

REQUEST FOR RECORDS DISPOSITION AUTHORITY
(See Instructions on reverse)

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JOB NO. *NAFAD-91-11*

TO: **GENERAL SERVICES ADMINISTRATION
NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408**

DATE RECEIVED
1-22-91

1. FROM (Agency or establishment)
DEPARTMENT OF THE AIR FORCE

NOTIFICATION TO AGENCY
In accordance with the provisions of 44 U.S.C. 3303, the disposal request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10. If no records are proposed for disposal, the signature of the Archivist is not required.

2. MAJOR SUBDIVISION
Directorate of Information Management

3. MINOR SUBDIVISION
Policy Division, SAF/AATA

4. NAME OF PERSON WITH WHOM TO CONFER
Mr. R. P. Dwyer

5. TELEPHONE EXT. DATE
703-614-3494 ~~09 JAN 1991~~
MAY 28 1991

ARCHIVIST OF THE UNITED STATES
[Signature]

6. CERTIFICATE OF AGENCY REPRESENTATIVE

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records, that the records proposed for disposal in this Request of 3 page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, if required under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies, is attached.

A. GAO concurrence. is attached; or is unnecessary.

B. DATE *09 JAN 1991* C. SIGNATURE OF AGENCY REPRESENTATIVE *Grace T Rowe* D. TITLE **GRACE T. ROWE
Chief, Records Mgmt Policy Branch
Directorate of Information Mgmt**

7 ITEM NO	8 DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods)	9 GRS OR SUPERSEDED JOB CITATION	10 ACTION TAKEN (NARS USE ONLY)
1	<p style="text-align: center;">LABORATORY RECORDS (Table 160-3) (Applicable Air Force-wide)</p> <p>Rule 11. Changed the disposition of autopsy reports to "file in deceased's clinical and health records" vice "retain until inactivation of facility, at which time obtain disposition instructions from SAF/AADQ." Reason for change is that the originals of Autopsy Protocol and Authorization for Autopsy belong in the deceased's clinical and health records. We changed the description to include only the above two mentioned records, or similar records.</p> <p>2 Rule 11.1. Added, to dispose of per AFR 160-55 former Rule 11 autopsy report support records at Area Histopathology Centers and medical facilities that have a pathologist or an anatomic pathology service. Reason is that Histopathology Centers and medical facilities (Air Force, Army and Navy) dispose of such laboratory records per AFR 160-55, Armed Forces Institute of Pathology and Armed Forces Histopathology Centers. This is a joint Armed Forces regulation, per extract attached.</p>	<p>NN-170-33</p>	

Copies sent to agency NCF 6/19/91

REQUEST FOR RECORDS DISPOSITION AUTHORITY - CONTINUATION

JOB NO.

PAGE

7
ITEM
NO

8 DESCRIPTION OF ITEM
(With Inclusive Dates or Retention Periods)

9. GRS OR
SUPERSEDED
JOB
CITATION

OF
10. ACTION
TAKEN
(NARS USE
ONLY)

3 Rule 11.2. Added, to dispose of when no longer needed former Rule 11 autopsy report support records at medical facilities that do not have a pathologist or an anatomic pathology service. As these are duplicate records (originals forwarded to Area Histopathology Center), this disposition meets Air Force needs.

4 Rule 12. Changed the disposition of indexes and ledgers to surgical and autopsy specimens to "destroy/delete upon disposition of related surgical/autopsy records" vice "retain in laboratory until inactivation of hospital, at which time obtain disposition instructions from SAF/AADQ." Reason is that when surgical and autopsy specimens are destroyed, indexes and name cards for these specimens are no longer needed. We added a records location noting that Rule 12 applies only to Area Histopathology Centers and medical facilities that have a pathologist or an anatomic pathology service.

NN-170-33

5 Rule 12.1. Added, to dispose of when no longer needed indexes and ledgers to surgical and autopsy specimens at medical facilities that do not have a pathologist or an anatomic pathology service. If these indexes do not go to Area Histopathology Center with related surgical/autopsy records, the medical facility no longer needs them.

6 Note 1. Added, to state that Area Histopathology Centers and medical facilities that have a pathologist or an anatomic pathology service will forward case files for autopsies diagnosed as malignant and related indexes (Rules 11.1 and 12) to the Armed Forces Institute of Pathology.

7 Note 2. Added, to state that medical facilities that do not have a pathologist or an anatomic pathology service will forward original autopsy report support records and related indexes (Rules 11.2 and 12.1) to Area Histopathology Center.

TABLE 160-3

LABORATORY RECORDS

R U L E	A	B	C	D
	If records are	consisting of	which are	then
11	autopsy reports	*Medical Record-Autopsy Protocol (SF 503), Clinical Record-Authorization for Autopsy (SF 523), or similar records		*file in deceased's clinical and health records.
11 .1 *		copy of autopsy protocol, abstracts of clinical records, and other records and materials which relate to individual cases	at Area Histopathology Centers and medical facilities that have a pathologist or an anatomic pathology service	destroy per AFR 160-55 (note 1).
11 .2 *			at medical facilities that do not have a pathologist or an anatomic pathology service (note 2)	destroy when no longer needed.
12	indexes and ledgers to surgical and autopsy specimens	clinical reference and alphabetical name cards and ledgers	*at Area Histopathology Centers and medical facilities that have a pathologist or an anatomic pathology service	*destroy/delete upon disposition of related surgical/autopsy records (note 1).
12 .1 *			at medical facilities that do not have a pathologist or an anatomic pathology service (note 2)	destroy/delete when no longer needed.

NOTES:

*1. Forward case files for autopsies diagnosed as malignant to the Armed Forces Institute of Pathology.

*2. Forward original records to Area Histopathology Center.