



**Institutional Handbook of Operating Procedures**  
**Policy 09.02.08**

Section: Clinical Policies	Responsible Vice President: Executive Vice President and CEO UTMB Health System
Subject: Patient Records	Responsible Entity: Health Information Management

**I. Title**

*Medical Record Forms Management*

**II. Policy**

The Health Information Management Department (HIM) coordinates the approval process for all paper [medical record forms](#).

Only approved forms will be retained in the UTMB medical record. Forms should be standardized across the Health System and not created for single clinical care locations.

When HIM identifies an unapproved form that has been filed in the medical record or scanned into Epic the form will be sent to the document owner for review and submission to HIM for proper approval.

**III. Procedures**

- A.** Requests to create or change a paper medical record form must be submitted to HIM. It is the responsibility of the [document owner](#) to notify HIM whenever a new form is created or an existing form is revised. Forms will be produced according to established medical record guidelines for page layout and construction.
- B.** Analysis and research of existing forms will be conducted by the document owner so that creation of a redundant new form may be avoided. The document owner will also ensure funding for the form.
- C.** All new and revised forms require approval by HIM prior to official use. For most consent forms, HIM will routinely require review and approval by Legal Affairs and/or Risk Management. For all forms, HIM may require proof of review and approval by department representatives and/or subject matter experts.
- D.** Forms which have been approved may not be altered in any way without re-submission to HIM for review and approval.
- E.** The document owner will work with the forms vendor and/or UTMB Print Shop to coordinate printing of approved medical record forms.

- F. HIM will work with the forms vendor to catalog all medical record forms and periodically examine forms being used to determine whether some may be recommended for elimination or combined with other forms.

**IV. Related UTMB Policies and Procedures**

[IHOP - 09.02.13 - UTMB Medical Record Policy](#)

**V. Dates Approved or Amended**

<i>Originated:</i> 04/01/1990	
<i>Reviewed with Changes</i>	<i>Reviewed without Changes</i>
01/10/2013	08/07/2019
08/24/2016	

**VI. Contact Information**

HIM Administration  
(409) 772-1918