BUMED NOTICE 6150

From: Chief, Bureau of Medicine and Surgery

Subj: SERVICE AND NON-SERVICE TREATMENT RECORDS – INTERIM DIGITAL TRANSITION POLICY

Ref: (a) DoD Instruction 6040.45 of 11 April 2017
(b) DoD Instruction 8580.02 of 12 August 2015
(c) NAVMED P-117

Encl: (1) Definition of Terms

1. **Purpose.** To provide interim digital transition policy guidance for the management and disposition of medical treatment record (MTR) documentation scanned or uploaded into the Health Artifact Image Management Solution (HAIMS) system and to align Navy Medicine with reference (a).

2. **Scope.** This notice applies to all medical department personnel.

3. **Discussion.** Reference (a) provides guidance for the use of HAIMS and clarified procedures pertaining to the disposition of artifacts that have been scanned or uploaded into HAIMS. The previous Bureau of Medicine and Surgery (BUMED) Notice 6150 varied from reference (a) by requiring paper service treatment record (STR) documents to be retained for Service members. This change will support Navy Medicine in the transition to the Military Health System (MHS) GENESIS Electronic Health Record (EHR) and prepare for the elimination of the paper MTR. The dental treatment record (DTR) must remain hard copy “paper” only, until the full rollout of MHS GENESIS.

4. **Policy**

a. **HAIMS as Official Record.** Per reference (a), HAIMS may be used as the official record copy for medical documentation only after paper STR and non-STR (NSTR) documents have been uploaded electronically into HAIMS and images have been verified to ensure integrity.

   (1) **Scan Clear and Legible Reports.** Navy medical treatment facilities (MTFs) are directed to scan and/or upload all STR and NSTR clear and legible reports (specialty care consultations, as defined by reference (a)) into HAIMS. This applies to paper documents for care provided by network health care providers and other MTFs.
(2) Scan Loose and Late Flowing Documents. MTF medical record departments are responsible for ensuring all loose and late flowing paper documents are scanned into HAIMS and verified to ensure ready access. Additionally, MTFs must ensure all paper MTR documentation generated during a Service member’s operational tour is uploaded into HAIMS upon the Service members return to a shore based MTF. These documents must not be forwarded to the Navy Medical Records Activity (NMRA), the contract STR central cell scanning site, or other MTF.

(3) Provide Quality Assurance. Verification of scanned documents must take place and be implemented into a quality assurance process to validate legibility, correct naming convention, and correct medical record placement prior to being discarded. All MTFs must establish local policy with approval authority for removal of records that have been erroneously scanned into an incorrect patient record. The policy must require that the Health Insurance Portability and Accountability Act officer be notified when records are erroneously uploaded to an incorrect patient’s record.

(4) Destruction of Paper Medical Documentation. All paper STR and NSTR documentation generated or received by an MTF must be destroyed following scan or upload into HAIMS, but will not be destroyed until HAIMS document verification is complete. MTF medical record department supervisors will ensure the manner of destruction is consistent with reference (b) and renders paper documentation “unusable, unreadable, or indecipherable,” preferably by shredding or burning.

b. Referrals Outside Direct Care System. This applies to Service members with MTRs maintained outside of an MTF (e.g., operational platform, deployable unit, aid station). Whenever a Service member is seen for referral services outside the direct care system, the Service member is responsible for ensuring the clear and legible reports are returned to the senior medical department representative (SMDR) of the operational platform for inclusion into his or her MTR.

c. Inpatient Medical Records. Per current practice, inpatient records are not scanned into HAIMS. Exceptions include documentation required to support follow-up care delivered in an outpatient environment. Narrative summaries, discharge summaries, and operative reports must be scanned into HAIMS.

d. Duplicate Paper MTRs. MTF medical records custodians will not create shadow, temporary, or duplicate paper MTRs for medical documentation that has already been scanned or uploaded into HAIMS.

5. Responsibilities. Senior market managers; commanders, Navy Medicine East and Navy Medicine West; and MTF commanding officers, officers in charge, and operational platform SMDRs must ensure compliance with the requirements of this notice and reference (a) during transition from paper STRs. Chapter 16 of reference (c) is being updated to reflect policy per these references.
6. **Records Management**. Records created as a result of this notice, regardless of media and format, must be managed per SECNAV M-5210.1 of January 2012.

Releasability and distribution:
This notice is cleared for public release and is available electronically only via Navy Medicine Web site: [http://www.med.navy.mil/directives/Pages/BUMEDNotes.aspx](http://www.med.navy.mil/directives/Pages/BUMEDNotes.aspx).
DEFINITION OF TERMS

Dental Treatment Record - The chronologic record of dental care received by Service members during the course of their military career.

HAIMS - Provides an enterprise-wide data sharing capability for all types of artifacts and images, including radiographs, clinical photographs, electrocardiograph, waveforms, audio files, video, and scanned documents. It interfaces with local repositories and shares data not previously globally accessible. HAIMS also makes available an electronic version of the STR to the VA.

Medical Treatment Record - The chronologic record of medical and mental health care received by Service members during the course of their military career. It includes documentation of all outpatient care and services (i.e., without overnight admittance to a hospital, clinic, or treatment facility), as well as narrative summaries of any inpatient care and operative reports, documentation of all shipboard care, and care received while deployed.

Non-Service Treatment Record - Chronology of outpatient medical, dental, and mental health care received by non-Service members and applies to anyone that does not meet the criteria for STR.

Service Treatment Record - The chronologic record of medical, dental, and mental health care received by Service members during the course of their military career. The combined DTR and MTR are considered a complete STR. It includes documentation of all outpatient care and services (i.e., without overnight admittance to an MTF), inpatient care summaries and operative reports, operational platform care, and care received in a military theater of operations. The STR is the official record used to support continuity of clinical care and the administrative, business-related, and evidentiary needs of the DoD, the VA, and the individual. Per reference (a), the STR components are media neutral. Paper and electronic versions of the STR and the non-STR are thus considered the legal medical record.