

Name Of Procedure: **Fax Registry**

Procedure Number #

Created: \_\_\_\_\_

Revised: \_\_\_\_\_

Approved By: \_\_\_\_\_

Date: \_\_\_\_\_

**Purpose:** Efficient and secure transmission of documents to intended recipients

**Prerequisite:** Fax server or MS Office Fax or similar software and hardware

**Performed by:** Administrator: limited access to create, modify fax address book

User: access to address book

**Materials Needed:**

**Start:**

**Premise:** Patient health information and other business documents require secure practices to reach intended recipients. A fax server can maintain (almost) unlimited number of fax addresses where a standalone fax machine has a limited number of pre-set dialing numbers.

Fax servers can be very useful for sending and receiving faxes. For those fax messages that are confidential (includes identifying patient information) ensure that the fax to email component has encryption protection. Fax to Fax service is, by definition, encrypted. Standard fax to email transmission is not encrypted; however, encryption software can be applied.

1. Identify document to be sent by fax
2. Enter Fax # and contact information into address book
3. Send introduction letter; flag to receive confirmation
4. Receive confirmation – enter note in address book
  - a. Categorize the contact information in the address book as once only, routine, etc
  - b. Update other information in the address book
  - c. Date the address book entry and name of person who confirmed the information
  - d. Maintain fax confirmation in paper format?
5. Send fax
6. Periodic renewal

## Introduction Letter (sample)

Dear

We have been asked to fax to you patient health information. In our continued effort to maintain confidentiality, we are

1. Sending you this introduction letter
2. Request you to confirm that this fax number is current and the preferred form of contact
3. Fax this letter back to us at \_\_\_\_\_ fax number
4. We will fax to you the requested information.

Should your fax number change, please advise us immediately.

Please confirm your: Participating physicians, hours, etc (optional)

Our physicians

Our services

Our hours, etc

*This publication provides general guidance for a Medical Office. Consultation with your Information Systems, Health Records, and Privacy Office is recommended. For additional assistance, contact Information Managers.*