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<b>Electro Diagnostics Unit</b>
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<b>Document No. : ED/FAC/08</b>							
<b>Title : Patient Data Management and Storage</b>							
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✓							
<b>A = New procedure requiring documented assessment of competence</b>							
<b>B = Modified procedure requiring documented reassessment of competence</b>							
<b>C = Familiarity with new procedure required (no assessment of competence necessary)</b>							
<b>D = Familiarity with changes required (no assessment of competence necessary)</b>							
	<b>Signature</b>	<b>Name (print)</b>	<b>Date</b>				
<b>Prepared by</b>							
<b>Reviewed and approved by</b>							

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### 1. INTRODUCTION

The purpose of this statement of procedure (SOP) is to describe the how patient data collected by the Visual Electrodiagnostic Testing Service (VETS) and related records are kept and maintained.

Patients are referred by consultant ophthalmologists to the VETS and subsequent testing comprises a range of key diagnostic tests: *electro-retinography*, *electro-oculography* and *visual evoked potential recording*, which form part of the clinical ophthalmological assessment of patients who may be suffering from a variety of hereditary or acquired eye diseases.

Following testing by the service a report is then written to the referring ophthalmologist by the VETS Director outlining the main clinical findings.

### 2. SCOPE

This SOP describes how information and documents are gathered and stored securely and that these records (paper and electronic) are easy to locate, appropriately named and stored in line with Data Protection Act 1998.

### 3. RESPONSIBILITIES

**Director of VETS**                      Dr Xxxxx xxxxx  
(BSOVS, University of Xxxxx).

The VETS Director has overall responsibility for ensuring that records are stored securely for the appropriate length of time then destroyed securely. In addition the director is also responsible for ensuring that information is:

- processed fairly and lawfully
- only obtained and used for the specified purposes of the VETS
- adequate, relevant and not excessive in relation to the purposes of the VETS
- accurate and where necessary kept up to date
- not kept longer than is necessary
- only shared with clinical personnel involved with the patient

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#### 4. RELATED DOCUMENTS

- Patient Management and Referral Procedure (ED FAC04)
- Referral Request Form (VETS002)
- Equipment, maintenance and Calibration (ED LAB07)
- Advisory Note on the 1998 Data Protection Act (UoB 022)
- VETS Report Procedure (ED FAC06)

#### 5. PROCEDURE

Many of the procedures outlined in this document are described in further detail in the *Patient Management and Referral Procedure*, ED FAC04.

##### 5.1. Receipt of EDU Referral Request.

5.1.1. An Ophthalmologist will refer a patient for a visual electrodiagnostic assessment via *Referral Request Form* (VETS002). This form will provide contact details and basic information relating to the type of tests the ophthalmologist requires in aiding his/her diagnosis of the patient's ocular condition.

5.1.2. Receipt of the request will trigger the generation of new patient file identified by the patient's name and hospital ID number. Both paper and electronic copies of these files are generated.

5.1.3. The hard copy (in a unique patient folder) is kept in filing cabinets in the Electrodiagnostic Unit (EDU) which has security restricted access via cardkey. The hard version will contain copies of the referral form, test results, report form and any other correspondence relating to this patient.

5.1.4. The electronic copy is housed on a password controlled computer in the EDU and contains similar information as the hard copy.

##### 5.2. Clinical Data Acquisition.

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5.2.1. On arrival at the EDU the patient's details are then checked and data resulting from the tests are stored on the Espion 2 system in a secure patient data base (*see: Equipment, maintenance and Calibration ED LAB07*).

5.2.2. Access to this patient database is on an EDU computer that is password restricted to the VETS Director.

### **5.3. Report to Ophthalmologist**

5.3.1. Following analysis of the data which is carried out by the VETS director on the Espion2 system a written report for the ophthalmologist is drawn and is posted via first class mail to them within 3 working days of the test appointment (see also document: *VETS Report Procedure, ED FAC06*).

5.3.2. Paper and electronic copies of this report are kept with the patients' files which are kept securely within the EDU.

### **6. Data Storage**

6.1. We will ensure that information is only shared with clinical personnel involved with the patient.

6.2. All records (paper and electronic) are to be stored in the EDU which is a secure unit with restrictive electronic cardkey access that is granted only to approved individuals.

6.3. In addition all electronic records are to be kept on computers in the EDU that are password controlled.

6.4. All data will be stored in line with the Data Protection Act 1998 (*see: Advisory Note on the 1998 Data Protection Act, UoB 022*).

6.5. Patient data will be stored for a minimum of 8 years for adults, for children, data will be stored until they are 25 years of age. After these periods have elapsed hard copies will be shredded and securely disposed of.

### **7. Electronic Data Backup**

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7.1. All electronic data from the Espion2 database will be backed up on a monthly basis – the system is set up to prompt the user to perform these backups.

7.2. All electronic patient files that contain copies of correspondence will be backed up on a similar monthly basis.

7.3. All backups will be kept securely in a location external to the EDU - the VETS Director's office (Richmond F13c) on a portable disk drive.