality Form, Confidentiality Policy- see Appendix

ORIGINAL RESIDES: Occupational Medicine Manual

COPIES RESIDE: None

CREATED DATE: 12/12/13

LAST REVISION DATE: not applicable

GENERAL GUIDELINES/DIRECTIONS:

Occupational Medicine (OCM) is under the greater umbrella of Student Health Services (SHS) which requires all staff members to sign a confidentiality statement annually. This statement declares "I understand that if I violate the provisions of this Confidentiality Statement, I will be subject to disciplinary action including possible termination of employment."

Communication between Human Resources, Institutional Animal Care and Use Committees (IACUC), Environmental Health and Safety (EH&S), and Occupational Medicine regarding employee needs and health status is strictly confidential. On all medical evaluation forms, health information is recommended to be sent via confidential fax, postal mail or campus mail. Occupational Medicine forms and emails state that health questionnaires should be returned through these secure channels.

Email notifications to employees clearly state "the confidentiality of health information cannot be guaranteed if this form is returned by email." Medical clearance sent by email by Occupational Medicine to EH&S and IACUC contain names and clearance statuses only. No medical information is disclosed.

Signature

Title

Date

Date Archived

Date Reviewed	Signature

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Appendix

TITLE: Confidentiality Policy

APPLICATION: All Staff

RELATED POLICIES/PROCEDURES: (Confidentiality Statement attached and stored: S drive/Forms & Handouts/Admin Masters/new employee masters/ confidentiality form)

ORIGINAL RESIDES: General Policy and Procedure Book (Administration office)

COPIES RESIDE: None

LAST REVISION DATE: 4/2005, 7/2008

GENERAL GUIDELINES/DIRECTIONS:

Student Health Services requires that all workers sign a confidentiality statement once per year. Workers are defined as faculty, classified staff, and students employed by SHS, as well as temporary employees, professional services contract employees, employees on contract with the University, volunteers, interns, practicum students, and student in professional rotations. In addition, any other person working at SHS in any capacity, paid or unpaid may be required to sign this statement.

Signature

Title

Date

Date Archived

Date Reviewed	Signature