

REQUEST FOR RECORDS DISPOSITION AUTHORITY
(See Instructions on reverse)

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|---|---|
| LEAVE BLANK | |
| JOB NO | NC1-90-84-2 |
| DATE RECEIVED | 12-9-83 |
| 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disposal request, including amendments, is approved except for items that may be stamped "disposal not approved" or "withdrawn" in column 10 | |
| 12-13-83 <i>Date</i> | <i>DMW</i> <i>Archivist of the United States</i> |

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

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|---|------------------------|
| 1. FROM (AGENCY OR ESTABLISHMENT) Department of Health and Human Services | |
| 2. MAJOR SUBDIVISION Public Health Service | |
| 3. MINOR SUBDIVISION (Appendix B-351) Health Resources & Services Admin./Indian Health Service | |
| 4. NAME OF PERSON WITH WHOM TO CONFER Linda Querec PHS Records Officer | 5. TEL EXT 443-2055 |

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

- A Request for immediate disposal.
- B Request for disposal after a specified period of time or request for permanent retention.

| | | |
|--------------------|--|---|
| C. DATE 10/6/83 | D. SIGNATURE OF AGENCY REPRESENTATIVE <i>George Deal</i> Dr. George Deal | E. TITLE DHHS Records Management Officer |
|--------------------|--|---|

| 7. ITEM NO | 8. DESCRIPTION OF ITEM (With Inclusive Dates or Retention Periods) | 9. SAMPLE OR JOB NO | 10. ACTION TAKEN |
|------------|---|-------------------------------|--|
| 1. | DHHS/HRSA/IHS/Phoenix Indian Medical Center requests authority for microfilming records as described below as set forth in GSA 41 CFR 101-11.506. Older volumes of Clinical Records of Active Patients of non-uniformed service personnel from 1955 thru 1980 and on-going treated as in-patient and/or outpatient at Phoenix Indian Medical Ctr. Destroy when ascertained that reproduced copies or recordings have been made in accordance with GSA regulations and are adequate substitutes for the paper records. The provisions of FPMR 101-11.5 will be observed. | B351 23A(2) NC1-90-79-2 | All pen and ink changes have been made with agency concurrence. <i>JTB</i> <i>12/1/83</i> |
| b. | Microfilm copies: Destroy non-uniformed patient records after 25 years. Do not separate a patient's medical record i.e., inpatient from outpatient. Transfer the complete folder (at the same time) and make certain all reports, documents, etc. have been placed in the folder before retiring it. Do not send laboratory pathological materials, blood cultures, surgical slides, etc., only the reports pertaining thereto. Facilities wishing to retain original medical records on site for a longer period of time should request written permission from the Director, Division of Hospitals and Clinics. (Background information is attached.) <u>8/4/83</u> <i>James Jenkins</i> HRSA Records Officer | | 2 items |

115-107 copy to agency 12/15/83 *PHB*
MASS DATA CHANGE SHEET NOT REQUIRED

7KR sent 12-22-83 by DMW.