

## R9-10-913. Medical Records

A. An administrator shall ensure that:

1. A medical record is established and maintained for each resident;
2. An entry in a medical record is:
  - a. Documented only by a staff member authorized by nursing care institution policies and procedures;
  - b. Dated, legible, and authenticated; and
  - c. Not changed to make the initial entry illegible;
3. If a rubber-stamp signature or an electronic signature code is used to authenticate an order, the individual whose signature the stamp or electronic code represents is responsible for the use of the stamp or the electronic code;
4. A medical record is available to staff, physicians, and physicians' designees authorized by nursing care institution policies and procedures;
5. Information in a medical record is disclosed only with the written consent of a resident or the resident's representative or as permitted by law;
6. If a nursing care institution terminates operations:
  - a. A resident and the resident's medical records are transferred to another health care institution; and
  - b. The location of all other records and documents not transferred with residents is submitted in writing to the Department not less than 30 days before the nursing care institution services are terminated;
7. If the nursing care institution has a change of ownership, all nursing care institution records and documents, including financial, personnel, and medical records, are transferred to the new owner;
8. A medical record is:
  - a. Protected from loss, damage or unauthorized use;
  - b. Maintained in compliance with A.R.S. § 12-2297(D) for five years after the date of the resident's discharge unless the resident is less than 18 years of age, in which case the record is maintained for three years after the resident reaches 18 years of age or for three years after the date of the resident's transfer or discharge, whichever date occurs last; and

c. Provided to the Department within two hours of the Department's request;

B. If a nursing care institution keeps medical records electronically, an administrator shall ensure that:

1. Safeguards exist to prevent unauthorized access; and
2. The date and time of an entry in a medical record is recorded by the computer's internal clock.

C. An administrator shall require that medical records for a resident contains:

1. Resident information that includes:

- a. The resident's name;
- b. The resident's date of birth;
- c. The resident's weight;
- d. The resident's social security number;
- e. The resident's last known address;
- f. The home address and telephone number of a designated resident representative; and
- g. Any known allergies or sensitivities to a medication or a biological;

2. The admission date and physician admitting orders;

3. The admitting diagnosis;

4. The medical history and physical examination required in R9-10-908(5);

5. A copy of the resident's living will, health care power of attorney, or other health care directive, if applicable;

6. The name and telephone number of the resident's attending physician;

7. Orders;

8. Care plans;

9. A record of medical services, nursing services, and medically-related social services provided to a resident;

10. Documentation of any incident involving the resident;

11. Notes by a physician, the physician's designee, nursing personnel, and any other individual providing nursing care institution services to the resident;

12. Documentation of freedom from infectious pulmonary tuberculosis required in R9-10-908; and

13. Documentation of a medication or a biological administered to the resident that includes:

a. The date and time of administration;

b. The name, strength, dosage, and route of administration;

c. The type of vaccine, if applicable;

d. The signature and professional designation of the individual administering or observing the self-administration of the medication or biological; and

e. Any adverse reaction a resident has to the medication or biological.

#### Historical Note

Adopted effective October 20, 1982 (Supp. 82-5). Section repealed, new Section adopted effective February 17, 1995 (Supp. 95-1). Section repealed; new Section made by final rulemaking at 9 A.A.R. 338, effective March 16, 2003 (Supp. 03-1).