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Phil Youngberg,
Regional Environmental Officer, GSA Region
4 (APT).

[FR Doc. 96-31204 Filed 12-6-96; 8:45 am]

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Interagency Committee for Medical Records (ICMR) Videotaped Documentation of Surgical Procedures and Other Episodes of Care

AGENCY: General Services Administration.

ACTION: Guideline on videotaped documentation of surgical procedures and other episodes of care.

SUMMARY: Based on the assumptions listed below, members of the Interagency Committee on Medical Records (ICMR) voted to approve the following guidelines which we recommend for adoption throughout the federal health care system:

The Interagency Committee on Medical Records (ICMR) recommends a uniform approach for the videotaping of surgical procedures and other episodes of care: the patient must provide written consent before an episode of care is videotaped (except for abuse or neglect cases); there must be usual written documentation of the episode of care; and any permanent video images should be destroyed after written documentation is complete. The provider should indicate in his or her final documentation whether or not the image was destroyed. Exceptions to the prohibition against retaining videotapes may be permitted when videotapes are required for a specific interval for a specific reason (such as documentation of procedures for board certification or documentation of abuse or neglect). Any agency which chooses to keep images on file for educational purposes should have a standard operating procedure or policy on how the images will be maintained. This policy or procedure should be reviewed periodically.

Assumptions

Storage—Preservation of bulky videotapes imposes significant space requirements. Duration of storage of videotaped images is not yet defined by most federal activities, but the Department of Veterans Affairs must store all medical records for 75 years.

Technology—As technology changes, recovery of video images may require equipment which is no longer available.

Medicolegal—Whether a videotape of a procedure or consultation becomes part of the patient's medical record is

not well defined. However, according to anecdotal reports, if videotapes are available for some patients but not for all, absence of a videotape may create the perception of purposeful destruction of evidence.

Education—If a case is unusual or otherwise holds some special educational value, videotaping may be justifiable on educational grounds. If a case does not hold educational value and there is no legitimate medical reason to videotape (i.e., there is no benefit to the patient), then videotaping is probably not justifiable.

ADDRESSES: Interested persons are invited to submit comments regarding this guideline. Comments should refer to the guideline by name and should be sent to: CDR Patricia Buss, MC, USN; Code 32—Health Policy; Bureau of Medicine and Surgery; 2300 E Street, NW; Washington, DC 20372-5300.

Dated: November 19, 1996.
CDR Patricia Buss, MC, USN,
Chairperson, Interagency Committee on
Medical Records.

[FR Doc. 96-31205 Filed 12-6-96; 8:45 am]

BILLING CODE 6820-34-M

Interagency Committee for Medical Records (ICMR); Documentation of Telemedicine

AGENCY: General Services Administration.

ACTION: Guideline on documentation of telemedicine.

SUMMARY: Based on the assumptions listed below, members of the Interagency Committee on Medical Records (ICMR) voted to approve the following guidelines which we recommend for adoption throughout the federal health care system:

The Interagency Committee on Medical Records recommends a uniform approach to the documentation of telemedicine: the patient must provide written consent before an encounter is videotaped, there must be written documentation of the consultation by providers on both ends of the telemedicine encounter, and any permanent video images should be destroyed after written documentation is complete. The provider should indicate in his or her final documentation whether or not the image was destroyed. Exceptions to the prohibition against retaining videotapes may be permitted for cases with exceptional educational value. Any agency which chooses to keep images on file for educational purposes should have a standard operating procedure or policy on how the images will be

maintained. This guideline should be reviewed periodically.

Assumptions

Storage—Preservation of bulky videotapes imposes significant space requirements. Duration of storage of videotaped images is not yet defined by most federal activities, but the Department of Veterans Affairs must store all medical records for 75 years.

Technology—As technology changes, recovery of video images may require equipment which is no longer available.

Medicolegal—Whether a videotape of a procedure or consultation becomes part of the patient's medical record is not well defined. However, according to anecdotal reports, if videotapes are available for some patients but not for all, absence of a videotape may create the perception of purposeful destruction of evidence.

Education—If a case is unusual or otherwise holds some special educational value, videotaping may be justifiable on educational grounds. If a case does not hold educational value and there is no legitimate medical reason to videotape (i.e., there is no benefit to the patient), then videotaping is probably not justifiable.

ADDRESSES: Interested persons are invited to submit comments regarding this guideline. Comments should refer to the guideline by name and should be sent to: CDR Patricia Buss, MC, USN; Code 32—Health Policy; Bureau of Medicine and Surgery; 2300 E Street, NW; Washington, DC 20372-5300.

Dated: November 19, 1996.
CDR Patricia Buss, MC, USN,
Chairperson, Interagency Committee on
Medical Records.

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HARRY S. TRUMAN SCHOLARSHIP FOUNDATION

Closing Date for Nominations From Eligible Institutions of Higher Education; Notice

SUMMARY: Notice is hereby given that, pursuant to the authority contained in the Harry S. Truman Memorial Scholarship Act, Pub. L. 93-642 (20 U.S.C. 2001), nominations are being accepted from eligible institutions of higher education for Truman Scholarship. Procedures are prescribed at 45 CFR 1801.

In order to be assured consideration, all documentation in support of nominations must be received by the Truman Scholarship Review Committee,