

TITLE: PHOTOGRAPHING, VIDEO RECORDING, AUDIO RECORDING OF PATIENTS AND STAFF

POLICY:

It is the policy of the Hospital, consistent with its respect for patients' privacy and confidentiality and adherence to the Health Insurance Portability and Accountability Act (HIPAA) privacy regulations to obtain written consent to photograph, video or audio record ("film") patients and/or staff ("subjects").

PURPOSE:

This policy applies to "filming" for (1) external purposes and (2) internal purposes, **including education, training and performance improvement.**

I. PROCEDURES FOR EXTERNAL PURPOSES:

Public Affairs must be notified in advance of "filming" for external purposes (defined as "filming" that will be seen or heard by the public, including third party affiliates).

- 1. Requests by television crews, production companies, newspapers, magazines, or other media-related entities ("film crews") to photograph, video/audio tape and/or to transmit live productions from hospital locations, including inpatient and outpatient areas, must be approved by Public Affairs 48 hours in advance.**
- 2. Public Affairs will facilitate approval of "filming" of "subjects," including oversight to obtain written consent, such as HIPAA Authorization and release of protected health information from patient or the patient's legal guardian and General Appearance Releases from staff and faculty. Public Affairs will coordinate the execution of location agreements and other documents required by law and/or Hospital policy before filming may commence.**
- 3. The "subjects" to be "filmed" must be informed of the nature and purpose of the "filming" and of its intended use, and the consent to appear and to release protected health information must be documented on the appropriate consent form. Future uses of the same "filming" require "subjects" to re-consent if the new use is for an unrelated or unknown purpose by the "subjects."**

4. A signed consent form is to be retained by Public Affairs in accordance with the Hospital Retention Policy. A copy of the consent form is to be kept in the patient's medical record.

II. PROCEDURES FOR INTERNAL PURPOSES

Internal purposes include but are not limited to education, training and performance improvement. These guidelines apply only when there is no potential for "external use."

1. "Filming" to be used for internal purposes, other than for the identification, diagnosis, or treatment of the patient, requires the written consent of the patient or the patient's legal guardian
2. The "subjects" to be "filmed" must be informed of the nature and purpose of the filming and of its intended use.
3. For noninvasive procedures, including outpatient visits, refer to Form "Consent to Photograph, Video Record, or Audio Record for Internal Organizational Purposes"(Form 51314,51314SP).The signed consent must be filed in the patient's medical record. A HIPAA media consent form is not required, and external use is prohibited. Questions about consent for internal purposes should be directed to Patient Services Administration.
4. For surgical/invasive procedures, refer to Form "Consent for Surgical/Invasive_Procedure". The signed consent must be documented by initialing the appropriate box on the form and filed in the patient's medical record. A HIPAA media consent form is not required, and external use is prohibited. Questions about consent for internal purposes should be directed to Patient Services Administration.

III. GENERAL PROCEDURES: FOR PATIENTS:

1. In all cases, patients have the right to refuse consent and/or to rescind consent. For external purposes, a patient or patient's surrogate may revoke consent at any time by sending a written notice, signed by the patient or on the patient's behalf, to Public Affairs. For internal purposes, a patient may revoke consent at any time by sending written notice, signed by the patient or on the patient's behalf, to Patient Services Administration. Patients have the right to request cessation of "filming."
2. Photographs of a patient, other than a newborn, taken by a member of the patient's family may be permitted if the patient does not object, it is not

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prohibited by the patient care unit, and it is not disruptive to the staff or other patients. Patients and their visitors may not "film" care, treatment, other patients, staff or faculty.

3. Obstetrical Patients:
 - a. Photography by the patient's family or friends is permitted in the labor room, birthing/delivery room for vaginal delivery, or operating room for cesarean delivery.
 - b. Videotaping by the patient's family or friends is not permitted in the labor, birthing or delivery rooms, regardless of type of delivery.
 - c. Videotaping and photography by the patient's family or friends are permitted in the mother's room.
4. Burn Patients: Inquiries regarding videotaping or photography of patients in the Burn Center are to be directed to the Burn Center's administrative coordinator.
5. "Filming" of hospital staff is not permitted without their expressed consent.

FOR STAFF:

Hospital staff attending NYP Events, including meetings, celebrations, recognitions and fundraising events where "filming" is taking place, are assumed to provide implied consent to be "filmed" for internal and external purposes.

For questions about filming for external purposes:

Contact Public Affairs: E-mail address: pr@nyp.org

Questions from all campuses (Columbia, Weill Cornell, MSCH, Allen, Westchester, LMH) can be directed to either of the Public Affairs offices.)

New York Presbyterian/Columbia
627 West 165th Street
Service Building 6-621
(T) 212-305-5587 x 55587
(F) 212-305-8023

New York Presbyterian/Weill Cornell
425 East 61st Street, 7th floor
(T) 212-821-0560 x 10560
(F) 212- 821-0567

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After regular business hours, please call the Administrator on Call (AOC).

For questions about filming for internal purposes, contact Patient Services Administration:

Columbia and MSCH: 212-305-5904

Allen Hospital: 212-932-4321

Weill Cornell: 212-746-4293

Westchester: 914-997-5920

Lower Manhattan Hospital: 212-312-5034

After regular business hours, please call the Administrator-on-Call (AOC):

RESPONSIBILITY:

Vice President Public Affairs

Senior Vice President Patient Services Administration

POLICY DATES:

ISSUED: November 2007

Reviewed: March 2010; March 2012

Revised: April 2014 (Combined with Policy P180)

Medical Board Approval: November 2007