Quiz

Privacy and Security Awareness for Staff

1. As an employee of UPMC, I am expected to:
   A. Keep my password confidential.
   B. Properly dispose of personal health information (PHI) by shredding or placing in shredding containers.
   C. Not download information from sources I cannot trust.
   D. Log off my computer when not in use.
   E. All of the above

2. “Need-to-know” refers to:
   A. The principle that patient information should be accessed or disclosed only as necessary in order to provide services to the patient or as otherwise authorized by the patient or the law.
   B. Your right to look at any information that you want to because you really want to know.

3. You are on a crowded elevator and a staff member with whom you need to discuss patient information enters the elevator. What should you do?
   A. Begin to discuss the information.
   B. Whisper the information.
   C. Write all of the information on a piece of paper and give it to the staff member.
   D. Wait until you can get to a private area before discussing the patient information.

4. You are in the cafeteria and hear a staff member discussing patient information. What should you do?
   A. Report the incident to a supervisor or privacy officer.
   B. Inform the staff member that he/she should not be discussing patient information in public areas.
   C. Join in on the discussion.
   D. Both A and B

5. I am permitted to look up medical records for the following:
   A. Myself
   B. My children
   C. Sick co-worker/neighbor
   D. A patient for whom I am caring.
   E. Both A and D

6. Confidential information should be disposed of in:
   A. Shredding bin
   B. Waste paper basket
   C. Biomedical hazard waste containers

7. You receive a call from a reporter who works at a newspaper or television station. The reporter asks about the medical status of a famous patient. What should you do?
   A. Advise the reporter to contact your facility’s media relations department.
   B. Provide the reporter with information on the patient’s status.
   C. Call the police.

8. If I suspect that my computer password has been stolen, I should:
   A. Wait for a while to see if any information appears to have been stolen.
   B. Immediately change my password and then call the ISD Help Desk to report it stolen.
   C. Do nothing unless the ISD Information Security Group contacts me to tell me that my password has been stolen.
9. To report inappropriate use of patient information, you can notify:
   A. Privacy officer
   B. Supervisor
   C. Privacy Helpline
   D. All of the above

10. You are about to leave on vacation, and your supervisor asks for your password because he or she will need to log on to the system to perform your responsibilities while you are away. What should you do?
   A. Give your password to your practice secretary.
   B. Do not give your password to your practice secretary.

11. When printing patient information:
   A. Retrieve information immediately from the printer.
   B. Confirm which printer you are using.
   C. Retrieve confidential information that was sent to the wrong printer.
   D. All of the above

12. You receive a subpoena requesting PHI. What should you do?
   A. Nothing
   B. Follow the Release of Protected Health Information policy and guidelines.
   C. Release what they are asking for.

13. A patient’s request to amend his/her PHI is denied. UPMC must:
   A. Inform the patient in writing.
   B. Allow the patient to include a statement of disagreement.
   C. Both A and B

14. During a patient’s initial visit, he/she must receive a copy of:
   A. UPMC’s Notice of Privacy Practices
   B. Data Use Agreement
   C. UPMC’s Release of Information Policy
   E. All of the above

15. You have just received a phone call requesting that you immediately fax the medical records of one of your patients to another health care provider who will be seeing the patient. What step(s) is missing from the following procedure for faxing PHI:
   • Use the approved UPMC cover sheet for your entity and clearly specify the intended recipient of the fax.
   • When sending a fax to a non-routine recipient, notify the recipient in advance.
   • Verify with the recipient that the fax number is correct prior to sending the fax.
   • Ask the patient to provide the fax number as part of his/her authorization. Have the patient write it on their “Authorization for the Release of PHI” form.
   A. Do not fax the records — only send them by mail.
   B. After the fax has transmitted, verify with the recipient that the fax has been received.
   C. Do not fax the records. Since you are not the person assigned to release medical records, you should wait and give them to the appropriate person to send.
   D. If available, use the button on the fax machine to dial the preprogrammed number for the receiving office.
   E. Both B and D

I attest to the following:
• I completed the Privacy and Security Awareness training on the date indicated below.
• The signature below is my own.

Print Name

Clinical Program (if applicable)

Department

Business Unit      Facility

Signature          Date

Revised 01/21/2010