

RESOLUTION

Resolution: 306C.20

SUBJECT: Updated Medical Record Policy Regarding Suspended or Revoked Physicians
SUBMITTED BY: Whitfield-Murray Medical Society
REFERRED TO: Reference Committee C

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1 Whereas, when a physician retires, has been suspended, or has their license is revoked, patients often have
2 no warning that their physician’s office is closed and no ability to obtain their medical records to transfer
3 their care to another physician; and
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5 Whereas, Georgia law states that it is the physician who not only owns the patient’s medical records, but
6 also possesses the decision-making ability regarding sharing the records once a patient consents or signs a
7 confidential waiver, except in cases of a subpoena or court order; and
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9 Whereas, patients who are aware of their physician retiring are more likely to obtain their medical records
10 upon request, than those patients who have had their physician suspended or revoked; and
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12 Whereas, the inability of patients to obtain their medical records could be detrimental for chronically ill
13 patients who will need frequent follow-ups, creating increased hospitalizations with increased costs that
14 may have been avoidable; and
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16 Whereas, there are no statutes in the state of Georgia, nor AMA policy clearly defining the suspended or
17 revoked physician’s responsibilities for patients with their medical records; and
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19 Whereas, the state of Texas does have a policy for these physicians; and
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21 Whereas, the Texas Medical Board has implemented a policy requiring a suspended or revoked Texas
22 physician to appoint a Board-approved custodian tasked with notifying patients within 30 days for the
23 purpose of giving them their medical records; now therefore be it
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25 **RESOLVED, the Medical Association of Georgia (MAG) will craft legislation for the Georgia**
26 **General Assembly requiring a suspended or revoked physicians to immediately (at the time of**
27 **board action) designate a custodian approved by the Georgia Composite Medical Board who will**
28 **contact that physician’s patients and make arrangements for them to receive their medical records**
29 **within 30 days; and be it further**
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31 **RESOLVED, that the MAG delegation to the American Medical Association (AMA) present a**
32 **resolution asking for the AMA to include in AMA policy 3.31 that physicians whose license has**
33 **been suspended or revoked should immediately (at the time of board action) designate a State**
34 **Medical Board-approved custodian who will contact that physician’s patients and make**
35 **arrangements for them to receive their medical records within 30 days.**

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AMA Policy

3.3.1 Management of Medical Records

Medical records serve important patient interests for present health care and future needs, as well as insurance, employment, and other purposes.

In keeping with the professional responsibility to safeguard the confidentiality of patients' personal information, physicians have an ethical obligation to manage medical records appropriately.

This obligation encompasses not only managing the records of current patients, but also retaining old records against possible future need, and providing copies or transferring records to a third party as requested by the patient or the patient's authorized representative when the physician leaves a practice, sells his or her practice, retires, or dies.

To manage medical records responsibly, physicians (or the individual responsible for the practice's medical records) should:

- (a) Ensure that the practice or institution has and enforces clear policy prohibiting access to patients' medical records by unauthorized staff.
- (b) Use medical considerations to determine how long to keep records, retaining information that another physician seeing the patient for the first time could reasonably be expected to need or want to know unless otherwise required by law, including:
 - (i) immunization records, which should be kept indefinitely;
 - (ii) records of significant health events or conditions and interventions that could be expected to have a bearing on the patient's future health care needs, such as records of chemotherapy.
- (c) Make the medical record available:
 - (i) as requested or authorized by the patient (or the patient's authorized representative);
 - (ii) to the succeeding physician or other authorized person when the physician discontinues his or her practice (whether through departure, sale of the practice, retirement, or death);
 - (iii) as otherwise required by law.
- (d) Never refuse to transfer the record on request by the patient or the patient's authorized representative, for any reason.
- (e) Charge a reasonable fee (if any) for the cost of transferring the record.
- (f) Appropriately store records not transferred to the patient's current physician.
- (g) Notify the patient about how to access the stored record and for how long the record will be available.
- (h) Ensure that records that are to be discarded are destroyed to protect confidentiality.

MAG Policy

None