

NOTICE - SOME ITEMS SUPERSEDED OR OBSOLETE

Schedule Number: NC1-090-78-09

Some items in this schedule are either obsolete or have been superseded by new NARA approved records schedules. This information is accurate as of: 2/9/2022

ACTIVE ITEMS

These items, unless subsequently superseded, may be used by the agency to disposition records. It is the responsibility of the user to verify the items are still active.

All items not listed below are active.

SUPERSEDED AND OBSOLETE ITEMS

The remaining items on this schedule may no longer be used to disposition records. They are superseded, obsolete, filing instructions, non-records, or were lined off and not approved at the time of scheduling. References to more recent schedules are provided below as a courtesy. Some items listed here may have been previously annotated on the schedule itself.

Item 7a superseded by DAA-443-2017-0004-0001

The following items are superseded by DAA-0443-2018-0002: 8, 9, 28A, 28B, 47, 56, 64-67, 74-78B, 82, 87, 91, 93

The following items are superseded by DAA-0443-2019-0005: 7a-1743/11 00H5 (in part), 19a-1743/2800A4A, 19b-1743/2800A4B, 6-1743/8000G1, 29-1743/8000A4A

Items 11, 14, 60, 122 superseded by N1-443-00-003

Item 32a superseded by NC1-443-85-01

Items 100-102 superseded by N1-443-98-001

Item 117 superseded by N1-443-93-001.

NOTICE - SOME ITEMS SUPERSEDED OR OBSOLETE

Rec'd NCO 11 Jun 78

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS

(See Instructions on Reverse)

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| DATE RECEIVED NCI 90 78 | JOB NO. JUN 13 1978 109 |
| NOTIFICATION TO AGENCY | |
| In accordance with the provisions of 44 U.S.C. 3303a the disposal request, including amendments, is approved except for items that may be stamped "disposal not approved" or "with-drawn" in column 10. | |
| 8-7-78 <i>James E. O'Neill</i> (Date) <i>acting</i> Archivist of the United States | |

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

1. FROM (AGENCY OR ESTABLISHMENT)
DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

2. MAJOR SUBDIVISION
PUBLIC HEALTH SERVICE

3. MINOR SUBDIVISION
NATIONAL INSTITUTES OF HEALTH: CLINICAL CENTER

4. NAME OF PERSON WITH WHOM TO CONFER
Betty Barnett

5. TEL. EXT.
496-4606

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 46 page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified.

5/12/78 *Eugene J. Read, Jr.*
Date for Russell O. Hess Department Records Management Officer
(Signature of Agency Representative) (Title)

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|-------------|--|----------------------|------------------|
| | <p align="center"><u>The Clinical Center</u></p> <p>The Clinical Center is a combined research laboratory and hospital operated by the Federal Government as a part of the National Institutes of Health at Bethesda, Maryland.</p> <p>The roots of the Institutes can be traced to 1798, when President Adams signed a bill establishing the Marine Hospital Service for merchant seamen, the first facility in what much later became the Public Health Service. In 1930 a "National Institute of Health" opened. But not until 1953 was a Clinical Center established for patients who, while seeking treatment themselves, would serve the research needs of the various specialized Institutes.</p> <p>Today the Clinical Center accommodates about 500 carefully selected patients. The Center:</p> <ul style="list-style-type: none"> • Provides patient facilities and services, other than physician care, for clinical investigations in the Clinical Center. • Conducts research in clinical care, hospital administration, and related areas. • Supervises residency and other training programs. | | |

Copy: NWF
WNRC 8/9/78 140 items

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| | <p>Each patient admitted to the Clinical Center is chosen because the person previously has been diagnosed as having the particular kind or stage of a disease or other condition that is required for an Institute research project.</p> <p>Most of the clinical research conducted by the Institutes with Center patients is concerned with the more common serious diseases. For this reason the Center seldom admits patients with rare and unusual diseases or those with conditions which doctors have been unable to diagnose. The Clinical Center is not a diagnostic clinic and its facilities are not used for that purpose.</p> <p><u>Clinical Center Records: An Overview</u></p> <p>Most records created by the Clinical Center are generally similar to those of other Federal general treatment and research hospitals. The patients' records in the Medical Record Department comprise the largest series, which is the key documentation of the essential treatment and research programs of the Center as they affect individuals. The three other most voluminous series are the X-rays (Diagnostic Radiology Department); the body and organ scans (Nuclear Medicine Department); and the Central File (Office of Administrative Management).</p> <p>All other Center records relate in some way to patient treatment and welfare, such as environmental matters, recreation, routine services, testing services, drug services, nursing services and the like. Several relatively small but important series document the relationships between the Center and the Institutes.</p> <p>Most other series document daily facilitative functions. Many of the records warrant only relatively short retention periods. Several series, however, present somewhat complex appraisal problems because of three unique aspects of the Center:</p> <ul style="list-style-type: none">•It is the only Federal hospital exclusively devoted to research. | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| | <ul style="list-style-type: none">•Its role as the clinical hospital arm of the Institutes is unique in the Federal medical system.•It sets policy unilaterally in some important areas of day to day patient care. Policy in other areas is set at NIH and HEW levels. <p><u>Present Clinical Center Schedule</u></p> <p>Except for a smattering of authorizations for small series, the only Center schedule was authorized in 1957. It appears as item 9 of the present NIH schedule (H.R. No. 479, 85th Congress, 1st Session) which states:</p> <p style="padding-left: 40px;">"Clinical Center Subject and Patient Care Files.</p> <p style="padding-left: 40px;">Retain, except for portions covered by Department Records Control Schedules and those consisting of nonrecord material...."</p> <p>Recently authorized schedules concern the microfilming of patients' records, and the destruction of certain X-rays. These will be noted in detail at pertinent points in this schedule.</p> <p>This records control schedule supersedes all previous authorizations affecting the Clinical Center records described.</p> <p><u>Clinical Center Records Not Covered By This Schedule</u></p> <ul style="list-style-type: none">•All records covered by the General Records Schedules, except where shorter retention periods are being requested. Pertinent items from the schedules will be issued on an NIH-wide basis.•All records covered by National Archives Job No. NCl 90-77-2. That schedule provides for the selective retention and | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p>disposal of various series wherever located in the National Institutes of Health, including the Clinical Center. Among other records, the schedule covers:</p> <ul style="list-style-type: none">Policy and program recordsOrganization and function recordsRecord copies of directivesReports filesCommittee filesPublic affairs filesResearch files <p>This schedule will be issued to all elements of NIH, including the Clinical Center.</p> <p>Any records described in this schedule which may be covered in the NIH-wide schedule cited above are included so that they can be specifically identified in the Clinical Center.</p> <ul style="list-style-type: none">• All machine readable records. These records will be covered by a separate NIH-wide schedule presently being prepared by the National Archives and Records Service. | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <u>Item Index</u> | | |
| | <u>Organization</u> | <u>Items</u> | <u>Pages</u> |
| | Office of the Director | 1-6 | 7-9 |
| | Office of Administrative Management | 7-9 | 9-11 |
| | Blood Bank Department | 10-17 | 12-14 |
| | Office of Clinical and Management Systems | 18-21 | 14-16 |
| | Clinical Pathology Department | 22-27 | 16-17 |
| | Office of Clinical Reports and Inquiries | 28-31 | 17-19 |
| | Diagnostic Radiology Department | 32-36 | 19-22 |
| | Environmental Sanitation Control Department | 37 | 22 |
| | Fabric Care Department | 37 | 22 |
| | Medical Record Department | 38-39 | 22-23 |
| | Nuclear Medicine Department | 40-44 | 23-25 |
| | Nursing Department | 45-62 | 25-29 |
| | Nutrition Department | 63-82 | 29-33 |
| | Office of Occupational Medicine | 83 | 34 |
| | Outpatient Department | 84-87 | 34-35 |
| | Patient Services Department | 88-98 | 35-38 |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN | | | | | | | | | | | | | | | | | | |
|--|---|----------------------------|---------------------|--------------|---------------------|--------|-------|--|---------|-------|---------------------------|---------|----|------------------------|---------|-------|----------------------------------|---------|----|--|--|
| | <table border="0"> <thead> <tr> <th><u>Organization</u></th> <th><u>Items</u></th> <th><u>Pages</u></th> </tr> </thead> <tbody> <tr> <td>Pharmacy Department</td> <td>99-115</td> <td>38-42</td> </tr> <tr> <td>Office of Planning and Policy Development</td> <td>116-118</td> <td>42-43</td> </tr> <tr> <td>Rehabilitation Department</td> <td>119-120</td> <td>44</td> </tr> <tr> <td>Social Work Department</td> <td>121-123</td> <td>45-46</td> </tr> <tr> <td>Spiritual Ministry Department</td> <td>124-125</td> <td>46</td> </tr> </tbody> </table> | <u>Organization</u> | <u>Items</u> | <u>Pages</u> | Pharmacy Department | 99-115 | 38-42 | Office of Planning and Policy Development | 116-118 | 42-43 | Rehabilitation Department | 119-120 | 44 | Social Work Department | 121-123 | 45-46 | Spiritual Ministry Department | 124-125 | 46 | | |
| <u>Organization</u> | <u>Items</u> | <u>Pages</u> | | | | | | | | | | | | | | | | | | | |
| Pharmacy Department | 99-115 | 38-42 | | | | | | | | | | | | | | | | | | | |
| Office of Planning and Policy Development | 116-118 | 42-43 | | | | | | | | | | | | | | | | | | | |
| Rehabilitation Department | 119-120 | 44 | | | | | | | | | | | | | | | | | | | |
| Social Work Department | 121-123 | 45-46 | | | | | | | | | | | | | | | | | | | |
| Spiritual Ministry Department | 124-125 | 46 | | | | | | | | | | | | | | | | | | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p style="text-align: center;"><u>Office of the Director</u></p> <p>Except for records relating to the NIH Associate Program, and records of the Educational Services Officer, files in units of the Office of the Director are:</p> <ul style="list-style-type: none">• Covered by records retention standards contained in the General Records Schedules, (pertinent standards will be issued on an NIH-wide basis), or are• Personal records, or are• Non-record in nature. <p>Generally, records created in the Office of the Director, or received for information or action from other units of the Clinical Center, are forwarded to the Central File in the Office of Administrative Management.</p> <hr/> <p><u>NIH Associate Program</u></p> <p>Administers selection program involving short term service in NIH for qualified medical personnel as clinical, research, or staff associates.</p> <hr/> <p>1. <u>Associates' files.</u></p> <p>a. <u>For selected applicants:</u> Contains vital information evaluations, grade transcripts, selection check lists, correspondence, and related papers.</p> <p><u>Disposition:</u></p> <p>Destroy 2 years after associate leaves.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| | <p>b. <u>For rejected applicants.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |
| 2. | <p><u>Card summaries</u>, containing vital summary data on associates and their tours of duty.</p> <p><u>Disposition:</u></p> <p>Destroy 10 years after associate leaves.</p> | | |
| 3. | <p><u>Residents' files</u>, pertaining to qualified medical personnel appointed for special laboratory and clinical training: Contains application forms, correspondence, and related papers.</p> <p>a. <u>For selected applicants.</u></p> <p><u>Disposition:</u></p> <p>Destroy 5 years after resident leaves.</p> <p>b. <u>For rejected applicants.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |
| 4. | <p><u>Card summaries on residents.</u></p> <p><u>Disposition:</u></p> <p>Destroy 10 years after resident leaves.</p> <p><u>Personnel Office</u> <u>Educational Services Officer</u></p> <p>Develops training materials, conducts training for Clinical Center employees, and administers training provided by other institutions.</p> <hr/> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 5. | <p><u>Employee training folders</u>, maintained for each employee participating in a training program, containing training nomination forms, travel papers, grades, and related correspondence and data.</p> <p><u>Disposition:</u> Destroy 3 years after file is closed.</p> | | |
| 6. | <p><u>Training administrative files</u>, consisting of correspondence, memoranda, and reports pertaining to training techniques, plans, materials, and related matters.</p> <p><u>Disposition:</u> Destroy when 3 years old.</p> <p>(NOTE: Retention periods for all other personnel records will be issued on an NIH-wide basis.)</p> <p style="text-align: center;"><u>Office of Administrative Management</u></p> <p>Retention periods for records not described below are contained in the General Records Schedules. Those standards will be issued on an NIH-wide basis.</p> <hr/> <p><u>Central Services Section</u></p> | | |
| 7. | <p><u>Central File of the Clinical Center.</u></p> <p>Since the Clinical Center was created in 1953 it has maintained a Central File organized into a subject filing system which has been revised twice. Papers flow into the file mainly from the desks of the Administrative Officers in the Office of the Director, each of whom is assigned supervisory and administrative authority over various offices and departments. Papers move to the officers' desks for information or approval action, and then into the Central File. Several</p> | | |

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| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p>aspects of the Central File, affecting the appraisal of its contents, should be especially noted:</p> <ul style="list-style-type: none"> • Many papers are disposable under the General Records Schedules. • Many are non-record materials. • Criteria for file content vary. • Documentation on any given matter or transaction may be split between the Central File and the originating office or department. <p>These procedural imperfections do not obscure the fact that this collection is the only group of records in the Clinical Center providing an overview of all its program and administrative activities. Only a small portion of the file, however, deserves permanent retention, as noted below.</p> <p>a. <u>Records filed under the following categories:</u></p> <ul style="list-style-type: none"> • Policy and procedure. • Minutes of meetings. • Organization and organization charts. • Functional statements. • Patients (materials relating to admissions policies and procedures). • Medical records systems. <p>Although mixed with temporary or routine papers, these records tend to document, partially or fully, activities in which the Center has unilateral policy making authority, relatively independent of NIH policy levels. This documentation complements permanent policy and</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p>program records of NIH retained under various items in National Archives Job No. NCl 90-77-2.</p> <p><u>Disposition:</u></p> <p>Permanent. Offer to National Archives when 7 years old.</p> <p>b. <u>All other records, except those covered by NIH-wide retention standards.</u></p> <p><u>Disposition:</u></p> <p>Transfer to Washington National Records Center when 5 years old; destroy when 7 years old.</p> <p><u>Volunteer Services Section</u></p> <p>Administers the Center's volunteer services program, in which members of the public, and the Red Cross and other institutions, provide various auxiliary services.</p> <hr/> <p>8. <u>Volunteer services case files</u>, containing applications, discharges, agreements and related correspondence regarding persons donating their services to the Clinical Center.</p> <p><u>Disposition:</u></p> <p>Destroy 18 months after end of volunteer's service.</p> <p>9. <u>Administrative files</u>, containing correspondence, reports and related papers concerning daily operations.</p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |

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|----------------|---|----------------------------|---------------------|
| 10. | <p style="text-align: center;"><u>Blood Bank Department</u></p> <p>Supplies all blood and perishable blood products for human transfusion at the Clinical Center; collects, separates, and preserves normal and abnormal human blood and blood fractions; performs and interprets serological and chemical tests for the identity and significance of the blood group antigens and antibodies; evaluates procedures and products in clinical transfusion; collaborates in, and originates, clinical investigations.</p> <hr/> <p><u>Donor history and consent records:</u> Multi-use forms each of which shows name of donor, medical history and physical data. Form includes a "tear-off" receipt portion documenting use of the blood in a nursing unit, and a detachable statement of donor's consent for blood to be drawn.</p> <p>The history and physical data portions and the donor consent portions have been microfilmed since 1955, and the paper records have been stored at the Washington National Records Center, together with a copy of each microfilm. The receipt portions have been sent annually to the Records Center.</p> <p>a. <u>History and physical data, and donor's consent portions.</u></p> <p><u>Disposition:</u></p> <p>Destroy after microfilming and verification of film.</p> <p>b. <u>Microfilm copies.</u></p> <p><u>Disposition:</u></p> <p>Retain indefinitely. <i>Disposal not authorized at this time; review for disposal when 15 years old.</i></p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p>c. <u>Receipt portions.</u></p> <p><u>Disposition:</u></p> <p>Transfer to the Washington National Records Center annually; destroy when 5 years old.</p> | | |
| 11. | <p><u>Panel sheets</u>, showing results of patient blood tests. Used to identify atypical antibodies, and in general research.</p> <p><u>Disposition:</u></p> <p>Disposal not authorized at this time. Review in 10 years for possible retention period.</p> | | |
| 12. | <p><u>Donor history sheets</u>, showing results of blood tests. Data are posted to computer. However, data for employee donors are removed from computer when employee leaves. On reemployment, antigen data are needed.</p> <p><u>Disposition:</u></p> <p>Disposal not authorized at this time. Review in 5 years for possible retention period.</p> | | |
| 13. | <p><u>Blood data records for Clinical Center patients.</u> Not all data are in the patients' folders. Data are needed if a patient is later hospitalized in the Clinical Center or elsewhere.</p> <p><u>Disposition:</u></p> <p>Disposal not authorized at this time. Review in 10 years for possible retention period.</p> | | |
| 14. | <p><u>Temperature charts</u>, showing temperatures maintained in preserving blood in the department.</p> <p><u>Disposition:</u></p> <p>Transfer to the Washington National Records Center when 1 year old; destroy when 4 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 15. | <p><u>Departmental administrative files, containing correspondence and memoranda relating to routine aspects of departmental operations.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |
| 16. | <p><u>Records of blood sent to operating rooms, showing patients' names, blood types, and other related data.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 5 years old.</p> | | |
| 17. | <p><u>Logs of donor appointments.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 1 year old.</p> <p>(NOTE: Retention standards for various personnel, procurement, and fiscal records will be issued on an NIH-wide basis.)</p> <p><u>Office of Clinical and Management Systems</u></p> <p>Coordinates the planning, development, implementation, and operation of all computer and automated systems in the Clinical Center; acts as liaison with the institutes and the Division of Computer Research and Technology, NIH, to assure integrated management and information systems; assists in applying techniques of operational planning, facility development, resource allocation, and program evaluation and review.</p> <hr/> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 18. | <p><u>Project files</u> relating to the development, installation, and operation of automated and other systems, containing copies of contracts, work papers, operation papers, correspondence, memoranda, and related materials.</p> <p><u>Disposition:</u> Destroy 6 years after completion of project.</p> | | |
| 19. | <p><u>Management studies of clinical and management systems</u>, containing documentation showing initiation of the study, covering memoranda, work papers, policy analyses, final reports, and related papers.</p> <p>a. <u>Final reports.</u></p> <p><u>Disposition:</u> Permanent. Transfer to Washington National Records Center 5 years after completion of study. Offer to the National Archives 5 years later.</p> <p>b. <u>All other files.</u></p> <p><u>Disposition:</u> Destroy 5 years after completion of study.</p> | | |
| 20. | <p><u>Clinical information utility search reports</u>, which request data on the treatment of former patients, from machine readable tapes.</p> <p><u>Disposition:</u> Destroy when 4 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
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| 21. | <p><u>Departmental administrative files, containing correspondence, memoranda, printed materials, and related papers pertaining to the daily operation of the department and its programs.</u></p> <p><u>Disposition:</u> Destroy when 3 years old.</p> <p style="text-align: center;"><u>Clinical Pathology Department</u></p> <p>Provides analyses of body fluids and excreta; classifies and indexes test results as an aid to research; conducts research in clinical pathology.</p> | | |
| 22. | <p><u>Departmental administrative files, maintained at various organizational levels, containing correspondence, memoranda, reports, forms, and published materials relating to procurement, buildings and space, personnel, medical meetings, equipment, laboratory procedures, and other routine matters.</u></p> <p><u>Disposition:</u> Destroy when 5 years old.</p> | | |
| 23. | <p><u>Patient report files:</u> Reports of findings in laboratory analyses, placed on microfiche for reference and research. Record copies are in patients' folders maintained by the Medical Record Department.</p> <p><u>Disposition:</u> Destroy 6 months after report is microfiched.</p> | | |
| 24. | <p><u>Microfiche copies of patient reports.</u></p> <p><u>Disposition:</u> Destroy when 7 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 25. | <p><u>Quality control records, consisting of charts, graphs, and other records showing the quality of laboratory performance, and reflecting the adequacy of laboratory procedures and/or equipment.</u></p> <p><u>Disposition:</u> Destroy when 2 years old.</p> | | |
| 26. | <p><u>Instrument maintenance records, documenting repairs or other adjustments made to instruments used in the department.</u></p> <p><u>Disposition:</u> Destroy when instrument is no longer used.</p> | | |
| 27. | <p><u>Log books, recorder charts, and other working papers used to prepare reports or analyses.</u></p> <p><u>Disposition:</u> Destroy when 30 days old.</p> | | |
| | <p style="text-align: center;"><u>Office of Clinical Reports and Inquiries</u></p> <p>Provides clinical program reports and public inquiry services for the Clinical Center.</p> | | |
| 28. | <p><u>Preadmission files, relating to referrals of potential patients by physicians and members of Congress, containing incoming and outgoing correspondence.</u></p> <p>a. <u>Files on Congressional referrals.</u></p> <p><u>Disposition:</u> Destroy when 3 years old.</p> | | |

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|----------------|---|----------------------------|---------------------|
| | <p>b. <u>All other files.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |
| 29. | <p><u>Record sets of publications prepared and issued by the department, such as the Clinical Center Closeup, Director's Update, and others.</u></p> <p><u>Disposition:</u></p> <p>Permanent. Offer to the National Archives when 15 years old.</p> | | |
| 30. | <p><u>Slides and other visual materials used for special events, press releases, and the like.</u></p> <p><u>Disposition:</u></p> <p>Destroy when superseded or no longer needed for departmental programs and activities.</p> | | |
| 31. | <p><u>Administrative and program subject files of the department, containing correspondence, reports, memoranda, published materials and other papers pertaining to program and routine activities.</u></p> <p>a. <u>Program records:</u> Records which, in the opinion of the Chief of the Office and the Records Officer of the Clinical Center, document unique activities illustrating the history of the Clinical Center. These may involve significant events, policy matters not documented in the Center Central File, or special or historic meetings. The records may include copies of unique photographs, correspondence, copies of printed programs, and other varied materials.</p> | | |

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| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| | <p><u>Disposition:</u></p> <p>Permanent. Incorporate into Clinical Center Central File when 7 years old to be associated with other records selected for later offer to the National Archives.</p> <p>b. <u>All other files.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 5 years old.</p> <p style="text-align: center;"><u>Diagnostic Radiology Department</u></p> <p>Provides diagnostic radiology services relating to research patients and volunteer normal controls, and performs certain other roentgenographic services as needed by the Clinical Center.</p> <hr/> <p>32. <u>Diagnostic radiological records</u>, comprising X-rays and other roentgenographic images produced by various devices and procedures, such as body and head scans created by computerized transaxial tomography. Files include positive photographic images resulting from ultra sound procedures, and related studies and interpretations.</p> <p>a. <u>Patients' radiological records.</u></p> <p><u>Disposition:</u></p> <p>Disposal not authorized at this time. Review in 15 years; transfer records of deceased patients to the Washington National Records Center at 2 year intervals.</p> <p>These files, considered an adjunct to the patient record folder, are one of the prime sources for NIH researchers. None have been</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p>disposed of since the first Center patient was admitted in July, 1953. Most researchers normally do not rely on the interpretations filed in the patient record folder (a copy is filed also with each X-ray), and the film is frequently called for, regardless of age. Normal appraisal factors permitting the conceivable disposal of some of these files (such as negative readings, routine examinations, and the like) do not apply for these radiological records. Since patients accepted by the Center already have a disease under research and clinical study, most of the films will show positive pathological conditions. Even some that are negative may be significant for comparative purposes later. For example, a "negative" film of a joint in a cancer patient may be significant later if metastasis has affected the same joint. In the Clinical Center, researchers obtain data wherever they can find them, sometimes from relatively remote sources. The nature of NIH's research is such that some long dormant radiological records may suddenly have great significance as procedures are refined and new discoveries made.</p> <p>Under present conditions, any destruction of these records would involve heavy risks well beyond those normally incurred in establishing retention periods. The data in them have too many important human implications for NIH's programs.</p> <p>For those reasons no retention period is recommended for these records now. After 15 years, the situation should be reviewed to determine whether some criteria can be developed for disposing of records where it can be determined, perhaps in advance of filing, that they have little or no scientific value. Application of any standard retroactively, even if criteria can be developed, would involve enormous expenditure of money and personnel for the destruction of a very small volume of records.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| | <p>b. <u>Employees' radiological records.</u> These records consist of requests for diagnostic radiology, research and instructional services; reports and radiology studies; and related records pertaining to normal and abnormal X-ray photographs used for pathology studies on active and separated employees.</p> <p><u>Disposition:</u></p> <p>Destroy when 5 years old, except those which, in the judgment of Medical Officers in charge and/or roentgenologists, have further scientific or instructional value.</p> | | |
| 33. | <p><u>Extra copies of radiological interpretations.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 1 year old.</p> | | |
| 34. | <p><u>Patient control cards,</u> maintained as an index of patients from 1953 to 1976, when an automated machine readable hospital information system was installed. Shows patient name, number, physician, admission and discharge dates. Data from these cards were placed retroactively into the system.</p> <p><u>Disposition:</u></p> <p>Destroy in 1981.</p> | | |
| 35. | <p><u>Departmental administrative files,</u> containing correspondence, telegrams, reports, chronological files, and related papers pertaining to personnel, procurement, and other routine administrative matters involving the daily operation of the department.</p> <p><u>Disposition:</u></p> <p>Destroy when 4 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 36. | <p>Copies of radiation exposure reports affecting Clinical Center employees, received from the NIH Radiation Safety Branch.</p> <p><u>Disposition:</u></p> <p>Destroy when 1 year old.</p> <p>(NOTE: Standards for the retention and disposal of printed studies and related working papers, and magnetic tape, will be issued on an NIH-wide basis.)</p> <p><u>Environmental Sanitation Control Department</u></p> <p>and</p> <p><u>Fabric Care Department</u></p> | | |
| 37. | <p>Retention standards for all records of these departments are prescribed in General Records Schedules Nos. 1, 2 and 3.</p> <p><u>Medical Record Department</u></p> <p>Maintains medical records of all patients; prepares and provides abstracts of individual patients' records; prepares required reports and technical analyses.</p> | | |
| 38. | <p><u>Requests for medical records.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 1 month old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 39. | <p><u>Departmental administrative files, consisting of correspondence, reports, memoranda, and related papers pertaining to personnel, procurement, budgets, equipment, and other routine matters affecting the daily operations of the department.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 1 year old.</p> <p>(NOTES: Retention standards for patients' folders, involving microfilming and destruction of the paper records, are provided in National Archives Job No. NCl 90-78-4.</p> <p>Retention standards for committee files and policy and procedure records will be provided on an NIH-wide basis.)</p> <p style="text-align: center;"><u>Nuclear Medicine Department</u></p> <p>Provides diagnostic radioisotope scanning services; provides whole body assay and localization of low level radioactive isotopes in Clinical Center patients; provides for radio-pharmaceutical service at NIH; conducts research in nuclear medicine related to patient care. The department carries on its programs under a broad license from the Nuclear Regulatory Commission, granted to the Radiation Committee of NIH. Thus the department is subject to all the controls and restraints stemming from NRC regulations.</p> | | |
| 40. | <p><u>Radionuclide scan files, consisting of various films of body and organ scans following use of isotopes on patients. Files include copies of interpretations.</u></p> <p>These films contain images on a clear base, single emulsion film, and disclose pathological</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p>conditions revealed by the actions of radio-pharmaceutical isotopes on the human skeleton, or tissues, or organs. The record copy of each interpretation is permanently available in the patient's record, which is to be microfilmed. Because of rapid technological improvements in scanning equipment, many older scans are crude and unstable. Except in a relatively few instances, the interpretation suffices for later reference. The scan files in exceptional, landmark, or other cases of special interest may be retained for periods longer than the retention period specified below.</p> <p><u>Disposition:</u> Destroy when 5 years old.</p> | | |
| 41. | <p><u>Copies of scan interpretations, maintained separately from the scan files.</u></p> <p><u>Disposition:</u> Destroy when 1 year old.</p> | | |
| 42. | <p><u>Daily radionucleide dosage logs, showing the amount, nature, dates, and purposes of radionucleides dispensed to patients in testing.</u></p> <p><u>Disposition:</u> Destroy when 1 year old.</p> | | |
| 43. | <p><u>Patient card files, summarizing essential data on each patient tested in the department. Used for quick reference.</u></p> <p><u>Disposition:</u> Destroy 4 years after patient is deceased, or after last scanning, whichever is applicable.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 44. | <p><u>Departmental administrative files</u>, containing correspondence, memoranda, reports, and related papers reflecting departmental administration and routine.</p> <p><u>Disposition:</u></p> <p>Destroy when 3 years old.</p> <p>(NOTES: Magnetic tapes, used by the department for research, will be covered by a separate NIH-wide plan now being prepared for machine readable records.</p> <p>Retention standards for Radiation Committee records will be provided on an NIH-wide basis.)</p> <p style="text-align: center;"><u>Nursing Department</u></p> <p>Provides nursing services to research programs conducted in the Clinical Center; conducts research in clinical nursing care and nursing services administration.</p> <hr/> <p><u>Departmental Office</u></p> | | |
| 45. | <p><u>Departmental administrative subject files</u>, containing correspondence, memoranda, published materials and related papers pertaining to such matters as facilities, staff, personnel, resources, procedures, patient care, and other matters involving the daily administration of the department.</p> <p><u>Disposition:</u></p> <p>Destroy when 5 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 46. | <p><u>Administrative nursing reports and related papers</u>, submitted daily by each nursing unit, showing the number of patients, admissions, discharges, deaths, and other information about the patients.</p> <p><u>Disposition:</u> Destroy when 3 months old.</p> | | |
| 47. | <p><u>Daily nursing service reports</u>, showing employee absence and tardiness, and personnel reassignment and utilization.</p> <p><u>Disposition:</u> Destroy when 3 months old.</p> | | |
| 48. | <p><u>Incident and accident reports</u>, prepared as part of the Clinical Center safety program.</p> <p><u>Disposition:</u> Destroy when 1 year old.</p> | | |
| 49. | <p><u>Audit records</u>, relating to audits of the quality of patient care in the department.</p> <p><u>Disposition:</u> Destroy when 5 years old.</p> <p><u>All Nursing Services</u></p> | | |
| 50. | <p><u>Copies of administrative nursing reports.</u></p> <p><u>Disposition:</u> Destroy when 3 months old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 51. | <p><u>Copies of daily nursing service reports.</u></p> <p><u>Disposition:</u> Destroy when 3 months old.</p> | | |
| 52. | <p><u>Incident and accident reports.</u></p> <p><u>Disposition:</u> Destroy when 3 months old.</p> | | |
| 53. | <p><u>Patient temperature, pulse, and respiration (TPR) sheets.</u> Posted to patients' folders.</p> <p><u>Disposition:</u> Destroy when posted.</p> | | |
| 54. | <p><u>Intake-Output records,</u> showing amounts ingested and excreted by patients. Posted to patients' folders.</p> <p><u>Disposition:</u> Destroy when posted.</p> | | |
| 55. | <p><u>Routine administrative files,</u> containing correspondence and memoranda pertaining to nursing service operations.</p> <p><u>Disposition:</u> Destroy when 2 years old.</p> | | |
| 56. | <p><u>Nursing unit reports,</u> sent to the service head for summarizing in other reports to the department chief.</p> <p><u>Disposition:</u> Destroy when 6 months old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p><u>Surgical Nursing Service</u></p> | | |
| 57. | <p><u>Plan of care for each patient in surgery.</u></p> <p><u>Disposition:</u> Destroy when 1 month old.</p> | | |
| 58. | <p><u>Operating room log: Ledger record of operations performed, showing surgeon, assistants, and other vital data on each operation.</u></p> <p><u>Disposition:</u> Destroy when 8 years old.</p> | | |
| 59. | <p><u>Surgical scheduling requests.</u></p> <p><u>Disposition:</u> Destroy when 3 months old.</p> | | |
| 60. | <p><u>Operating room memoranda. Posted to operating room log.</u></p> <p><u>Disposition:</u> Destroy when posted.</p> | | |
| 61. | <p><u>Daily operations listing.</u></p> <p><u>Disposition:</u> Destroy when 3 years old.</p> | | |
| 62. | <p><u>Copies of all other records on patients made as a result of surgical procedures.</u></p> <p>a. <u>Where data are posted to, or included in, patients' folders.</u></p> <p><u>Disposition:</u> Destroy when posted or placed in folder.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 63. | <p>b. <u>All other records.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 3 months old.</p> <p>(NOTE: The Nursing Department has a wide variety of records relating to its personnel. Retention periods for those records will be issued on an NIH-wide basis.)</p> <p style="text-align: center;"><u>Nutrition Department</u></p> <p>Provides food service for patients; prepares special diets for research projects; provides diet instructions to patients being discharged, and to outpatient research patients upon request of physician in charge; conducts research in clinical nutrition and nutrition service administration.</p> <hr/> <p><u>Office of the Chief</u></p> <p>Departmental administrative files, containing correspondence, memoranda, published materials, reports and related papers pertaining to supplies and equipment, facilities, personnel, accounting and budget, relations with professional associations, and other matters involving daily administration.</p> <p><u>Disposition:</u></p> <p>Destroy when 5 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 64. | <p><u>Food Production Service</u></p> <p><u>Central kitchen issues (daily requisitions - main kitchen and metabolic kitchens).</u></p> <p><u>Disposition:</u></p> <p>Destroy when 4 months old (retain records 3 months plus current month).</p> | | |
| 65. | <p><u>Patient meal census records.</u></p> <p>a. <u>Detail reports</u>, showing number of meals served.</p> <p><u>Disposition:</u></p> <p>Destroy when 6 months old.</p> <p>b. <u>Summary reports</u>, showing number of meals served, by institute.</p> <p><u>Disposition:</u></p> <p>Destroy when 5 fiscal years old.</p> | | |
| 66. | <p><u>Physical inventories.</u></p> <p>a. <u>Work copies.</u></p> <p><u>Disposition:</u></p> <p>Destroy at end of current fiscal year.</p> <p>b. <u>Summary sheets.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 6 fiscal years old.</p> | | |
| 67. | <p><u>Monthly meat inventories.</u></p> <p><u>Disposition:</u></p> <p>Destroy at end of current fiscal year.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 68. | <u>Monthly financial statements of contracts and purchase orders.</u> | | |
| | <u>Disposition:</u> Destroy at end of current fiscal year. | | |
| 69. | <u>Monthly expenditure reports.</u> | | |
| | <u>Disposition:</u> Destroy when 6 fiscal years old. | | |
| 70. | <u>Monthly issues to other departments (summary sheets).</u> | | |
| | <u>Disposition:</u> Destroy at end of current fiscal year. | | |
| 71. | <u>Food requisitions (delivery copies).</u> | | |
| | <u>Disposition:</u> Destroy when 6 months old. | | |
| 72. | <u>Revolving fund price statements.</u> | | |
| | <u>Disposition:</u> Destroy when 6 months old. | | |
| 73. | <u>Contracts, purchase orders and delivery tickets, including produce ND-10.</u> | | |
| | <u>Disposition:</u> Destroy when 2 fiscal years old. | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 74. | <p><u>Emergency cash orders (petty cash).</u></p> <p><u>Disposition:</u> Destroy when 4 fiscal years old.</p> | | |
| 75. | <p><u>Telephone charge orders.</u></p> <p><u>Disposition:</u> Destroy when 4 fiscal years old.</p> | | |
| 76. | <p><u>Records of food prices.</u></p> <p><u>Disposition:</u> Destroy when 4 fiscal years old.</p> | | |
| 77. | <p><u>Small equipment requisitions.</u></p> <p><u>Disposition:</u> Destroy at end of current fiscal year.</p> | | |
| 78. | <p><u>Patient Dietetic Service</u></p> <p><u>Census records.</u></p> <p>a. <u>Detail census sheets</u>, showing workload of each floor unit.</p> <p><u>Disposition:</u> Destroy when 1 year old.</p> <p>b. <u>Monthly census reports</u>, summarizing data on the detail reports.</p> <p><u>Disposition:</u> Destroy when 2 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 79. | <p><u>Computer printouts of physicians' dietary orders, posted to patients' cards.</u></p> <p><u>Disposition:</u> Destroy when 1 month old.</p> | | |
| 80. | <p><u>Inpatient cards, showing dietary requirements of each inpatient.</u></p> <p><u>Disposition:</u> Destroy 5 years after patient is discharged.</p> | | |
| 81. | <p><u>Outpatient cards, showing dietary requirements of each outpatient.</u></p> <p><u>Disposition:</u> Destroy when 5 years old.</p> | | |
| 82. | <p><u>Special event orders, relating to picnics and the like for mental health patients.</u></p> <p><u>Disposition:</u> Destroy when 1 year old.</p> <p>(NOTE: Retention standards for personnel and pay records will be issued on an NIH-wide basis.)</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 83. | <p style="text-align: center;"><u>Office of Occupational Medicine</u></p> <p>Records of this department, documenting medical services for all employees and commissioned officers of the National Institutes of Health, are transferred to the Washington National Records Center for destruction in accordance with General Records Schedule No. 1, item 21.</p> <p style="text-align: center;"><u>Outpatient Department</u></p> <p>Provides services to operating outpatient clinics; administers admissions, transfers, and discharges of Clinical Center patients; operates messenger and escort services; operates Clinical Center travel services.</p> | | |
| 84. | <p><u>Copies of admission ("A") forms for inpatients and outpatients.</u></p> <p>a. <u>Forms for inpatients.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 7 years old.</p> <p>b. <u>Forms for outpatients.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 5 years old.</p> | | |
| 85. | <p><u>Daily schedules of outpatients.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 months old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 86. | <p><u>Departmental administrative files</u>, consisting of correspondence, reports, published materials, chronological files, and related papers pertaining to dealings with the institutes, intra-departmental matters, and routine administrative matters such as personnel, budget, and procurement.</p> <p><u>Disposition:</u> Destroy when 4 years old.</p> | | |
| 87. | <p><u>Patients' travel and transportation records.</u></p> <p><u>Disposition:</u> Destroy when 3 years old.</p> <p>(NOTE: The retention standard in item 87 is based on General Records Schedule 9, item 4. Standards for employees' travel and transportation records will be issued on an NIH-wide basis.)</p> <p style="text-align: center;"><u>Patient Services Department</u></p> <p>Plans and conducts a program of services to Center patients, including recreational and diversional activities; coordinates patients' and normal volunteer patients' programs; provides medical television services.</p> | | |
| 88. | <p><u>Departmental administrative files</u>, containing correspondence, memoranda, printed materials and related papers pertaining to the daily activities of the department.</p> <p><u>Disposition:</u> Destroy when 4 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 89. | <p><u>Patient Activities Section</u></p> <p><u>General patient activities files</u>, containing correspondence, memoranda, reports, purchase orders and related papers pertaining to activities developed for patients.</p> <p><u>Disposition:</u> Destroy when 2 years old.</p> | | |
| 90. | <p><u>Patients' library card files</u>, showing patients who may charge library materials.</p> <p><u>Disposition:</u> Destroy when patient is discharged.</p> | | |
| 91. | <p><u>Normal Volunteer Patient Section</u></p> <p><u>Sponsoring agency files</u>, relating to private organizations sponsoring normal patient volunteers: Contain copies of contractual agreements and related reports and correspondence.</p> <p><u>Disposition:</u> Destroy 3 years after participation of sponsoring agency ends.</p> | | |
| 92. | <p><u>Inpatient normal volunteer files</u>, containing medical histories, appointment papers, admission sheets, and related correspondence and data.</p> <p><u>Disposition:</u> Destroy 3 years after volunteer period ends.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 93. | <p><u>Copies of normal volunteer visit reports, showing time spent by the volunteer, and payments made to the volunteer.</u></p> <p><u>Disposition:</u> Destroy when 2 years old.</p> | | |
| 94. | <p><u>Routine administrative files, containing correspondence, memoranda and reports pertaining to daily operations.</u></p> <p><u>Disposition:</u> Destroy when 3 years old.</p> | | |
| 95. | <p><u>Copies of research protocols, showing the research purposes for which normal volunteers are to be used. Record copies of the protocols are to be retained permanently in the Office of Planning and Policy.</u></p> <p><u>Disposition:</u> Destroy 1 year after end of research project.</p> <p><u>Television Engineering Section</u></p> | | |
| 96. | <p><u>Video tapes of medical research procedures in the Clinical Center.</u></p> <p><u>Disposition:</u> Erase tapes for reuse when 3 years old.</p> | | |
| 97. | <p><u>Routine administrative files, containing correspondence, memoranda and reports relating to daily activities.</u></p> <p><u>Disposition:</u> Destroy when 3 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 98. | <p><u>Medical taping record sheets, listing patient video tapes made, dates made, and related data.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 5 years old.</p> <p>(NOTES: Retention standards for all fiscal, accounting and procurement records of this department will be issued on an NIH-wide basis.</p> <p>Records of the Anesthesia Support Section and of the former Respiratory Support Section were reviewed. The records on patients are incorporated into the patients' folders maintained by the Medical Record Department. Other file materials are either non-record or will be covered by retention standards to be issued on an NIH-wide basis.)</p> <p style="text-align: center;"><u>Pharmacy Department</u></p> <p>Provides pharmaceutical services and drug therapy consultation for Clinical Center patients; conducts a program of pharmaceutical research and maintains control over investigational drugs; provides a central sterile supply service.</p> | | |
| 99. | <p><u>Departmental administrative files, containing memoranda, correspondence, and printed materials relating to personnel, procurement and other daily operations of the department.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p><u>Pharmacy Service</u></p> | | |
| 100. | <p><u>Drug profile case files</u>, showing data about drugs dispensed for each patient.</p> <p><u>Disposition:</u> Destroy when patient is discharged.</p> | | |
| 101. | <p><u>Doctors' orders files (prescriptions)</u>. From 1953 to 1973 these records have been micro-filmed; since 1973 they have been microfiched. All paper records have been destroyed following reproduction.</p> <p><u>Disposition:</u> Destroy when microfiched.</p> | | |
| 102. | <p><u>Microfilm and microfiche copies of doctors' orders</u>.</p> <p><u>Disposition:</u> Retain indefinitely.</p> | | |
| 103. | <p><u>Bulk compounding records</u>, pertaining to the compounding of drugs in bulk quantities. Comprise control logs, worksheets, and card control records.</p> <p><u>Disposition:</u> Destroy when 2 years old.</p> | | |
| 104. | <p><u>Pharmacy parenteral records</u>, documenting the use of intravenous additives, as ordered by doctors.</p> <p><u>Disposition:</u> Destroy when 3 months old.</p> | | |

Disposition not authorized at this time; review for disposal when 15 years old.

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 105. | <p><u>Nursing unit requisitions for pharmaceutical items.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |
| 106. | <p><u>Certificates of disposition for narcotics and hypnotics, documenting movement of those drugs and their receipt by nursing units.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> <p><u>Central Sterile Supply</u></p> | | |
| 107. | <p><u>Sterilization record cards, used as a control file to record the nature and results of each sterilization procedure.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 1 year old.</p> | | |
| 108. | <p><u>Cart exchange control records, showing the number of carts (equipment supply "packages") sent to Clinical Center units.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |
| 109. | <p><u>Tray production records, showing the number and types of trays (instrument and supply "packages") sent to various Clinical Center units.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 1 year old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| 110. | <p><u>Nursing unit requisitions for sterile supply items.</u></p> <p><u>Disposition:</u> Destroy when 2 years old.</p> <p><u>Pharmaceutical Development Service</u></p> | | |
| 111. | <p><u>Statements of responsibility and certifications of drug release:</u> By signing this form, a physician assumes responsibility for the use of drugs not yet fully tested.</p> <p><u>Disposition:</u> Destroy when 5 years old.</p> | | |
| 112. | <p><u>Pyrogen test records,</u> showing the results of testing drugs for certain harmful characteristics.</p> <p><u>Disposition:</u> Destroy 2 years after new drug application is approved or disapproved; if no new drug application is filed, destroy 2 years after study is completed.</p> | | |
| 113. | <p><u>Requests for testing of developmental drugs.</u></p> <p><u>Disposition:</u> Destroy 2 years after new drug application is approved or disapproved; if no new drug application is filed, destroy 2 years after study is completed.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| 114. | <p><u>Investigational drug service requests:</u> Doctors' notifications to the department of intent to use a drug not yet approved for general use.</p> <p><u>Disposition:</u></p> <p>Destroy 2 years after new drug application is approved or disapproved; if no new drug application is filed, destroy 2 years after study is completed.</p> | | |
| 115. | <p><u>Tally records of technical work done, used to prepare workload reports.</u></p> <p><u>Disposition:</u></p> <p>Destroy when 1 month old.</p> <p>(NOTE: Retention standards for various personnel, procurement, and fiscal records maintained by the department will be issued on an NIH-wide basis.)</p> <p><u>Office of Planning and Policy Development</u></p> <p>Participates in developing activities relating to Center objectives, plans, and budgets; provides staff assistance to the Medical Board, Medical Board Subcommittees, and the Institute Clinical Research Subpanels.</p> | | |
| 116. | <p><u>Protocol files, documenting proposals made by the Institutes and approved by the Director of the Clinical Center for the use of human subjects in research, development, and related activities.</u> Each file normally contains the official copy of the protocol, describing the nature of the proposed research, the methodology involved, projected aims and justifications, notations and records of approval actions, names of principal investigators, project reviews, and related correspondence and memoranda.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| | <p>These files are partial documentation of the specific involvement of the Clinical Center in NIH research. The protocols detail the areas of biomedical concern at a given time, and show Center participation in administering HEW policies concerning human subjects in research. These files, in addition, reflect the use of normal volunteers (healthy persons who volunteer to participate in clinical investigations), patient volunteers, and patients who have a disease that requires further investigation, diagnosis, or treatment.</p> <p><u>Disposition:</u></p> <p>Permanent. Review closed files at 5-year intervals and transfer those which are no longer needed for reference to the Washington National Records Center. Offer to the National Archives 5 years after transfer to the Records Center.</p> | | |
| 117. | <p><u>Physicians' credential files</u>, documenting approval by the Clinical Center of physicians, dentists, and other health professionals involved in patient treatment or other contacts. The files contain records of participation in patient care, signed agreements to abide by Medical Staff by-laws, delineations of clinical privileges, and related papers.</p> <p><u>Disposition:</u></p> <p>Destroy when person involved leaves the staff.</p> | | |
| 118. | <p><u>Departmental administrative files</u>, consisting of correspondence, memoranda, reports, budget materials, research review materials, and planning papers pertaining to administration and programs.</p> <p><u>Disposition:</u></p> <p>Destroy when 6 years old.</p> <p>(NOTE: Retention standards for committee records will be provided on an NIH-wide basis.)</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|--|----------------------------|---------------------|
| | <p style="text-align: center;"><u>Rehabilitation Department</u></p> <p>Provides consultative services to institute patients in physical medicine; provides physical, occupational, and speech therapy for institute patients at the request of referring physicians; cooperates in clinical research in the fields of rehabilitation and physical medicine.</p> <hr/> <p>119. <u>Patient rehabilitation files</u>, pertaining to patients treated in the department, and containing physician referrals, progress notes, copies of X-ray interpretations, daily progress notes, copies of laboratory test results, and copies of outside physical therapy reports. Record copies of key documents are in the patients' folders in the Medical Record Department.</p> <p><u>Disposition:</u></p> <p>Destroy 10 years after last visit, or when patient is deceased, if the record is not involved in an ongoing study.</p> <p>120. <u>Departmental administrative files</u>, containing correspondence, memoranda and reports, pertaining to personnel, procurement, and other routine matters involved in departmental administration.</p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

| 7. ITEM NO. | 8. DESCRIPTION OF ITEM (WITH INCLUSIVE DATES OR RETENTION PERIODS) | 9. SAMPLE OR JOB NO. | 10. ACTION TAKEN |
|----------------|---|----------------------------|---------------------|
| | <p style="text-align: center;"><u>Social Work Department</u></p> <p>Provides social work services to institutes conducting clinical investigations.</p> <hr/> <p>121. <u>Social work patients' records</u>, containing copies of social work history sheets showing summaries of work done, patient responses, and related comments and papers. Record copies of the history sheets are in the patients' folders in the Medical Record Department.</p> <p><u>Disposition:</u></p> <p>Destroy 5 years after patient is discharged.</p> <p>122. <u>Patients' emergency fund records</u>, relating to the collection and disbursement of, and accounting for, funds donated to meet emergency needs of patients.</p> <p>a. <u>Requests for funds</u>, made by case workers on behalf of patients.</p> <p><u>Disposition:</u></p> <p>Destroy when 4 years old.</p> <p>b. <u>"Thank you" letters</u> from patients and their families.</p> <p><u>Disposition:</u></p> <p>Destroy when 2 years old.</p> <p>c. <u>Summary records of withdrawals and deposits</u>.</p> <p><u>Disposition:</u></p> <p>Destroy when 3 years old.</p> | | |

REQUEST FOR AUTHORITY TO DISPOSE OF RECORDS—Continuation Sheet

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|----------------|--|----------------------------|---------------------|
| 123. | <p><u>Departmental administrative files</u>, containing correspondence, reports, and related papers pertaining to personnel, budgets, and routine matters involved in departmental administration.</p> <p><u>Disposition:</u> Destroy when 2 years old.</p> <p style="text-align: center;"><u>Spiritual Ministry Department</u></p> <p>Provides spiritual ministry to Center patients and their families, including the holding of religious services, and liaison with religious groups not represented by staff chaplains.</p> | | |
| 124. | <p><u>Patient name files</u>, identifying Center patients.</p> <p><u>Disposition:</u> Destroy 6 months after patient is discharged or deceased.</p> | | |
| 125. | <p><u>Departmental administrative files</u>, consisting of correspondence, memoranda, reports, printed materials, and other papers relating to routine departmental activities.</p> <p><u>Disposition:</u> Destroy when 3 years old.</p> | | |

CERTIFICATE OF AGENCY APPROVAL

Signature

April, 1978

1. Milda N. Mitchell Records Liaison Officer,
Clinical Center
2. Howard H. Hessel Executive Officer,
Clinical Center
3. Betty Barnett Records Management Officer,
National Institutes of Health
4. George H. Hessel for Associate Director for
Administration, National
Institutes of Health