

KANSAS HOSPITAL ASSOCIATION

RECORD RETENTION GUIDE

2006



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INTRODUCTION

This Guide is intended to provide basic information about records retention and replace the former guide which was last updated in 1999. It will provide guidance to hospitals in dealing with the voluminous documents created or maintained each year. Where appropriate, the Guide sets forth the requirements provided by regulations and statutes. In some instances, the recommendations may vary from the minimum legal requirements.

Some of the recommendations contained in this Guide relate to the statutes of limitations in Kansas. Generally, an adult must may bring an action for medical malpractice within two (2) years after the act giving rise to the injury, but if the injury is not reasonably ascertainable until some time after the initial act, the lawsuit may be brought within two (2) years of discovering the injury, but in no circumstances more than four (4) years after the act. For minors, prisoners, and those with mental incapacities, the action must be brought within one (1) year after the incapacity is removed, but in no circumstances more than eight (8) years after the act. Claims based on written contracts may be filed within five (5) years, as can many actions relating to real property. Actions based on oral agreements and actions created by statute (such as the Kansas Consumer Protection Act) must be brought within three (3) years. Since these statutes of limitations control the time when a lawsuit may be commenced, records should normally not be destroyed prior to the expiration of the limitation period.

Each hospital should make its own decision regarding the length of time a particular type of record should be maintained. There may be legitimate business reasons for hospitals to shorten the period of time that certain records are maintained. So long as all legal requirements are met, it is anticipated that in some instances a hospital may elect to either lengthen or shorten the recommended period set forth herein.

Hospitals should consider adopting a record destruction policy. If such a policy is adopted, it is important that it be followed uniformly. However, no record should be destroyed which relates to a matter on which there is a claim, lawsuit, or governmental investigation, or one is imminent. When a record falls within one of these categories, all records relating to the matter should be secured in a safe place and retained until the matter has been resolved.

This Guide is being provided for informational purposes only and is current only as of its creation. Since the statutes, rules and regulations are ever-changing, hospital personnel should keep abreast of the requirements of both federal and state law regarding record retention. Each hospital should also look to any requirements or recommendations adopted by the Joint Commission on Accreditation of Health Care Organizations (JCAHO) or other hospital or medical organizations in determining the procedures to be followed.

We hope this Guide will be of assistance to individuals involved with medical and business records management. If you have specific questions about the retention period of a specific record not included or as to the current legal retention periods, you should seek the advice of legal counsel.

KANSAS HOSPITAL ASSOCIATION RECORDS RETENTION GUIDE

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HEALTH CARE

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
1. Abortion records	10 years or not less than 1 year after a minor reaches the age of majority, whichever is longer.	<p>K.S.A. 65-6703(b)(5) requires a <i>physician's</i> abortion records to be retained for 5 years. It is recommended that the longer period of 10 years be used so as not to conflict with the Board of Healing Arts regulation, K.A.R. 100-24-2, which requires that a <i>physician's</i> records be retained for 10 years.</p> <p>If the patient is a minor, then the <i>hospital</i> shall retain each medical record for (A) 10 years after the date of last discharge of the patient or (B) 1 year beyond the date that patients who are minors reach their majority, whichever is longer. K.A.R. 28-34-9a(d)(1).</p>
2. Admissions log or register	Permanent.	
3. Ambulatory surgical centers: Annual checks and calibrations of all radiology equipment	5 years.	<p>Ambulatory surgical centers in which radiology services are performed in the center must have written policies and procedures. At a minimum, records shall be kept of all annual checks and calibrations of all radiology equipment. K.S.A. 48-1607; K.A.R. 28-34-59a(d)-(e). For definitions applicable to Ambulatory Surgical Center, see K.A.R. 28-34-50.</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
4.Ambulatory surgical centers: Laboratory services.	2 years for routine test reports; 5 years for blood banking test reports; 10 years for histologic or cytologic test reports.	K.A.R. 28-34-59a(b)(3).
5.Ambulatory surgical centers: Medical records	Not less than 10 years after date of last discharge or not less than 1 year beyond the date that patients who are minors reach majority, whichever is longer.	K.A.R. 28-34-57(c).
6.Ambulatory surgical centers: Medical staff minutes (non-peer review/risk management records).	Permanent.	Ambulatory surgical centers are required to hold regular meetings of the medical staff. Records of such meetings shall include both attendance and minutes. K.A.R. 28-34-54(h); K.A.R. 28-34-50; K.A.R. 28-34-57(c).

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>7. Ambulatory surgical centers: Peer Review and Risk Management records.</p>	<p>Not less than 1 year following completion of the facility investigation (not less than 5 years if adverse action is taken.)</p>	<p>All risk management and peer review records (incident reports, investigational tools, minutes of risk management committees and other documentation of clinical analysis for each reported incident). Adverse Finding Reports (filed with a state licensing/regulatory agency) and staff privilege records must be retained for a minimum of 1 year. K.A.R. 28-52-2(c). K.A.R. 28-52-2 relates only to risk management records, but the 1 year retention period past the completion of the facility investigation is also recommended for peer review records. Any risk management or peer review record, in which an adverse privilege action or employment action was taken by the facility, should be retained for 5 years after completion of the facility investigation.</p> <p>All peer review, litigation review and risk management records should be kept separate from patient records. K.S.A. 65-28,121; K.S.A. 65-4915 <i>et seq.</i>; K.S.A. 65-4921 <i>et seq.</i>; K.A.R. 28-52-2.</p>
<p>8. Annual reports to governmental agencies</p>	<p>Permanent.</p>	
<p>9. Appointment calendars</p>	<p>8 years.</p>	<p>These should generally be maintained past the statute of repose which is 4 years for malpractice claims and 8 years for minors. See K.S.A. 60-513(c); K.S.A. 60-515.</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
10. Birth and death registers	Permanent.	
11. Blood and blood components	Not less than 5 years after the records of processing have been completed or 6 months after the latest expiration date for the individual product, whichever is later. When there is no expiration date, records shall be retained indefinitely.	<p>Records shall be maintained concurrently with the performance of each significant step in the collection, processing, compatibility testing, storage and distribution of each unit of blood and blood components.</p> <p>Appropriate records shall be available from which to determine lot numbers of supplies and reagents used for specific lots or units of the final product.</p> <p>Records shall be retained for such interval beyond the expiration date for the blood or blood components as necessary to facilitate the reporting of any unfavorable clinical reactions. The retention period shall be no less than 5 years after the records of processing have been completed or 6 months after the latest expiration date for the individual product, whichever is a later date. When there is no expiration date, records shall be retained indefinitely. 21 CFR 606.160(a), (b) and (d); <u>see also</u> 21 CFR 610.46.</p>
12. Call schedules	8 years	These should generally be maintained past the statute of repose which is 4 years for malpractice claims and 8 years for minors. <u>See</u> K.S.A. 60-513(c); K.S.A. 60-515.
13. Cancer registry	Permanent.	
14. Communicable Disease reports	5 years.	<u>See</u> K.A.R. 28-1-18.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>15. Controlled substances: Dispensing physicians NOT IN A HOSPITAL SETTING): Legend drugs and controlled substance records.</p>	<p>Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer.</p>	<p>Although not a hospital record, a physician dispensing medication in a hospital affiliated clinic must keep a suitable book or file which shall be preserved for a period of not less than 3 years. Every prescription order filled or refilled by such dispensing physician, and said book or file of prescription orders, shall at all times be open to inspection by proper authorities. K.A.R. 100-21-4.</p> <p>Notwithstanding the biennial inventory requirements set forth in 21 CFR 1304.11 and 21 CFR 1304.21, the Kansas Board of Healing Arts requires all dispensing physicians to make an inventory every 2 years on May 1st.</p> <p>Records of these inventories shall be maintained for a period of 3 years, which is greater than the 2 year period set forth in the CFR. See also K.A.R. 100-24-2 and K.A.R. 100-21-4.</p>
<p>16. Delivery room register</p>	<p>Permanent.</p>	
<p>17. Discharge log or register</p>	<p>Permanent.</p>	

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
18. Disease index	Permanent.	A disease index lists diseases, conditions and injuries by the specific code number for each disease, condition or injury based on a clinical classification system to allow for retrieval of medical records for research by each specific code. It is used primarily for medical research of diseases by type based upon the code number for each disease, among other uses. The disease index system will generally be in operation for the life of the hospital and the hospital should have a way of indexing all records in their possession regardless of when the case was handled.
19. Emergency medical services: Medical reviews of patient care activities.	Not less than 2 years.	K.A.R. 109-2-5(w)(3).
20. Emergency medical services: Patient care record.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer.	K.A.R. 109-2-5(s) requires these records to be maintained for only 3 years, but the longer period for hospital medical records is recommended.
21. Emergency room register	Permanent.	See 42 CFR 489-20.
22. Electronic records: (Digital, scanned, CDs or other electronic records).	See Comment.	All electronic records should be maintained for the same amount of time such records would be maintained if they were in hard copy form. Thus, medical records are required to be maintained for the same period of time regardless if they are maintained in paper or electronic form.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
23. End-stage renal disease services	Not less than 10 years from date of last treatment or in the case of a minor, 3 years after the patient reaches the age of majority, whichever is longer.	<p>Medical records to be maintained by suppliers of end-stage renal disease services must meet independent record retention guidelines, as set forth in 42 CFR 405.2139(a) and (e).</p> <p>The CFR states that a record retention period under state law shall control. Under K.A.R. 28-34-9a each medical record shall be kept on file for 10 years after the date of last discharge of the patient or one year beyond the date that the minor patient reached the age of majority, whichever is longer.</p> <p>Although the retention period under Kansas state law, K.A.R. 28-34-9a, requires only 1 year, the 3 year federal retention period regarding minors should be applied.</p>
24. HIV confidential information	No longer than necessary for the purposes of the control of HIV infection.	K.A.R. 28-1-26.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
25. Home health agencies: Clinical records.	Not less than 5 years after the date of last discharge of the patient.	<p>A clinical record containing pertinent past and current findings in accordance with accepted professional standards is maintained for every patient receiving home health services. 42 CFR 484.48. Content of record required under State law is listed in K.A.R. 28-51-110.</p> <p>The CFR states that a record retention period under state law shall control. Under K.A.R. 28-51-110, clinical records shall be retained in a retrievable form for at least five years after the date of last discharge of the patient.</p>
26. Hospitals: Medical physicist's annual quality control and equipment standard inspection/survey of mammographies.	10 years.	As part of a medical facility's overall quality assurance program, each facility shall have a medical physicist establish, monitor and direct the procedures under 21 CFR 900.12(d) and (e) as to equipment, phantom images and clinical images. At a minimum, the medical physicist shall perform at least an annual survey to determine that the facility meets the quality control and equipment standards in 21 CFR 900.12(e)(2), (5) and (6). These reports must be maintained until the next annual survey is satisfactorily completed. 21 CFR 900.12(e).

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>27. Hospitals: Medical records – medical patient records include any record dealing with treatment, operation, diagnosis, prescription, consultation, counsel, care or assessment for the ascertainment, cure, relief, palliation, adjustment or correction of any human disease, ailment, deformity, injury, pregnancy, child birth or other physical and/or mental condition to include preliminary and restorative measures.</p> <p>(Specific identifiable records under Kansas and federal law are: Ambulatory surgical center records, K.A.R. 28-34-57; Anesthesia service records; Emergency room services patient records, K.A.R. 28-34-16a(b)(7); Mammograms and associated records, 21 CFR 900.12(e)(1) and (2); Occupational therapy department records, K.A.R. 28-34-15; Radiology department patient records of findings and results of examinations, K.A.R. 28-34-12(m) and K.A.R. 28-34-9a(e)(2); Surgical services patient records, K.A.R. 28-34-17b(d)(4); Social services department records, K.A.R. 28-34-24(c).)</p>	<p>Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. After destruction of medical records, if any, summaries of the medical records must be maintained for 25 years.</p>	<p>Hospitals must have a medical records service that has administrative responsibility for medical records. A medical record must be maintained for every individual evaluated or treated in the hospital. 42 CFR 482.24. In the Conditions of Participation, the CMS requires hospitals to have a medical records service that has administrative responsibility for medical records and such medical records must be retained in their original or legally reproduced form for a period of at least 5 years. 42 CFR 482-24.</p> <p>Under Kansas law, each hospital shall maintain medical records for each patient admitted for care. Each medical record shall be kept on file for 10 years after the date of last discharge of the patient or 1 year beyond the date that patients who are minors reach their majority, whichever is longer. K.A.R. 28-34-9a(d)(1).</p> <p>If a hospital discontinues operation, the hospital shall inform the Kansas Department of Health and Environment of the location of its records. K.A.R. 28-34-9a(d)(2).</p> <p>A summary shall be maintained of medical records which have been destroyed. The summary shall be retained on file for at least 25 years and include the information listed in K.A.R. 28-34-9a(d)(3).</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>28. Hospitals: Radiation records – leakage or contamination of sealed sources.</p>	<p>10 years.</p>	<p>Any institution, person or group of persons who meets the requirements of K.A.R. 28-35-181a or 28-35-181b and who is granted an application, is required to maintain radiation safety and handling instructions that are approved by the Secretary of the Kansas Department of Health and Environment and the United States Nuclear Regulatory Commission. In the alternative, such institution, person or group may, upon agreement by the State, allow the manufacturer to furnish the radiation safety and handling instructions on the label attached to the source, or permanent container thereof, or in the leaflet or brochure that accompanies the source in a legible and conveniently available form. K.A.R. 28-35-181d.</p> <p>Such institution, person or group must conduct a quarterly physical inventory to account for all sources received and processed. Records of the inventory shall be maintained for inspection by the Kansas Department of Health and Environment and shall include the quantities and kinds of radioactive material, location of sources and the date of inventory. K.A.R. 28-35-181d and K.A.R. 28-35-137. A record of each test for leakage or contamination of sealed sources shall be kept for not less than 5 years after the record is made. K.A.R. 28-35-227(e).</p>

TITLE§	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
29. Hospitals: Radiology department – X-ray films.	Retain like a medical record: Not less than 10 years after date of last film or not less than 1 year after a minor reaches the age of majority, whichever is longer. After destruction, a summary of the medical record should be maintained for 25 years. K.A.R. 28-34-9a(d)(3).	Regulations do not require that x-ray films be maintained for a particular length of time.
30. Hospitals: Operating room register.	Permanent.	K.A.R. 28-34-17b(e).
31. Laboratory: Blood and blood product quality control records.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	21 CFR 606.160(d) requires not less than 5 years after processing records have been completed or 6 months after the latest expiration date, whichever is the later date.
32. Laboratory: Blood and blood product testing	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	<u>See</u> 21 CFR 606-160(d); “Laboratory: Test records, #43 below and 42 CFR 493.1105(a)(6). (K.A.R. 28-34-11 for blood banking test reports.)
33. Laboratory: Cytologic test reports.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	K.A.R. 28-34-11(f)(3).

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
34. Laboratory: Histologic test reports.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	K.A.R. 28-34-11(f)(3).
35. Laboratory: Immunohematology quality control records.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	21 CFR 606.160(d) requires not less than 5 years after processing records have been completed or 6 months after the latest expiration date, whichever is the later date.
36. Laboratory: Immunohematology records.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	See “Laboratory: Test records,” #43 below; 42 CFR 493-1105(a)(6) and 21 CFR 606.160(d).
37. Laboratory: Investigation and corrective action documentation.	Not less than 2 years.	Each laboratory shall undertake an investigation and institute corrective action for all incorrect responses identified in the proficiency testing program. The laboratory shall maintain documentation of the investigation and corrective action for a period of 2 years. K.A.R. 28-33-12(j)(3).

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
38. Laboratory: Pathology test reports	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	Not less than 10 years after the date of reporting. 42 CFR 493.1105(a)(6)(ii).
39. Laboratory: Proficiency testing records.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	Not less than 2 years. 42 CFR 493.1105(a)(4).
40. Laboratory: Quality control records.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	The laboratory must document and maintain records of all quality control activities and retain such records for at least 2 years, with the exceptions that immuno-hematology quality control records and blood and blood products quality control records must be maintained for a period of at least 5 years after processing records have been completed or 6 months after the latest expiration date, whichever is the latest date. 42 CFR 493.1105(a)(3) and 21 CFR 606.160(d).

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
41. Laboratory: Records of test requisitions or test authorizations.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	A laboratory can perform tests only at the written or electronic request of an authorized person. A laboratory must maintain the written authorization or documentation of efforts made to obtain a written authorization. Records of test requisitions or test authorizations must be retained for a minimum of 2 years. The patient's chart or medical record, if used as the test requisition, must be retained for a minimum of 2 years and must be available to the laboratory at the time of testing. 42 CFR 493.1105(a).
42. Laboratory: Slide, block, and tissue retention.	Not less than 5 years from date of examination for cytology slide preparations; not less than 10 years from date of examination for histopathology slides; not less than 2 years from date of examination for pathology specimen blocks; preserve remnants of tissue for pathology examination until a diagnosis is made on the specimen.	42 CFR 493.1105(a)(7). <u>See also</u> K.A.R. 28-33-12(c)(3)(H) (A laboratory quality assurance program shall retain all confirmed positive specimens for at least 1 year).
43. Laboratory: Test procedures	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	Retain a copy of each test procedure for at least 2 years after a procedure has been discontinued. 42 CFR 493.1105(a)(2).

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
44. Laboratory: Test records.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	<p>A laboratory must maintain a record system to ensure reliable identification of patient specimens as they are processed in tests. These records must identify the personnel performing the testing procedure. Records of patient testing, including, if applicable, instrument printouts, must be retained for at least 2 years. Immunohematology records and transfusion records must be retained for no less than 5 years in accordance with 21 CFR 606.160(d).</p> <p>One copy of each test requisition, test record, and test report shall be maintained in a readily retrievable manner by the laboratory for a period of 2 years. K.A.R. 28-33-12.</p> <p>In addition, records of blood and blood product testing must be maintained for a period not less than 5 years after processing records have been completed, or 6 months after the last expiration date, whichever is the later date, in accordance with 21 CFR 606.160(d). See 42 CFR 493.1107 and K.A.R. 28-34-11.</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
45. Laboratory: Test report	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	The laboratory report must be sent promptly to the authorized person and the original report or an exact duplicate of each test report, including final and preliminary report, must be retained by the testing laboratory for a period of at least 2 years after the date of reporting. <u>See</u> 42 CFR 493.1105(a)(6).
46. Laboratory, Therapy, X-Ray: Appointment book.	8 years.	These should generally be maintained past the statute of repose which is 4 years for malpractice claims and 8 years for minors. <u>See</u> K.S.A. 60-513(c); K.S.A. 60-515.
47. Living Will (Declaration of withholding or withdrawal of life-sustaining procedures in a terminal condition.)	2 years after revocation or death if not relied upon. If relied upon, keep as part of medical record. (Must be available for subsequent admissions.)	This “declaration” is considered part of the patient’s medical record. <u>See</u> K.S.A. 65-28,103(b). K.S.A. 65-28,101 (the Kansas Natural Death Act) does not specify any type of retention period. Due to the importance of a Living Will, it is recommended that such be retained for as long as the declarant is alive. If relied upon, it should become a part of the medical record. If a summary is compiled of other medical records, the Living Will should be attached to such summary. This retention recommendation is also applicable to (1) any subsequent written revocation of the declaration, (2) the written certification by the involved physician, and (3) any medical record that reflects a subsequent declaration of a qualified patient. K.S.A. 65-28,103; 65-28,104; 65-28,105; and 65-28,106.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
48. Logs: (Respiratory therapy, birth statistics, and the like).	5 years for adults and 8 years for minors.	Generally, most logs are not maintained as part of the medical record in most hospitals; however, such logs can sometimes be important in the event of a bad outcome. As such, the logs should generally be maintained beyond the period of the Statute of Repose for malpractice claims. See K.S.A. 60-513(c); K.S.A. 60-515(a). If such logs are maintained as part of the medical records by a hospital, then follow medical record retention guidelines. See above, #26.
49. Maternity center records: Medical records.	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	<u>See</u> K.A.R. 28-4-373(e)(4). Mandatory records and reports to be kept on file are listed in K.A.R. 29-4-373(e). If a hospital, also see #26 above, Hospital: Medical Records.
50. M+C organization	Not less than 6 years for all books, records, documents or other evidence of accounting procedures and practices.	The M+C organization's contract with the CMS must contain a provision that the M+C organization agrees to maintain for 6 years the following: books, records, documents and other evidence of accounting procedures and practices as listed in 42 CFR 422.502(d).

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>51. Medicaid provider participants records: Claims.</p>	<p>Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer.</p>	<p>Provider participation requirements in the Medicaid program require that each provider shall maintain and furnish within the time frame specified in a request any information for 5 years from the date of service that the Kansas Department of Social and Rehabilitation Services, its designee or any other government agency acting in its official capacity, may request this information to assure proper payment by the Medicaid/MediKan program overpayments. K.A.R. 30-5-59(d) and K.A.R. 30-5-96 as it pertains to any pharmacy provider.</p>
<p>52. Medical device incident reports</p>	<p>Not less than 10 years after date of report or not less than 1 year after a minor reaches the age of majority, whichever is longer.</p>	<p>Medical device user facilities must report deaths and serious injuries to which a device has or may have caused or contributed.</p> <p>Additionally, user facilities must establish and maintain adverse event files, and must submit to the federal Food and Drug Administration (FDA) specified follow up and summary reports. A user facility shall retain a medical device report "event file," relating to an adverse event for a period of 2 years from the date of the event. 21 CFR 803.1 and 21 CFR 803.18(c). The required reports are listed at 21 CFR 803.10.</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
53. Medical record index number	Permanent.	Also known as the Master Patient Index.
54. Occupational injuries and illnesses	Not less than 5 years following the end of the calendar year covered.	A log and summary of occupational injuries and illnesses must be maintained by each establishment regarding such occupational injuries and illnesses. Additionally, a supplementary record for each occupational injury or illness for that establishment must be maintained. Furthermore, each employer shall post an annual summary of occupational injuries and illnesses for each establishment. 29 CFR 1904.2, 1904.4, 1904.5, 1904.6, and 1904.33.
55. Outpatient clinic: Appointment books	8 years.	These should generally be maintained past the statute of repose which is 4 years for malpractice claims and 8 years for minors. <u>See</u> K.S.A. 60-513(c); K.S.A. 60-515.
56. Outpatient clinic: Register.	Permanent.	
57. Social service reporting: including confidential care histories, photographs and investigative files not a part of medical record, including child, resident and adult abuse.	5 years.	<u>See</u> K.S.A. 38-1522; K.S.A. 39-1402; K.S.A. 39-1430
58. Patient index	Permanent.	See also #52.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
59. Physical therapy outpatient services	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	Outpatient physical therapy services must maintain a clinical record and all clinical information pertaining to a patient must be centralized in the patient's clinical record. 42 CFR 486.161.
60. Surgical records	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (Not less than 25 years for summaries of medical records which have been destroyed.)	Maintain with hospital medical records.
61. Surgical Register or Log	Permanent.	

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>62. Radiation records: Records of individual monitoring results.</p>	<p>Permanent.</p>	<p>Each licensee or registrant under Article 35, chapter 2 of the Kansas Administrative Regulations, shall retain each required form or record until the Kansas Department of Health & Environment terminates each pertinent license or registration requiring the record. K.A.R. 28-35-217(b). Upon termination of the license or registration, the licensee or registrant shall permanently store records on a form approved by the KDHE or equivalent or shall make arrangements with the KDHE for transfer of the records to the KDHE. K.A.R. 28-35-227h. A record of each test for leakage or contamination of sealed sources shall be kept for not less than 5 years after the record is made. K.A.R. 28-35-227e.</p> <p>For additional required records, see K.A.R. 28-35-227c, K.A.R. 28-35-228a, K.A.R. 28-35-230a, K.A.R. 28-35-230f.</p> <p>Licenses should be reviewed to determine if a different retention period is listed in the license. If no time period is listed in either a regulation or the license, then the records must be retained until the Nuclear Regulatory Commission terminates each license that authorizes the activity that is subject to the recordkeeping requirement.</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>63. Radioisotopes (receipt, transfer, use, storage, delivery, disposal and reports of over-exposure)</p>	<p>Permanent.</p>	<p>A licensee who receives byproduct material from the NRC shall retain each record of byproduct material as long as the material is possessed and for three years following transfer or disposal of the material. The licensee who transferred the material shall retain each record of transfer for three years after each transfer unless a specific requirement in the NRC regulations requires otherwise. The actual license may contain a different requirement from the regulations and therefore, each license should be reviewed to determine if a different retention period is listed in the license. If no time period is listed in either a NRC regulation or the license then the records must be retained until the NRC terminates each license that authorizes the activity that is subject to the recordkeeping requirement. 10 CFR 30.51.</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>64. Records: Human tissue intended for transplantation.</p>	<p>At least 10 years beyond the date of transplantation (if known) distribution, disposition, or expiration of the tissue, whichever is later.</p>	<p>Records shall be maintained concurrently with the performance of each significant step required in the performance of infectious disease screening and testing of donors of human tissue. The records shall identify the person performing the work, the dates of the various entries and shall be as detailed as necessary to provide a complete history of the work performed and to relate the records to the particular tissue involved. Records required under this part may be retained electronically or as original paper records.</p> <p>Records shall be retained at least 10 years beyond the date of transplantation if known, distribution, disposition, or expiration of the tissue, whichever is latest. 21 CFR 1270.33(a), (g) and (h).</p> <p>Records that must be maintained pursuant to this CFR include but are not limited to: Documentation of results and interpretation of all required infectious disease tests, information on the identity and relevant medical records of the donor as required by 21 CFR 1270.21(e), documentation of the receipt and/or distribution of human tissue and documentation of the destruction or other disposition of human tissue. 21 CFR 1270.35.</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
65. Tracings: Electrocardiogram (EKG) pediatric.	If tracings are made, they should be kept as part of the medical record.	
66. Tracings: Electroencephalogram (EEG).	If tracings are made, they should be kept as part of the medical record.	
67. Tracings: Electromyogram (EMG).	If tracings are made, they should be kept as part of the medical record.	
68. Tracings: Fetal monitoring.	If tracings are made, they should be kept as part of the medical record.	
69. Tumor registry	Permanent.	

ADMINISTRATIVE OFFICES

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
70. Annual reports to Board	Permanent.	
71. Appraisal reports	Permanent.	
72. Audit reports (financial)	10 years.	
73. Blue Cross income and expense summaries	7 years.	
74. Board minutes	Permanent.	
75. Call schedules	8 years	These should generally be maintained past the statute of repose which is 4 years for malpractice claims and 8 years for minors. See K.S.A. 60-513(c); K.S.A. 60-515.
76. Census reports	5 years.	
77. Communicable disease reports required by state and federal health departments	3 years.	
78. Construction contracts	Permanent.	
79. Corporate Compliance Minutes, Audits and Reports	Permanent.	
80. Correspondence	Generally 7 years.	Retain only correspondence of continuing interest and review annually. Correspondence involving the care or treatment of a patient should be maintained with the medical record. See #24. Correspondence related to legal proceedings by or concerning a patient, such as a medical malpractice claim, should be kept separate from the patient's chart. It may be necessary to keep correspondence involving legal and important matters for a longer period of time.
81. Durable Power of Attorney for Health Care Decisions	Indefinite.	See #46 above, Living Will comment.
82. Education (continuing medical courses offered in hospital)	Permanent.	

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
83. Endowments, trusts, bequests	Permanent.	
84. Financial statements	Permanent.	
85. Hospital closing	See comment.	If a hospital discontinues operation, the hospital shall inform the licensing agency as to the location of its records. K.A.R. 28-34-9a(d)(2).
86. Hospital Constitution, Articles of Incorporation, and Bylaws, together with all amendments	Permanent.	
87. Insurance policies (liability)	19 years after last in effect.	All other insurance policies, no less than 5 years after last in effect.
88. Licenses, permits, contracts	Permanent.	
89. Medicaid cost reports	6 years after final settlement.	
90. Medical care evaluation/audit	5 years.	
91. Medical staff: Records, minutes of meetings, bylaws, rules and regulations, physician contracts.	Permanent.	Personnel records, physician contracts and privilege action records should be kept 7 years after the calendar year in which the termination or separation took place.
92. Medicare cost reports	6 years after final settlement.	
93. Nursing: Minutes of meetings; private duty nurse file; training.	6 years.	

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>94. Peer Review and Risk Management records: Including medical staff peer review records.</p>	<p>Not less than 1 year following completion of the facility investigation (not less than 5 years if adverse action is taken).</p>	<p>All risk management AND peer review records (incident reports, investigational tools, minutes of risk management committees and other documentation of clinical analysis for each reported incident), Adverse Finding Reports (filed with a state licensing/regulatory agency), and staff privilege records should be retained for a minimum of 1 year. K.A.R. 28-52-2 relates only to risk management records, but the 1 year retention period past the completion of the facility investigation is also recommended for peer review records. Any risk management or peer review record which an adverse privilege action or employment action was taken by the facility should be retained for 5 years after completion of the facility investigation. These records should be kept separate from patient records. K.S.A. 65-28,121; K.S.A. 65-4915 <i>et seq.</i>, K.S.A. 65-4921 <i>et seq.</i>; K.A.R. 28-52-2.</p>
<p>95. Policies and procedures</p>	<p>No less than 6 years from the date of creation or last effect, whichever is later.</p>	<p>A covered entity must maintain its policies and procedures in compliance with 45 CFR 164.530(i) in written or electronic form for 6 years from the date of its creation or last effect, whichever is later. 45 CFR 164.530(j)(2).</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
96. Prospective rate review reports	5 years.	
97. Quality Assurance Records: QA minutes, departmental QA reports, QA reports to Hospital Board	Permanent.	Generally, such records should be maintained as long as similar types of records; i.e. Board Minutes or medical staff meeting minutes.
98. Real and personal property (other than equipment): Deeds and titles; leases.	Permanent. Term of lease plus 7 years.	
99. Survey and inspection reports	3 years or until next inspection.	
100. Utilization review	5 years.	All utilization review records should be maintained separate from medical records.

BUSINESS OFFICE

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
101. Alien – statement of income paid	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
102. Balance sheets	Permanent.	May be disposed of if general ledger is maintained.
103. Bank statements	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
104. Budgets	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
105. Cash receipts.	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
106. Cashier's tapes from bookkeeping machine	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
107. Charge slips to patients	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
108. Check stubs	7 years.	May be disposed of if other record of checks issued is maintained.
109. Checks: Payroll	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
110. Checks: Vouchers.	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
111. Check register	7 years.	So long as contents may be material in the administration of an Internal Revenue law.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
112. Credit and collection correspondence	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
113. Correspondence, insurance	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
114. Deposits, bank	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
115. Depreciation of equipment records	Permanent.	So long as contents may be material in the administration of an Internal Revenue law.
116. Equipment leases	10 years after expiration.	So long as contents may be material in the administration of an Internal Revenue law.
117. Income, daily summary	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
118. Invoices: Fixed assets	Permanent/life of asset plus 7 years.	If the asset is disposed of, these records should be kept a minimum of 7 years following disposition.
119. Accounts payable	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
120. Accounts receivable	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
121. Journals (general)	Permanent.	
122. Ledgers (general)	Permanent.	
123. Ledger cards (patient)	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
124. Posting audits	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
125. Purchasing orders	7 years.	So long as contents may be material in the administration of an Internal Revenue law.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
126. Unemployment tax records	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
127. Vouchers: Capital expenditures.	Permanent/life of item plus 7 years.	So long as contents may be material in the administration of an Internal Revenue law.
128. Vouchers: Cash.	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
129. Vouchers: Travel expense.	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
130. Vouchers: Welfare agency records.	7 years.	So long as contents may be material in the administration of an Internal Revenue law.

DIETARY

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
131. Food costs	7 years.	So long as contents may be material in the administration of an Internal Revenue law.
132. Meal counts	7 years.	So long as contents may be material in the administration of an Internal Revenue law.

ENGINEERING

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
133. Blueprints of building	Permanent.	
134. Equipment records: By location.	Permanent.	
135. Equipment records: Inspection reports.	Permanent.	At a minimum, all records of inspection should be maintained as long as the equipment is owned and for not less than 10 years after the disposition of the equipment.
136. Equipment records: Operating instructions.	Permanent.	
137. Inspection of grounds and buildings	Permanent.	At a minimum, all records of inspection should be maintained as long as the property is owned and for not less than 10 years after the disposition of the property.
138. Purchase orders	10 years.	

ENVIRONMENTAL ISSUES

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
139. Medical Service Waste	Not less than 3 years or during the course of any unresolved enforcement action or as requested by the Secretary of Health & Environment.	K.A.R. 28-31-4. Further, K.A.R. 28-29-27 defines and addresses the transportation, processing, segregation, storage, collection and disposal of medical service waste. K.A.R. 28-31-1 to 28-31-4 are hazardous waste regulations which require the “generator” of the hazardous waste to maintain a copy of certain reports for 3 years.
140. Calibration, surveys, tests, and other reports required by Nuclear Regulatory Commission.	Varies. Usually not less than 3 years.	<u>See</u> 10 CFR 35.2024 to 10 CFR 35.2655 for the specific retention requirements
141. Hospital/medical/infectious waste incinerators (HMIWI)	Not less than 5 years.	40 CFR 60.30e, 40 CFR 60.32e, and 40 CFR 60.58c require that certain reports be kept on a “calendar quarter” basis. Certain reports must be maintained for 5 years. 40 CFR 60.58c(b). It is recommended that all reports under these sections be maintained for 5 years.

PERSONNEL

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
142. Advertisements or notices to the public or to employees relating to job openings, promotions, and other job opportunities, including orders submitted to any employment agency or labor organization for recruitment of personnel	Not less than 1 year from date of personnel action. If maintained in employee file, maintain for length of file.	29 CFR 1601.14; 29 CFR 1627.3
143. Applications: Employees.	Maintain in employee personnel file, and maintain employee's personnel file for no less than 7 years after termination of employment.	K.A.R. 50-2-2 requires 5 years. 29 CFR 1627 and 29 CFR 516.5 require these records be kept for 3 years. We recommend the longer period to provide for retention beyond the statute of limitations on a written employment contract, which is 5 years.
144. Applications: Non-employees	7 years.	
145. Attendance records	Maintain in employee personnel file, and maintain employee's personnel file for no less than 7 years after termination of employment.	K.A.R. 50-2-2 requires 5 years. 29 CFR 1627 and 29 CFR 516.5 require these records be kept for 3 years. We recommend the longer period to provide for retention beyond the statute of limitations on a written employment contract, which is 5 years.
146. Authorizations: Health, credit, etc.	Not less than 7 years after termination of employee.	
147. Basic employment and earnings records, including time and earning cards or sheets	Maintain in employee personnel file and maintain employee's personnel file for no less than 7 years after termination of employment	K.A.R. 50-2-2 requires 5 years. 29 CFR 1627 and 29 CFR 516.5 require these records be kept for 3 years. We recommend the longer period to provide for retention beyond the statute of limitations on a written employment contract, which is 5 years.
148. Benefit programs	Permanent.	

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
149. Collective bargaining agreements	7 years from last effective date.	29 CFR 1627 and 29 CFR 516.5 require these records be kept for 3 years. We recommend the longer period to provide for retention beyond the statute of limitations on a written employment contract, which is 5 years.
150. Credentialing files for physicians and other practitioners	Permanent.	
151. Employee benefit plan documents, annual reports, summary plan descriptions, summary annual reports, allocation schedules, distribution records and summaries of material modifications	Permanent.	29 CFR 1627.3(b)(2) requires retention for the duration of the plans plus one year.
152. Employee handbooks	Permanent.	Retain one archive copy of any employee handbook which has been distributed in original form, plus any supplements or amendments thereto.
153. Employee polygraph records	3 years.	29 U.S.C. §2007(d)(2)(B); 29 CFR 801.20, <i>et seq.</i>
154. Garnishment records	7 years.	
155. Health records	Not less than 7 years after termination of employment.	If the health information is a result of an evaluation done by the hospital-employer, then the health information should be maintained in both the personnel record and the medical record. K.A.R. 28-34-8a(d)(3); 42 CFR 482.24; K.A.R. 28-34-9a. See #26 for maintenance of medical records.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
156. Immigration forms	3 years after hiring or 1 year after termination (whichever is longer).	8 U.S.C. §1324a(b)(3).
157. Log & summary of occupational injuries & illnesses and supplementary records	7 years after end of year referred to in records.	29 CFR 1904, <i>et seq.</i>
158. Medical examinations required by law (OSHA)	Not less than 30 years after termination of employment.	29 CFR 1910.1020 <i>et seq.</i> ; 29 CFR 1910.1030 <i>et seq.</i>
159. OSHA (log, summaries of, supplemental report and annual report of occupational injuries and illnesses)	5 years following the end of the year to which they relate.	29 CFR 1904 <i>et seq.</i>
160. Payroll deduction authorizations: Insurance	Not less than 8 years.	
161. Payroll: Individual earnings.	Permanent.	
162. Payroll journals	25 years.	
163. Payroll rate cards	Permanent.	
164. Payroll registers	10 years.	
165. Payroll: Social Security reports	Not less than 4 years after taxes are paid or due, whichever is later.	26 CFR 31.6001-1.
166. Pension program	Permanent.	
167. Personnel file	Not less than 7 years after termination of employment.	29 CFR 1602-14 requires retention for 1 year after termination. Kansas law requires retention 5 years after termination. See K.A.R. 50-2-2. We recommend the longer period to provide for retention beyond the statute of limitations on a written employment contract, which is 5 years.
168. Posting audits	7 years.	
169. Records of employee exposure to hazardous materials	Not less than 30 years after termination of employment.	29 CFR 1910.1020 <i>et seq.</i>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
170. Records of prior occupational radiation dose and exposure	Permanent.	
171. Seniority and merit plans or systems	1 year after termination.	29 CFR 1627.3(b)(2).
172. Unemployment compensation claim and reports	Not less than 7 years after termination of employment.	
173. Unemployment insurance records	Not less than 5 years from due date of contributions.	29 CFR 1627.3(b)(2).
174. Volunteer service: Certification of hospital workers.	Not less than 7 years after termination of employment.	
175. Wage rate tables	Not less than 5 years from last effective date.	K.A.R. 50-2-2; <u>see</u> 29 CFR 1602.14 and 29 CFR 1627.3
176. Withholding tax exemption certificates (W-4 forms)	Not less than 4 years after taxes are paid or due, whichever is later.	26 CFR 31.6001-1.
177. Withholding tax statements (W-2 forms)	Not less than 4 years after taxes are paid or due, whichever is later.	26 CFR 31.6001-1.
178. Work schedules	Not less than 8 years	These should generally be maintained past the statute of repose which is 4 years for malpractice claims and 8 years for minors. <u>See</u> K.S.A. 60-513(c); K.S.A. 60-515.

PHARMACY

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
179. Alcohol (tax free) records	7 years.	So long as records may be maintained in the administration of tax law.
180. Blood donor histories	7 years.	
181. Controlled substances records: (All registrants except registered mid-level practitioners and dispensing physicians)	Not less than 5 years.	All Drug Enforcement Administration (DEA) registrants shall maintain records and inventories and for at least 2 years from the date of such inventory or records shall make them available for inspection and copying by authorized employees of the Drug Enforcement Administration. 21 CFR 1304.04; 21 USC 817.
182. Controlled substances/ drugs: Initial and biennial inventory records and required records (except dispensing physicians)	Not less than 2 years after the date of the inventory.	21 USC 827(b): Every inventory or record required to be maintained by the Drug Enforcement Administration relative to controlled substances must meet this provision. This requirement is repeated at 21 CFR 1304. Each inventory and biennial inventory date record shall be maintained for at least 2 years after the date of such inventory and biennial inventory date. 21 CFR 1304.04, 1304.11, and 1304.21. Each registered individual practitioner shall maintain the inventories and records of controlled substances listed in Schedules I-V.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
182. (cont'd)		<p>Additionally, each registered individual practitioner shall maintain the inventories and records of the controlled substances listed in Schedules I and II separate from all of the records of the registrants.</p> <p>Schedules I and II shall also be maintained either separate from all other records of the registrant or in such form that the information required is readily retrievable from the ordinary business records of the registrant. 21 CFR 1304.04(g). Every registrant under the Kansas Board of Pharmacy shall keep records and maintain inventories in conformance with the record keeping and inventory requirements of 21 CFR 1304.04.</p> <p>Every registrant shall keep records and maintain inventories in conformance with the record-keeping and inventory requirements of 21 CFR 1304.04 and shall be kept on file for a period of not less than five years. K.A.R. 68-20-16.</p>
183. Controlled substances: Order forms.	Not less than 2 years.	Drug Enforcement Administration order forms used pursuant to 21 USC 828, 21 CFR 1305 and 21 CFR 1308 must be maintained separately from all other records of the registrant and are required to be kept available for inspection for a period of 2 years. <u>See also</u> K.S.A. 65-4122.

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>184. Controlled substances: Records for maintenance treatment programs and detoxification treatment programs</p>	<p>Not less than 2 years.</p>	<p>Records required for maintenance treatment programs and detoxification treatment programs shall be maintained in a dispensing log at the narcotic treatment program site in compliance with 21 CFR 1304.22. <u>See</u> 21 CFR 1304.24.</p>
<p>185. Controlled substances: Registered mid-level practitioner records-prescribing protocols.</p>	<p>Not less than 2 years.</p>	<p>Each registered mid-level practitioner shall maintain in a readily retrievable manner those documents required by the state in which he/she practices which describe the conditions and extent of his/her authorization to dispense controlled substances and shall make such documents available for inspection and copying by authorized employees of the Drug Enforcement Administration. Examples of such documentation include: protocols, practice guidelines or practice agreements. 21 CFR 1303(e). <u>See</u> K.S.A. 65-1130(d) regarding an advanced registered nurse practitioner's transmittal of prescription orders pursuant to a protocol.</p>

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
<p>186. Controlled substances: Registered pharmacy.</p>	<p>Not less than 2 years.</p>	<p>Each registered pharmacy shall maintain the inventories and records of controlled substances listed in Schedules I-V. Additionally, each registered pharmacy shall maintain the inventories and records of the controlled substances listed in Schedules I and II separately from all other records of the pharmacy, and prescriptions for such substances shall be maintained in a separate prescription file. Inventories and records of controlled substances listed in Schedules III, IV and V shall be maintained either separately from all other records of the pharmacy or in such form that the information required is readily retrievable from ordinary business records of the pharmacy. Prescriptions for such substances shall be maintained either in a separate prescription file for controlled substances listed in Schedules III, IV and V only or in such form that they are readily retrievable from the other prescription records of the pharmacy. 21 CFR 1304.04(h).</p>

PUBLIC RELATIONS

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
187. Clippings (historical)	Permanent.	
188. Contributor records	Permanent.	
189. Photographs (institutional)	Permanent.	
190. Publications (house organs)	Permanent.	

PURCHASING AND RECEIVING

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
191. Packing slips	5 years.	
192. Purchasing orders	5 years (copy of record on voucher in business office).	
193. Purchase requisitions	5 years.	
194. Receiving report	5 years (copy of record on voucher in business office).	
195. Returned goods credit	5 years (copy of record on voucher in business office).	

TAXATION

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
196. Income tax returns	Permanent.	Includes information submitted with returns.
197. IRS exemption letters	Permanent.	IRS exemption letters include: determination letters, private letter rulings and closing agreements.
198. Records material to acquisition and sale of assets	7 years after April 15 th of the calendar year succeeding the year the asset is sold and reported in the return.	A business should keep records of any depreciable assets' date of purchase, costs, date of sale and amount sold for, for depreciation and amortization purposes. The information should be maintained until the statute of limitations runs on the return for which the sale of the asset is reported.
199. Records material to filed employment tax returns	7 years after April 15 th of the calendar year succeeding the year in which filed.	Records should be maintained at least as long as the statute of limitations of the return from the date filed on April 15 th of the year due, whichever is later.
200. Records material to other tax returns	7 years after the due date of the return in question or the date the return was filed, whichever is later.	Records should be maintained at least as long as the statute of limitations of the return from the date filed on April 15 th of the year due, whichever is later.
201. Sales or use tax records	7 years from the last day of the calendar or fiscal year, whichever is later.	Records should be maintained at least as long as the statute of limitations of the return from the date filed on April 15 th of the year due, whichever is later.
202. State revenue and federal IRS audit reports	10 years.	

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
203. W-2 forms and quarterly payroll tax reports, including undeliverable W-2 forms	4 years after taxes are paid or due, whichever is later.	26 CFR 31.6001-1
204. W-4 forms and other IRS employment forms	4 years after taxes are paid or due, whichever is later.	26 CFR 31.5001-1.
205. Withholding: Federal & state income tax.	4 years after taxes are paid or due, whichever is later.	26 CFR 31.6001-1.
206. Withholding: FICA taxes.	4 years after taxes are paid or due, whichever is later.	26 CFR 31.6001-1.
207. Withholding: FUTA taxes.	4 years after taxes are paid or due, whichever is later.	26 CFR 31.6001-1.

MISCELLANEOUS

TITLE	RETENTION RECOMMENDATION	CITATIONS/COMMENTS
208. Federal Food, Drug, and Cosmetic Act records; request and receipt forms; and other required records.	3 years.	
209. HIPAA, records required thereafter. Includes all policies and procedures, notices, complaints and actions taken to comply with HIPAA requirements.	Not less than 6 years from the date of creation or from the date such records were last in effect, whichever is later.	45 CFR 164.53(i), (j)(2); 45 CFR 164.316(b)(2)(I).
210. Housekeeping room record	5 years.	
211. Medical advice given over telephone	Not less than 10 years after date of last treatment or not less than 1 year after a minor reaches the age of majority, whichever is longer. (25 years for summaries).	Should be maintained with patient medical records.
212. Patient's name index	Permanent.	This is an index that merely references that a person has been a patient of the hospital.
213. Permits (alcohol & narcotics)	Life of permit plus 6 years.	
214. Return goods memoranda (if records are duplicated in business office)	1 year.	
215. Third party payor insurance claims files and supporting documentation.	10 years.	
216. Video tapes of procedures	No time limit is required.	