

February 28, 1963.

House File 432

Passed on File. *Public Health 3/11* By KLUEVER (Vance and Beneke).  
*Pass as amended 3/26*

Passed House, Date..... Passed Senate, Date.....

Vote: Ayes..... Nays..... Vote: Ayes..... Nays.....

Approved.....

## A BILL FOR

An Act relating to the confidential character of research studies for the purpose of reducing morbidity or mortality.

*Be It Enacted by the General Assembly of the State of Iowa:*

1 Section 1. Any person, hospital, sanatorium, nursing  
2 or rest home or other organization may provide information,  
3 interviews, reports, statements, memoranda, or other data  
4 relating to the condition and treatment of any person to  
5 the state department of health, the Iowa medical society  
6 or any of its allied medical societies or any in-hospital  
7 staff committee, to be used in the course of any study  
8 for the purpose of reducing morbidity or mortality, and  
9 no liability of any kind or character for damages or other  
10 relief shall arise or be enforced against any person or  
11 organization by reason of having provided such information  
12 or material, or by reason of having released or published  
13 the findings and conclusions of such groups to advance  
14 medical research and medical education, or by reason of  
15 having released or published generally a summary of such  
16 studies.

1 Sec. 2. The state department of health, the Iowa medical  
2 society or any of its allied medical societies or any in-  
3 hospital staff committee shall use or publish said material  
4 only for the purpose of advancing medical research or medi-

5 cal education in the interest of reducing morbidity or  
6 mortality, except that a summary of such studies may be  
7 released by any such group for general publication. In all  
8 events the identity of any person whose condition or treat-  
9 ment has been studied shall be confidential and shall not  
10 be revealed under any circumstances.

1 Sec. 3. All information, interviews, reports, state-  
2 ments, memoranda, or other data furnished by reason of  
3 this act and any findings or conclusions resulting from  
4 such studies are declared to be privileged communications  
5 which, except for the original medical records pertaining  
6 to the patient, may not be used or offered or received  
7 in evidence in any legal proceeding of any kind or char-  
8 acter, and any attempt to use or offer any such infor-  
9 mation, interviews, reports, statements, memoranda or  
10 other data, findings or conclusions or any part thereof,  
11 except the original medical records pertaining to the  
12 patient, unless waived by the interested parties, shall  
13 constitute prejudicial error resulting in a mistrial in  
14 any such proceeding.

#### EXPLANATION OF HOUSE FILE 432

Seven states (California, Connecticut, Illinois, Michigan, Minnesota, Nebraska and South Dakota) have enacted legislation which provides protection to patients and physicians against the unwarranted disclosure of confidential information obtained in connection with scientific studies designed to reduce the death rate. Such studies are now conducted by the state department of health, committees of the Iowa medical society and committees of physicians on hospital staffs. For example, accredited hospitals are required to maintain committees to review pathology findings connected with operations, etc. Other examples are studies concerning infant and maternal mortality and cancer surveys. This bill is patterned after the Nebraska law. It encourages patients, hospitals, etc., to make necessary information available, protects them as to the confidentiality of such information, protects physicians in making proper use of such information and provides that such information is not admissible in evidence in any legal proceedings unless the interest parties consent.

The bill does not change existing law as to the admissibility in evidence of the original medical records pertaining to the patient. Nor does it apply to information which is not a part of a study to reduce morbidity or mortality.