Procedure for obtaining an Emergency Medical Services Report

The Lexington Division of Fire & Emergency Services completes a state required Patient Care Report (PCR) for all medical calls. These reports are considered Protected Health Information (PHI) and are strictly protected by the Health Insurance Portability and Accountability Act (HIPAA) to insure our patients' privacy.

Reports are not released from the Fire Stations.

If you were a patient and you are in need of a copy of your report:

A patient or legal guardian may request his/her own PCR by contacting the Division's Records Coordinator. Please have available the following information: incident date, incident location, and approximate time of incident.

EMS reports must be picked up in person at 211 E. Third Street with a photo ID.

PCR are restricted in disclosure in accordance with **HIPAA**. In order to obtain a complete copy of a PCR, you must demonstrate proof of the following:

- You are the patient listed on the PCR. Picture ID required.
- You must sign in person for the report after showing proper identification.
- We are not permitted to fax a PCR in order to comply with HIPAA legislation.

• If the patient is a minor, or you are the legal custodian of an orphan, the elderly or other circumstance, you must provide legal documentation for our review.

• A PCR may also be obtained by a court order, or by providing legal authorization through a law firm representing you as a client.

• We are unable to release health information over the phone, by e-mail, fax, text, or other electronic methods as these are unsecure networks that may be accessible to others.

• These procedures are required in order to comply with HIPAA and other medical confidentiality legislation to assure protection of your private health care information.

• We appreciate your understanding as we comply with federal law.

If you are an attorney requesting a copy of your clients EMS report:

An attorney may request a copy of his/her clients PCR. This request must be made in writing and must include the following information: incident date, incident location, approximate time of incident, and the patient's name. A signed Medical Release Form must be attached to the request letter.

Attorney requests are to be mailed to:

Lexington Division of Fire & Emergency Service Attention: Records Coordinator 211 E. Third Street Lexington, Kentucky 40508

If the parameters of your request fall outside the above guidelines, please call the Records Coordinator at (859) 231-5668 to assist you.

Lexington Division of Fire & Emergency Services does not charge a fee for obtaining a copy of EMS reports.