Guidelines for Patient-Physician Electronic Mail anc. Tc

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Technology - Computer

Guidelines for Patient-Physician Electronic Mail and Text Messaging H-478.997

Topic: Technology - Computer
Meeting Type: Interim
Action: Reaffirmation
Council & Committees: NA

Policy Subtopic: NA
Year Last Modified: 2018
Type: Health Policies

New communication technologies must never replace the crucial interpersonal contacts that are the very basis of the **patient-physician** relationship. Rather, **electronic mail and** other forms of Internet communication should be used to enhance such contacts. Furthermore, before using **electronic mail** or other **electronic** communication tools, physicians should consider Health Information Portability **and** Accountability Act (HIPAA) **and** other privacy requirements, as well as related AMA policy on privacy **and** confidentiality, including Policies H-315.978 **and** H-315.989. **Patient-physician electronic mail** is defined as computer-based communication between physicians **and** patients within a professional relationship, in which the physician has taken on an explicit measure of responsibility **for** the patient's care. These **guidelines** do not address communication between physicians **and** consumers in which no ongoing professional relationship exists, as in an online discussion group or a public support forum.

(1) **For** those physicians who choose to utilize e-**mail for** selected patient **and** medical practice communications, the following **guidelines** be adopted.

Communication **Guidelines**:

(a) Establish turnaround time **for** messages. Exercise caution when using e-**mail for** urgent matters.
(b) Inform patient about privacy issues.
(c) Patients should know who besides addressee processes messages during addressee's usual business hours **and** during addressee's vacation or illness.
(d) Whenever possible **and** appropriate, physicians should retain **electronic and**/or paper copies of e-**mail** communications with patients.
(e) Establish types of transactions (prescription refill, appointment scheduling, etc.) **and** sensitivity of subject matter (HIV, mental health, etc.) permitted over e-**mail**.
(f) Instruct patients to put the category of transaction in the subject line of the message **for** filtering: prescription, appointment, medical advice, billing question.
(g) Request that patients put their name **and** patient identification number in the body of the message.
(h) Configure automatic reply to acknowledge receipt of messages.
(i) Send a new message to inform patient of completion of request.
(j) Request that patients use autoreply feature to acknowledge reading clinicians message.
(k) Develop archival **and** retrieval mechanisms.
(l) Maintain a mailing list of patients, but do not send group mailings where recipients are visible to each other. Use blind copy feature in software.
(m) Avoid anger, sarcasm, harsh criticism, **and** libelous references to third parties in messages.
(n) Append a standard block of **text** to the end of e-**mail** messages to patients, which contains the physician's full name, contact information, **and** reminders about security **and** the importance of alternative forms of communication **for** emergencies.
(o) Explain to patients that their messages should be concise.
(p) When e-**mail** messages become too lengthy or the correspondence is prolonged, notify patients to come in to discuss or call them.
(q) Remind patients when they do not adhere to the **guidelines**.
(r) **For** patients who repeatedly do not adhere to the **guidelines**, it is acceptable to terminate the e-**mail** relationship.

Medicolegal **and** Administrative **Guidelines**:
(a) Develop a patient-clinician agreement **for** the informed consent **for** the use of e-**mail**. This should be discussed with **and** signed by the patient **and** documented in the medical record. Provide patients with a copy of the agreement. Agreement should contain the following:
(b)Terms in communication **guidelines** (stated above).
(c) Provide instructions **for** when **and** how to convert to phone calls **and** office visits.
(d) Describe security mechanisms in place.
(e) Hold harmless the health care institution **for** information loss due to technical failures.
(f) Waive encryption requirement, if any, at patient's insistence.
(g) Describe security mechanisms in place including:
(h) Using a password-protected screen saver **for** all desktop workstations in the office, hospital, **and** at home.
(i) Never forwarding patient-identifiable information to a third party without the patient's express permission.
(j) Never using patient's e-**mail** address in a marketing scheme.
(k) Not sharing professional e-**mail** accounts with family members.
(l) Not using unencrypted wireless communications with patient-identifiable information.
(m) Double-checking all "To" fields prior to sending messages.
(n) Perform at least weekly backups of e-**mail** onto long-term storage. Define long-term as the term applicable to paper records.
(o) Commit policy decisions to writing **and electronic** form.

(2) The policies **and** procedures **for** e-**mail** be communicated to all patients who desire to communicate electronically.

(3) The policies **and** procedures **for** e-**mail** be applied to facsimile communications, where appropriate.

(4) The policies **and** procedures **for** e-**mail** be applied to **text and electronic messaging** using a secure communication platform, where appropriate.

Policy Timeline

BOT Rep. 2, A-00 Modified: CMS Rep. 4, A-01 Modified: BOT Rep. 24, A-02 Reaffirmed: CMS Rep. 4, A-12 Modified: BOT Rep. 11, A-17

Reaffirmation: I-18