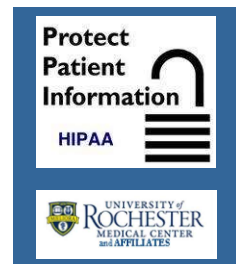


HIPAA HIGHLIGHTS

March 2026



When Sharing is Inappropriate

We have had a few Highlights recently that discussed ways to **prevent inappropriate or accidental disclosure** of Protected Health Information (PHI). If you missed them, head over to the [HIPAA Highlights](#) page to catch up. Under HIPAA, "disclosure" means sharing, granting access to, or releasing information to someone outside the organization that holds it. The Privacy Rule and URM policies define which [uses and disclosures](#) are required by law and under what conditions they are permitted.

WHAT can go wrong

This list includes a few common mistakes reported, but it is not exhaustive:

- Patient complaint or concern about an employee's access
- Printed visit summaries or discharge instructions from a shared printer or fax machine include more than one person's information
- Videos or photos taken in the healthcare setting and shared via text or social media when they have visible PHI, such as computer screens or patients in the background
- Emails include the wrong recipient, or bulk mailings show the recipients instead of being blind copied

WHEN you report the incident, provide a very detailed account of **what/when/who**:

- The name and medical record number of the person whose information was disclosed
- The name, if applicable, and medical record number of the unintended recipient
- The information disclosed (was it only name and address, or inclusive of diagnosis, testing, treatments, etc.)
- The date of the error, including the date it was discovered and by whom
- The date the materials were retrieved or destroyed; and
 - TIP: Misdirected emails should be recalled, recall reports kept, and recipients of unintended emails should attest to deleting the email and deleting it from their trash folder
- and, lastly, described the circumstances that led to the error along with any other relevant details.

WHO sends and receives the report

IMMEDIATELY notify your supervisor. If you can retrieve the information or stop the disclosure quickly, please do! You or your supervisor must report this event to the HIPAA Privacy Officer via:

- Online [RL Solutions](#) Report; or
- URM Integrity Helpline at 585-756-8888 or [online](#).
- If you witness something concerning, anonymous reporting is available for each.

ALWAYS remember that if you don't have a [legitimate business-related reason](#) to access PHI, whether it's a patient's health record or a printed list identifying patients, you should not do so.

For information on this or other HIPAA-related topics, please refer to [URMC's HIPAA Intranet site](#) or contact your [Privacy Officer or HIPAA Security Official](#).