



INODAYA Hospitals - Kakinada

Documentation code:

INH/IMS.Doc.No:15

Policy on Response to request for Medical Records

Prepared date: 11/11/2025

Reference: IMS.5.f.ABH Standards – 6th Edition

Issue Date: 11/11/2025

Issue no: 01

Review No: 0

Review date: 10/11/2026

1.0 POLICY:

Medical records are confidential documents and shall be kept confidential. Any request for access to information in medical records shall be duly scrutinized for proper and legal selection.

2.0 PURPOSE:

It is to ensure that all the policies are properly laid down by the hospital in response to request for access to information in the MRD department

3.0 DEFINITIONS:

Nil

4.0 ABBREVIATIONS:

TPA- Third party administrator

5.0 SCOPE:

Primary consultant, Patient and TPA

6.0 RESPONSIBILITY:

Medical Record Department

7.0 DISTRIBUTION:

Medical Record Department, all HODs

8.0 PROCESS DETAILS:

DESCRIPTION OF THE PROCESS

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Medical records are confidential documents and shall be kept confidential. Any request for access to information in medical records shall be duly scrutinized for proper and legal selection.

The physical form of medical records is the property of the hospital and the information contained within it is the property of patient.

Information in the medical record shall be accessible only to following as per law

1. To the patient
2. To the healthcare provider who are directly involved in provision of care to the patient
3. To the court of law if asked for
4. To third party payer LIC, Insurance companies etc.
5. To any other person only after valid consent from the patient (Husband/Wife/Son), with submission of self attested identity based on Government documentary evidence. Such document is to be kept with charts.

Following protocols shall be followed in case of request for access to information in medical record.

- MRD staff shall respond in following manner to the request for information in medical records

Request from primary consultant

1. If primary consultant of the patient requests for information in medical record of his/her patient, he/she shall be provided the information or the record to be seen in MRD only.
2. Fill the details in issue register by MRD personnel and provide the medical record to him/her, but IP records not to be issued except Police/Court/Official enquiry/Accounts purposes by retaining all proper entries in the movement register for monitoring the same till the records are received back.

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Request from patient

1. Patient has to be provided with his medical record information if he sought for it – by the concerned primary consultant / designated medical officer
2. If the patient requests for a copy of the medical records he shall be provided the same after collecting Photostat charges & with approval of the Deputy Medical superintendent
3. Check the identification detail of the patient and cross check with medical record entry, before permitting the access – after approval of the medical director

Request from other medical staff of the hospital

1. The records for which patient has provided a consent for sharing the information on account of educational purposes can only be shared
2. Fill the issue register by MRD staff and handover the document. Records will not be signed but can be examined in MRD in presence of responsible staff member & will keep such requests with the chart only signed by him / HR.

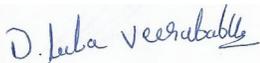
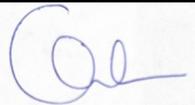
Request from TPA and other third party payer

1. Access shall be given only for specific and identified queries related to medical treatment
2. Medical administrator shall check the identification details of the person requesting the access on account of TPA organization
3. MRD staff shall be telephonically instructed about the person
4. TPA personnel can access the medical record only in presence of MRD staff
5. If they seek a photocopy of a specific test result, it shall be provided

Request from Government organization

1. They shall be allowed to access only for specified purpose as stated by state authorities
2. Access shall be provided in presence of MRD staff

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3. Check a written evidence of permission from state authorities regarding access, which should specify the purpose for access
4. Keep a note of this access in medical record & for approval by the medical director

Request from patient's relatives or other person

1. They shall be allowed only if they possess valid written consent from the patient
2. Check the consent and identification of the patient and cross check with Medical records – and submit for approval to the medical director
3. Keep a record of this access. Also keep the copy of consent given by patient

Do not provide access if,

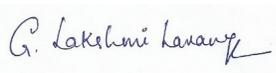
1. Identification of the person cannot be established satisfactorily
2. If relevant documents as mentioned above is not available
3. Any person or organization, other than those mentioned above ask for access
4. In case of confusion contact Medical administrator

8.1 ACTIVITY AND RESPONSIBILITY

8.2

S.No	Activity	Responsibility
1	A proper policy for response to request for access to information in the MRD department must be developed & followed.	Medical Record Department & Medical Director
2	All the protocols shall be followed in case of request for access to information in medical record.	Medical Record Department & all the personnel requiring the information.

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