

## STANDARDS OF PRACTICE

# Patient Record Retention

Under Review: No

Issued By: Council: January 1, 2010 (*Patient Records*)

Reissued by Council: July 1, 2011; January 1, 2016 (*Patient Record Content  
and Patient Record Retention*)

The **Standards of Practice** of the College of Physicians & Surgeons of Alberta (“CPSA”) are the **minimum** standards of professional behavior and ethical conduct expected of all regulated members registered in Alberta. Standards of Practice are enforceable under the *Health Professions Act* and will be referenced in the management of complaints and in discipline hearings. CPSA also provides **Advice to the Profession** to support the implementation of the Standards of Practice.

The *Patient Records* standard was split into [Patient Record Content](#) and *Patient Record Retention* in January 2016. Please refer to both standards for all expectations related to patient records.

1. A regulated member **must** ensure a patient record<sup>1</sup>:
  - a. is compliant with relevant legislation;
  - b. is stored in a manner that protects patient confidentiality through administrative, technical and physical safeguards;
  - c. is under the custody and control of a custodian as defined in the [Health Information Act \(HIA\)](#);
  - d. is retrievable and available for authorized sharing within a reasonable time period to facilitate continuity of patient care; and
  - e. facilitates the:
    - i. collection of data for quality improvement activities; and
    - ii. sharing of standardized data sets to the Alberta Electronic Health Record (Netcare) or equivalent.

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<sup>1</sup> Refers to either a paper-based or electronic record.

**Terms used in the Standards of Practice:**

- “Regulated member” means any person who is registered or who is required to be registered as a member of this College. The College regulates physicians, surgeons and osteopaths.
- “Must” refers to a mandatory requirement.
- “May” means that the physician may exercise reasonable discretion.
- “Patient” includes, where applicable, the patient’s legal guardian or substitute decision maker.

2. A regulated member acting as a custodian<sup>2</sup> **must** have policies and procedures in place in accordance with the *HIA* that:
  - a. includes an information manager agreement, if an information manager has been identified;
  - b. establishes processes for the retention, protection, access, disclosure and secure destruction of patient health information; and
  - c. clarifies roles, expectations and accountabilities of all parties.
3. A regulated member acting as a custodian who shares patient information with other custodian(s) **must** have an information sharing agreement that clarifies access, transfer and return of patient records.
4. A regulated member acting as a custodian **must** designate a successor custodian<sup>3</sup> to ensure the retention and accessibility of patient records in the event the regulated member is unable to continue as custodian.
5. A regulated member **must** complete a [privacy impact assessment](#)<sup>4</sup> prior to changing or implementing any administrative practice or information system relating to the collection, use and disclosure of individually identifiable patient health information.
6. A regulated member **must** ensure patient records are retained and accessible for a minimum of:
  - a. ten (10) years from the date of last record entry for an adult patient; and
  - b. ten (10) years after the date of last record entry for a minor patient, or two years after the patient reaches or would have reached the age of eighteen (18), whichever is longer.
7. At the request of a patient, a regulated member **must** provide the patient with timely access to the patient's record in accordance with the *HIA*.

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<sup>2</sup> Regulated members are designated custodians under the [Health Information Regulation](#).

<sup>3</sup> Reference; *Health Information Act*, Section 35(1)(q)

<sup>4</sup> Reference: *Health Information Act*, Section 64

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8. A regulated member **may** charge a fee in accordance with the *HIA* for providing a patient with a copy of the patient’s record.
9. A regulated member **must not** charge a fee for providing another healthcare provider with limited patient information.

### RELATED STANDARDS OF PRACTICE

- [Closing or Leaving a Medical Practice](#)
- [Continuity of Care](#)
- [Episodic Care](#)
- [Non-Treating Medical Examinations](#)
- [Patient Record Retention](#)
- [Referral Consultation](#)
- [Relocating a Medical Practice](#)
- [Telemedicine](#)

### COMPANION RESOURCES

- Advice to the Profession:
  - [Physicians as Custodians](#)
  - [Electronic Communications & Security of Mobile Devices](#)
  - [Lost or Stolen Medical Records](#)
  - [Transition to Electronic Medical Records](#)
- [Are You Up to Standard? Patient Record Retention](#)
- [Custody of Patient Records form](#)
- [Generic Information Management Agreement template](#)
- [Vendor Information Management Agreement template](#)
- [Information Sharing Agreement for Electronic Medical Records sample](#)
- [PCN Information Sharing Agreement template](#)
- [Disclosure Agreement sample](#)
- [CMPA’s Electronic Records Handbook](#)
- [CMPA’s Smartphone recordings by patients](#)
- [OIPC’s Privacy Impact Assessments](#)

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