Physician Authorization Letter for Releasing IRL Results to Health Care Facilities

What this letter is about

This letter is a physician authorization that is required prior to the release of a patient’s historic written report of test results by American Red Cross Biomedical Services (ARCBS) Immunohematology Reference Laboratories (IRLs) to a third-party health care provider. These historic patient test result reports may be needed by third-party health care providers for the purposes of current patient treatment and care. This physician authorization letter is required when a hospital/facility or physician requests historical IRL written reports generated when the patient was under the care of a different hospital/facility or physician.

Only IRL written, patient IRL test results in the form of a historic IRL report are within the scope of this physician authorization letter.

Out-of-scope activities/actions of this physician authorization letter include:

- Release (verbal or written) of in-progress or completed test results from a current IRL patient test request. The current IRL patient test request is associated with the facility that submitted the patient sample.
- Verbal release of historic IRL test results to a health care provider.

Who should use this letter

This letter applies to ARCBS IRL personnel who receive requests from third-party hospital/laboratory customers and physicians to release historic ARCBS IRL written reports of patient test results. The specific staff persons involved communicate directly with these customers to facilitate release of historic written IRL test results to current care-givers when these results are necessary for patient care and treatment.

Introduction

Due to privacy and confidentiality concerns, an IRL:

- Should not release written reports of IRL patient test results to health care facilities without written confirmation that the health care facility requires the results for patient care.
- May routinely disclose the historic written test results/reports upon receipt of a written and signed request from the requesting facility. The request confirms that the physician is currently treating the patient and requires the historic ARC IRL test results for treatment purposes.

In emergent situations, the IRL:

- Should provide a historic written report of ARC IRL patient test results before receiving a signed physician authorization letter. In these situations, the IRL should ask the requestor to send the completed and signed authorization letter as soon as possible thereafter.
Note: When customer contracts contain confidentiality restrictions prohibiting the release of patient test results to other health care providers/institutions, the IRL must obtain separate written permission to release the results from the original customer prior to releasing results under this letter. Alternatively, direct the customer making the current request to communicate directly with the original customer.

### Instructions for using the letter

#### Preparation for initial use:

- Alter the margins to accommodate regional letterhead, if printing the letter on regional letterhead.
- Electronically add the region name, city, state, zip code, and IRL facsimile (FAX) number to the appropriate fields in the letter.
- No other information may be added or deleted from the letter.
- Provide copies to hospital/facility customers, as needed.

#### Using the letter:

- If the situation is emergent and the requesting physician’s signature cannot be obtained prior to release of the written IRL test results, it is acceptable to provide the written IRL historical report upon receipt of the letter with Section A completed.
- For non-emergent situations, upon receipt of the signed letter in the IRL, ensure that all fields are complete. If fields are incomplete, return the letter to the requesting hospital/facility for completion of the letter.

  Note: Birth date information on the historical IRL record may serve as additional or secondary patient identification. If the birth date is available in the historical records, it serves as an additional patient identification mechanism. Lack of birth date information in historical records does not prevent release of requested records.

Once complete, release the historic written IRL patient test results to the requesting hospital/facility. If patient social security numbers are present on the IRL report, obliterate prior to releasing. If sending the patient report by facsimile, ensure that the facsimile cover sheet contains appropriate confidentiality language.

- If the written historical report was issued emergently without a requesting physician’s signature, follow-up with the requesting facility and obtain the physician’s signature within 10 calendar days.
- If the physician’s signature has not been received within 10 calendar days, make a follow-up call to the requesting facility. If, after multiple attempts, the physician signature cannot be obtained, document “physician signature not received” in the physician signature field and document IRL staff date and initials.
- Retain the signed physician authorization letter in the IRL patient file and attach to the IRL patient report(s) released to the requesting hospital/facility.
## Revision History

<table>
<thead>
<tr>
<th>Revision Number</th>
<th>Summary of Revisions</th>
</tr>
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<tbody>
<tr>
<td>1.0</td>
<td>Initial Version</td>
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</table>

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American Red Cross Blood Services
Southern Region
Douglasville, Georgia 30135-3131

Physician Authorization Letter for Releasing Immunohematology Reference Laboratory Results to Health Care Facilities

The American Red Cross (ARC) is committed to protecting the privacy of personal information. For this reason, an ARC Immunohematology Reference Laboratory (IRL) requires the patient’s current health care provider to submit a written and signed request confirming that the provider is treating the patient and requires the information for treatment and patient care purposes before disclosure of written, historic IRL test results generated while the patient was under the care of another facility.

In emergent situations when historic written test results are needed and a requesting physician is not available to provide a signature, any hospital/facility staff may complete the requestor section. The requesting physician signature should be obtained as soon as possible after IRL release of written historic test results, but not to exceed 10 calendar days.

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<table>
<thead>
<tr>
<th>Section A: Requestor. (Hospital/facility staff or physician).</th>
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<tbody>
<tr>
<td>Check here for emergent requests: ☐</td>
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<table>
<thead>
<tr>
<th>Requesting Hospital/Facility: ________________________________</th>
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</thead>
<tbody>
<tr>
<td>Patient Name (First and Last Name): __________________________</td>
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<tr>
<td>Patient Date of Birth: ______________________________________</td>
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<tr>
<th>Section B: Requesting physician. By signing below, the requesting physician verifies that he/she is treating the above-named patient at the requesting hospital/facility and requires the historic IRL results for current treatment and patient care purposes.</th>
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<tbody>
<tr>
<td>Physician Name (printed): __________________________________________</td>
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<tr>
<td>Physician Signature: __________________________ Date: ______________</td>
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FAX completed form to: 770-852-4937

IMPORTANT DISCLAIMER: IRL WRITTEN REPORTS REFLECT THE RESULTS OF HISTORIC TESTING ON A PARTICULAR SAMPLE. A CURRENT SAMPLE COULD YIELD DIFFERENT RESULTS AS THE PATIENT MAY HAVE FORMED ADDITIONAL CLINICALLY SIGNIFICANT ALLOANTIBODIES OR AUTOANTIBODIES SINCE THE TIME OF THE HISTORIC IRL TESTING.