cpsa
COLLEGE OF PHYSICIANS
& SURGEONS OF ALBERTA

STANDARDS OF PRACTICE

Patient Record Management

DRAFT FOR REVIEW/CONSULTATION 33

Commented [CD1]: Renamed to capture breadth of standard.

Under Review: Yes
Issued By: Council: January 1, 2010 (*Patient Records*)
Reissued by Council: July 1, 2011; January 1, 2016 (*Patient Record Content* and *Patient Record Retention*)

cpsa
COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

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.

Please refer to both this and the *Patient Record Content* standard of practice for the full expectations related to patient records.

PREAMBLE

Regulated members are responsible for ensuring patient records are properly stored, secured, and maintained. Custodians remain responsible for meeting this standard even after retirement, changes in practice or the end of a treating relationship.[i]

Not all regulated members are defined as custodians: in some contexts, regulated members are defined as affiliates.[ii] The custodian status of a regulated member depends on factors including their practice location and employment status and can change for the same regulated member depending on these factors. It is essential that regulated members understand their role to ensure they are aware of their responsibilities for managing patient records in accordance with the *Health Information Act* (HIA).

Under the HIA, patients have a right to access their records. This right is independent of the status of a custodian or regulated member and continues even after the treating relationship with a given regulated member ends. Providing patients with access to their information is also an ethical obligation in accordance with the Canadian Medical Association's *Code of Ethics & Professionalism*.[iii] For the purpose of this standard, patient access is limited to the record-retention period required here.

Commented [CD2]: Rewritten for clarity.

This standard may differ from the institutional requirements where a regulated member provides health services. In this case, the more stringent requirements – whether they are institutional or CPSA standards – must be followed by the member.[iv]

For more detailed information on custodians, affiliates and agreements, please refer to the Physicians as Custodians of Patient Records Advice to the Profession document. Related standards and companion resources can be found at the end of this document.

DRAFT FOR REVIEW: CONSULTATION 33

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.

cpsa
COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

DEFINITIONS

Abandoned record: a patient health record a custodian has ceased maintaining, in accordance with HIA requirements, including failure to transfer custodianship to another custodian (e.g., the custodian is unwilling or unable to maintain the patient record).[v]

Affiliate: in accordance with the HIA, an individual employed by a custodian; a person who performs a service for the custodian as an appointee, volunteer or student or under a contract or agency relationship with the custodian; a health services provider who is exercising the right to admit and treat patients at a hospital as defined in the *Hospitals Act*; an information manager as defined in the HIA; or a person who is designated under the *Health Information Regulation* (HIR) to be an affiliate.[vi] A regulated member's role as affiliate of a custodian should be acknowledged in writing (e.g., in an information sharing agreement).[vii]

Custodian: in accordance with the HIA, a health services provider who is designated in the HIR as a custodian, or who is within a class of health services providers that is designated in the HIR for this purpose.

Financial record: for the purpose of this standard, a record documenting the charging and payment of fees for a non-Plan service.

Commented [CD3]: From *Dual Practice* draft.

Information manager: a person or body that processes, stores, retrieves or disposes of health information; in accordance with the HIR, strips, encodes or otherwise transforms individually identifying health information to create non-identifying health information; or provides information management or information technology services in a manner that requires use of health information. However, this does not include an individual employed by a custodian who performs any of these duties – see "affiliate" for more information.[viii]

Information manager agreement (IMA): an agreement between a data owner (e.g., a custodian) and third party (e.g., an external vendor or IT service provider. In accordance with the HIA, a regulated member who is the custodian of their patients' records must enter into a written agreement with an information manager for the provision of any services listed in "information manager."[ix]

Information sharing agreement (ISA): physicians who are custodians of their patient records are required to have an ISA if access to the records is shared with other custodians (e.g., in a group practice). ISAs clarify how shared patient records will be managed and what happens in the event the professional arrangement between custodians changes (e.g., a custodian leaves the practice, the partnership dissolves, etc.). Please see the Physicians as Custodians of Patient Records Advice to the Profession for more information.

DRAFT FOR REVIEW: CONSULTATION 33

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.

cpsa
COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

Limited patient information: for the purpose of this standard, a high-level summary of a patient's pertinent medical history to facilitate the provision of care by another healthcare provider.

Non-Plan services: a service provided by a physician that would otherwise be covered under the Alberta Health Care Insurance Plan (AHCIP) but is instead provided on a privately paid basis under the dual practice framework. Please refer to the *Dual Practice* standard of practice for more information.

Patient record: means a record, information or document that a physician is required to create and maintain, in accordance with CPSA's *Patient Record Content* and *Patient Record Management* standards of practice.

Secure destruction: effectively destroying a record so the information cannot be reconstructed or retrieved by:

- shredding or incinerating paper records in a controlled environment; or
- erasing information recorded or stored by electronic means in a manner that ensures all traces of the original data are destroyed, including any back-up copies.[ix]

Successor custodian: a person eligible to be a custodian under the HIR with the ability to ensure patients continue to have reasonable access to their records and facilitate continuity of care. A spouse, family member or acquaintance of the regulated member cannot be a successor custodian unless they are also eligible under the HIR.

STANDARD

Custodianship & governance

1. A regulated member acting as a custodian **must** establish and maintain a privacy management program consisting of policies and procedures that:
   a. include an information manager agreement, if applicable;
   b. establish processes for the retention, protection, access, disclosure and secure destruction of patient health information; and

DRAFT FOR REVIEW: CONSULTATION 33

Commented [CD4]: Link to be added.
Commented [CD5]: From *Dual Practice* draft.
Commented [CD6]: Reworded to align with new legislative definition.

cpsa
COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

c. define the roles, expectations and accountabilities of all parties.

2. A regulated member acting as a custodian who has an affiliate(s) **must**:

   a. identify the affiliate(s); and

   b. define their responsibilities for complying with the privacy management program, the HIA and other applicable legislation and regulations.

3. A regulated member acting as a custodian who shares patient information with another custodian **must** have an information sharing agreement outlining access, transfer and return of patient records.

4. In accordance with the *Closing or Leaving a Medical Practice* standard, a regulated member acting as a custodian **must** take reasonable steps to prevent abandonment of patient records by:

   a. having a plan in place for the administration of patient records; and

   b. designating a successor custodian[x] for unplanned events (e.g., sudden closure, incapacity, death) in accordance with CPSA Bylaws.

5. A regulated member with custody or control of patient records **must** provide former colleagues reasonable access to their patients' records to allow them to provide continuity of care and prepare medico-legal reports, legal defence or investigations.[xi] [xii]

6. A regulated member with custody or control of patient records **must** take reasonable steps to ensure that disputes or conflicts regarding access to patient records do not disrupt continuity of care or compromise patient care.

7. Notwithstanding clauses (1)-(6), unless a written agreement states otherwise, a regulated member practicing as a locum for a custodian **must** be aware that:

   a. they are not responsible for maintaining the patient records created in their locum capacity; and

   b. the regulated member for whom they are covering remains responsible for maintaining the patient records.

Commented [CD7]: From the HIA: added for awareness.

Commented [CD8]: From the HIA: clarifying expectations.

Commented [CD9]: Added to acknowledge existing requirements: helps prevent abandoned records.

Commented [CD10]: From CPSO: ensures physicians who have left a group practice and weren't provided copies of their records can still access necessary information.

Commented [CD11]: From CPSO and CPSNS: ensures patient care isn't compromised over record disputes.

Commented [CD12]: From CPSM: clarifies expectations for locums.

DRAFT FOR REVIEW: CONSULTATION 33

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.

cpsa
COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

Retention & destruction

8. Where required by applicable legislation and the *Dual Practice* standard of practice, a regulated member **must:**

   a. maintain patient records and any required financial records;

   b. ensure patient records required to be submitted to a provincial health information system are created and maintained in an electronic format that can be submitted to that system; and

   c. submit the patient records within thirty (30) days of the provision of service or within the period specified in applicable medical staff bylaws to the applicable provincial health information system.

9. A regulated member acting as a custodian **must** ensure patient records, and financial records where applicable, are retained and accessible in their entirety 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 a minor patient reaches, or would have reached, the age of eighteen (18) years.

      i. Retention requirements remain the same for deceased patients.

10. If patient records are subject to a request, complaint, investigation or legal proceeding, a regulated member acting as a custodian **must** retain the record until all proceedings conclude, even if this exceeds the timelines above.[xiii] [xiv]

11. A regulated member acting as a custodian **may only** destroy patient records once all retention obligations have ended.

Storage & security

12. A regulated member acting as a custodian **must** ensure patient records are stored safely and securely to protect integrity and confidentiality, including protecting against:

Commented [CD13]: Added to acknowledge new legislative requirements.

Link to be added.

Commented [CD14]: From CPSO: added for clarity.

Commented [CD15]: From CPSM: added for clarity.

DRAFT FOR REVIEW: CONSULTATION 33

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.

a. anticipated threats or hazards (e.g., routine EMR backups stored securely off-site);[xv] and

b. unauthorized access, use, disclosure or modification of the health information.

13. A regulated member acting as a custodian **must** ensure record management protocols are in place that regulate who may access patient records for what purpose, including:

a. confidentiality agreements for all individuals with access;

b. controls limiting access and use according to role and authority; and

c. verification of identity before access is granted.

14. A regulated member acting as a custodian who uses an EMR **must** ensure each authorized user has a unique ID and password.

15. A regulated member acting as a custodian **must not** share their unique credentials.

Commented [CD16]: From CPSM, CPSO, and CPSNL: ensures data integrity

EMR system requirements

Commented [CD17]: Section added to modernize standard.

16. In accordance with the HIA[xvi], a regulated member acting as a custodian **must** submit a Privacy Impact Assessment (PIA) prior to changing or implementing any administrative practice or information system relating to the collection, use and disclosure of individually identifiable patient health information.

Commented [CD18]: Current clause 5.

17. A regulated member acting as a custodian who uses an EMR **must** ensure compliance with all applicable laws, legislation and professional standards related to confidentiality, privacy and data collection.

Access, transfers & fees

18. A regulated member acting as a custodian **must** take reasonable steps to ensure:

a. enduring patient access to their records; and

b. timely availability of records when needed, including facilitating continuity of care.[xvii] [xviii] [xix]

Commented [CD19]: From CPSBC, CPSM, CPSO, CPSPEI, CPSNB, CPSNL, and CPSNS: ensures patients retain the right to access their records.

DRAFT FOR REVIEW: CONSULTATION 33

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.

cpsa
COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

19. A regulated member acting as a custodian who receives an access request **must**:

    a. provide timely access in accordance with the HIA;

    b. provide copies of all requested portions unless an HIA exception applies, and inform the patient when an exception is invoked; and

    c. assist the patient openly and completely, including explaining terms, codes or abbreviations upon request.[xvii] [xviii]

20. A regulated member acting as a custodian **may** transfer patient records to another designated custodian or a bonded record management facility for the purpose of secure storage.[xix]

21. A regulated member acting as a custodian **must not** charge a fee for providing limited patient information to another healthcare provider.

Commented [CD20]: From CPSM, CPSNB, and CPSO: ensures patient care isn't compromised over access/transfer disputes.

Commented [CD21]: From CPSM, CPSNB, and CPSO: ensures patient care isn't compromised over access/transfer disputes.

Commented [CD22]: Clause 9 of current version.

DRAFT FOR REVIEW: CONSULTATION 33

ACKNOWLEDGEMENTS

CPSA acknowledges the work of the Colleges of Physicians and Surgeons of British Columbia, Manitoba, New Brunswick, Newfoundland and Labrador, Nova Scotia, Ontario, Prince Edward Island and Saskatchewan in preparing this document.

RELATED STANDARDS OF PRACTICE

- *Charging Fees*
- *Closing or Leaving a Medical Practice*
- *Continuity of Care*
- *Dual Practice*
- *Episodic Care*
- *Non-Treating Medical Examinations*
- *Patient Record Content*
- *Referral Consultation*
- *Relocating a Medical Practice*
- *Virtual Care*

Commented [CD23]: Link to be added.

COMPANION RESOURCES

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.

cpsa
COLLEGE OF PHYSICIANS & SURGEONS OF ALBERTA

- Advice to the Profession:
  - Closing or Leaving a Medical Practice
  - Continuity of Care
  - Electronic Communications & Security of Mobile Devices
  - Episodic Care
  - Lost or Stolen Patient Records
  - Non-Treating Medical Examinations
  - Physicians as Custodians of Patient Records
  - Referral Consultation
  - Relocating a Medical Practice
  - Virtual Care
- CMPA:
  - Electronic Records Handbook
  - Smartphone recordings by patients
- Custody of Patient Records form
- Generic Information Management Agreement
  - Non-Disclosure Agreement
- Information Sharing Agreement for Electronic Medical Records
  - Disclosure Consent Form
- OIPC's Privacy Impact Assessments

DRAFT FOR REVIEW: CONSULTATION 33

[i] From CPSNS's *Management of Medical Records* Professional Standard (Mar. 2023), accessed Dec. 2025.
[ii] From CPSPEI's *Medical Records Management* Policy (Nov. 2024), accessed Dec. 2025.
[iii] From CPSS's *Transfer of Patient Records* Guideline (Jan. 2020), accessed Dec. 2025.
[iv] From CPSNB's *Patient Medical Records* Professional Standard (Apr. 2025), accessed Dec. 2025.
[v] From CPSM's *Maintenance of Patient Records in All Settings* (Feb. 2022), accessed Dec. 2025.
[vi] From the HIA: Part 1, Introductory Matters – Interpretation (Oct. 2025), accessed Dec. 2025.
[vii] From the HIA: Part 1, Introductory Matters – Interpretation (Oct. 2025), accessed Dec. 2025.
[viii] From the HIA: Part 1, Introductory Matters – Interpretation (Oct. 2025), accessed Dec. 2025.
[ix] From CPSBC's *Medical Records Management* Practice Standard (May 2022), accessed Dec. 2025.
[x] From the HIA: Part 1, Introductory Matters – Interpretation (Oct. 2025), accessed Dec. 2025.
[xi] From CPSM's *Maintenance of Patient Records in All Settings* (Feb. 2022), accessed Dec. 2025.
[xii] From CPSO's *Medical Records Management* Policy (June 2022), accessed Dec. 2025.
[xiii] From CPSNS's *Management of Medical Records* Professional Standard (Mar. 2023), accessed Dec. 2025.
[xiv] From CPSPEI's *Medical Records Management* Policy (Nov. 2024), accessed Dec. 2025.
[xv] From CPSM's *Maintenance of Patient Records in All Settings* (Feb. 2022), accessed Dec. 2025.
[xvi] From the HIA: Part 6, Duties and Powers of Custodians Relating to Health Information – General Duties and Powers: Duty to prepare privacy impact assessment (Oct. 2025), accessed Dec. 2025.
[xvii] From CPSM's *Maintenance of Patient Records in All Settings* (Feb. 2022), accessed Dec. 2025.

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.

cpsa
COLLEGE OF PHYSICIANS
& SURGEONS OF ALBERTA

[xviii] From CPSNB's *Patient Medical Records* Professional Standard (Apr. 2025), accessed Dec. 2025.
[xix] From CPSO's *Medical Records Management* Policy (June 2022), accessed Dec. 2025.

DRAFT FOR REVIEW: CONSULTATION 33

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.