Scope:

All end users of the clinical decision support application, Clinical Looking Glass (CLG), who wish to use CLG to identify patient artifacts for teaching purposes.

Purpose:

To establish norms for the use of the CLG for operational use in the Medical Center for identifying teaching materials.

Objective: CLG is a powerful search tool which may be used to identify patients with imaging, lab and other findings which may be used for self-learning, or teaching residents, medical students, and other healthcare professionals within the scope of the students’ training at Montefiore.

Exclusions: This protocol does not cover use of CLG for research or QI. The reader is referred to JC07.1 for these uses.

Background: Clinical Looking Glass is a user-friendly interactive software application developed at Montefiore to evaluate health care quality, effectiveness, and efficiency. The system integrates clinical and administrative datasets allowing non-statisticians to produce epidemiologically cogent self-documenting reports globally assessing care quality while identifying the specific patients in need of clinical remediation. A feature of CLG which may be of particular interest to Program Directors and other supervising physicians/providers is the ability to search by diagnosis, procedure or keyword across many
hospital databases and identify patients with the desired diagnosis. Clinical data from these patients could then be incorporated into teaching materials such as lectures or pictorial essays.

**Federal Law and Montefiore Policy:** Montefiore Medical Center Administrative policy and procedure JC07.1, Appendix C: (Data Use Agreement – for Use of Clinical Looking Glass), element 4 delineates that CLG may be used in privileged mode for educational activities. This is the text:

> Educational Activities - Use of Clinical Looking Glass in privileged mode is permitted for training as indicated in section 164.501 of title 45, Code of Federal Regulations. "Reviewing the competence or qualifications of health care professionals, evaluating practitioner and provider performance, health plan performance, conducting training programs in which students, trainees, or practitioners in areas of health care learn under supervision to practice or improve their skills as health care providers, training of non-health care professionals, accreditation, certification, licensing, or credentialing activities."

**Practical Guidance:** Access to identified patient information is available for educational activities within the institution as stated above. These are some principles:

1. All users are required to take HIPAA training to become knowledgeable about HIPAA, PHI, and standards for protecting PHI.
2. All accessed information will be automatically tracked by CLG.
3. Considering that data access will be for “operations” (rather than “patient care”), the minimal amount of identified patient information should be accessed, and stored and disclosed for teaching purposes.
4. Lists of identified patient information obtained from CLG must be treated with the safeguards of PHI including storage on a password protected/encrypted drive or behind the Montefiore firewall. Requirements for safeguarding PHI are found in Montefiore Administrative Policy & Procedure JH41.1, “Protected Health Information Uses and Disclosures” and JH69.1, “Security of Electronic Protected Health Information.”
5. Images and other clinical information being displayed during teaching within Montefiore should be displayed without patient identifiers if possible.
6. When teaching outside of Montefiore or for pictorial essays, images must be fully de-identified.
7. PHI data cannot be exported from the hospital to be used at another institution or for commercial purposes.
8. Release of de-identified data outside of Montefiore may only be done with the approval of the Department Chairman.
9. All identified patient lists must be deleted or destroyed at the earliest possible opportunity once the educational need has been met, in accordance with Montefiore policies regarding destruction of PHI.
10. When using images for case reports or part of a pictorial essay, although there is no PHI being displayed, if the identity of the patient can be traced due to the rarity or uniqueness of the diagnosis, patient authorization must be obtained.
(11) Identified patient data initially accessed for educational purposes for which there is later desire to use the data for research will need IRB approval prior to moving forward on the research endeavor.

**How to indicate that you are using CLG for an educational purpose**: This is how the training provider will indicate that identified patient information is being accessed for educational purposes:

1. Cohort lists will be designed and generated as described in CLG teaching materials.
2. When identified patient information is finally needed click the “show identifiers” box (Figure 1).

(3) A new window will open giving choices of why identified information is desired. Choose “Patient Worklist” (Figure 2).

(4) A text entry box will open at the bottom of the window (Figure 3). In it, enter what the goal for your search is. For example: “finding cases of CJD for radiology resident lecture” or “identifying all cases of Kasai Procedure for a pictorial essay on CT appearance of the Kasai Procedure”