## TEXAS TECH UNIVERSITY TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER ELECTRONIC IMAGING

## **CONFIDENTIALITY STATEMENT**

I agree to hold as strictly confidential all information regarding patient, personnel, and/or student records, communications, and activities and all other information made confidential by law or TTUHSC policy to which I have access or obtain as an employee, student, agent, representative or affiliate of TTUHSC.

If approached by parties asking for copies of any records, I will state the Open Records Act as follows: "A request must be made in writing and should specify what records or information is sought. Once the request is received by Texas Tech, it shall be forwarded immediately to the appropriate department head and the Office of the General Counsel. Office of General Counsel will determine whether the information is public and releasable, nonpublic and not releasable, or whether an Attorney General Opinion should be requested." Refer to: TTU/OP01.04

I agree that I will not read or otherwise gain access to such confidential information except as required to perform my duties and responsibilities at TTUHSC. Further, unless disclosure is authorized or required by law, I agree that I will not disclose any such confidential information now, or at any time in the future, either directly or indirectly, except as required to perform my duties and responsibilities at TTUHSC and then only to the extent disclosure is consistent with the authorized purpose for which the information was obtained.

I agree to handle all confidential information, whether written, computerized, oral, or in some other form, in such a way that it shall not be inadvertently revealed or disclosed to any other person. Except as authorized by my responsibilities and duties, I agree that I will not maintain for my files any permanent record that contains confidential information and will provide for the complete destruction of any rough drafts or unofficial copies of the confidential information.

I acknowledge and agree that any breach of the Confidentiality Agreement by me may result in disciplinary action, which may include immediate termination of my employment or affiliation with TTUHSC; further, I understand that such a breach may result in legal action.

The terms of this Confidentiality Agreement are effective immediately and apply to all confidential information I have attained in the past as well as future information.

Signature of Employee/Student/or Affiliate	Date	
Printed Name		
Department	Campus	
eRaider Username:	Repository: SHS	
E-mail Address:	- '	