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### **BOLT Medical Document Standard Operating Procedures for Confidentiality**

#### **Systems:**

- Document Imaging
- Record Management
- Workflow
- Forms Processing
- Record Compliance
- Digital Archiving
- Web-based Systems
- Client-Server Systems

#### **Scan & Index Services:**

- Letter & Legal Documents
- Engineering Drawings & Maps
- Microfilm, Microfiche
- Aperture Cards
- Bound Books
- Photos, Slides & Negatives

#### **Serving These Industries:**

- Medical
- Legal
- Financial
- Insurance
- Municipal Government
- Military
- State & Federal Government
- Manufacturing
- Educational

#### **Value Added Reseller of:**

- LaserFiche by Compulink
- Pixel Translations
- ScanVue
- Kofax
- Panasonic
- Bowe Bell Howell
- Ricoh
- Fujitsu
- Xerox/Visioneer
- EyeCom

The following is a description of the standard operating procedures followed by BOLT Document Management for handling, scanning, and publishing repositories of medical records and records such as employee and insurance records that may contain medical information. Our procedures are designed to maintain our client compliance with HIPAA regulations. However, it is the responsibility of the client to determine that these procedures satisfy their compliance requirements. Exceptions to these procedures must be defined in writing.

BOLT Document Management maintains a secure facility specifically for the scanning and indexing of medical and other confidential records. Records that are not being actively processed are kept in a secured storage area. Records that are being processed are collected and returned to the secured storage area at the end of work shifts.

Documents that are received and delivered at the customer site are transported by personnel and vehicles under direct control of BOLT Document Management. IE – commercial and third-party carriers are not utilized unless prior notification and client approval are arranged.

During the period of time that documents will be in the possession of BOLT a specific record may be requested by the client by filling out a record request form and faxing it to BOLT, thereby providing a written and signed request and description of the record desired. BOLT will scan the requested record in PDF encrypted format and send it via e-mail. Alternately, we can make copies of the requested record and send it by mail.

While in the possession of BOLT Document Management medical records will be assigned to specific personnel for all phases of document prep, scanning, processing, indexing, and repository publishing. All personnel involved in handling of the medical records will be required to sign a copy of the clients' confidentiality agreement. A copy of the agreement will be stored at BOLT and a copy will be faxed to the client. BOLT Document Management performs a background check on all of our employees. All employees are instructed that if during the execution of their job task they encounter the record of someone familiar to them personally, they must immediately stop and report to a supervisor to have that record processed by another individual.

BOLT Document Management will return processed documents at the completion of the project. For ethical reasons BOLT Document Management does not perform document destruction. We will only release documents directly to a representative of our client. If the client wants a document destruction company to pick up documents from our facility a representative of our client must be present to accept possession of them at our loading dock and then release them to the destruction company.

### **Document Pre-scan Prep, Scanning, Processing, Indexing and Publishing**

Medical documents are prepped prior to scanning by removing staples, clips, tape, sticky notes, etc. Every page is inspected for tears, folds, odd size, and any other possible obstruction to feeding through document scanners. We also inspect for any conditions that could result in non-readable images (dark highlighting, light pencil, duplex page bleed, poor carbon copy, etc). If there are sticky notes attached to pages they are taped in their position for transporting through the scanners. If the sticky note covers information the page is scanned twice - with and without the note. Pages that require special scanning are flagged for exception scanning. If slip sheets or separator sheets are required they are inserted during the prep process.

BOLT Document Management is responsible to be sure that every page in a patient file is captured and indexed as part of that record. BOLT will not selectively skip certain pages as part of our task. Unless otherwise agreed upon in advance and in writing, BOLT is not responsible to organize individual pages in a particular order or to confirm that every page belongs to the record it is in.

All scanned images in a project are stored on their own network drives during scanning, processing, indexing, and publishing. Upon completion of a project BOLT will store a working copy of the repository on a drive

for a period of thirty days to facilitate additions, corrections, and for producing additional copies. At the end of the thirty days this information will be permanently erased and overwritten with random generated data to destroy all traces of the information. A client may purchase the drive(s) from us for their own destruction if desired. If the client wishes to avail themselves of BOLT third party escrow archive storage service it must be arranged before the thirty day expiration when data is expunged.

BOLT utilizes production document scanners equipped with advanced adaptive image thresh holding to produce the best possible image. Due to the nature of medical records, BOLT does not utilize automatic page feeders and every page is fed by hand by our operators. Hand feeding eliminates the problems of skewed images and double-fed (missed) pages. Documents are scanned and stored as 240 dpi black & white TIFF IV images. Color pictures are scanned as exceptions and stored as color TIFF images. If the repository will be OCR'd (optical character recognition) for content indexing images will be captured and stored at 300 dpi. Any document deemed to have information on the back side will be considered to be a duplex document and both sides will be captured.

Once scanned, document images are processed with image enhancing utilities to improve readability. Typical processing includes de-skew, de-speckle, sharpen, adjust contrast, automatic page orientation, etc. These processes are adjusted to provide the best average image quality. We will not set processes to the point that might adversely affect readability.

Unless otherwise agreed upon in advance, BOLT will index by patient record. Every record will be indexed by last name, first name, patient number, date, etc. The structure of index fields will be agreed upon before beginning the project. Index fields normally consist of a combination of some or all of the following: last name, first name, patient number, birth date, record date, last four digits of SS#, box number, etc. In addition to client designated index fields BOLT creates a field specifically for quality control. This field is used internally to indicate quality control status and exceptions. This field remains in the published repository index to indicate images deemed by our quality control to have uncorrectable readability problems to the client. A report listing these problem images will be delivered to the client with the completed job.

Once captured and processed, scanned images are inspected for quality control. Standard quality control consists of inspecting each image to validate image capture and overall image quality. This does not include zoomed close-up inspection of every square inch of every page. In other words, our quality control is designed to ensure good over-all scan quality and readability. The nature of documents is such that it is not unusual for only certain parts of a page to be difficult or impossible to read due to conditions (dark highlighting, very light pencil, odd colors of ink, poor quality carbon or photo copies, etc) beyond our control. While we make every effort to produce the very best quality and readability, we can not guarantee readability where such conditions may exist. Where our quality control recognizes such a condition the affected image will be flagged in the quality control field and the image rescanned.

After image quality control the records will be indexed as described above. Indexing will be single key entered from information available from the record folder or from the imaged documents. If there is a problem indexing a particular record a flag will be set in the quality control field. Validating keyed index information against an existing database table can be performed as an additional process if requested.

The repository will be published complete with a runtime copy of the document search engine and viewer. This runtime will run on Windows PC's. Original volumes of the repository will be published on gold substrate archive CD media. Additional working copies are available. The license on our runtime volumes allow you to make additional working copies if you wish. BOLT can also provide larger working copies of the repository on DVD or hard drive media. The volumes are published in a format that can be imported into a LaserFiche live record management system by the client. Further, BOLT Document Management can reload these volumes and add records to the repository periodically in the future.

After records have been scanned the original documents will be returned to their perspective folders. BOLT does not perform post-scan assembly (stapling, clipping, etc) unless this has been requested as an additional operation. Folders will be returned in the boxes that they were received in.

At the conclusion of the project a report will be created documenting the processes and procedures that were utilized to capture, index, and publish the repository. This report will be provided to the client for their records. An exception report will also be provided to indicate images that have been recognized to have image quality or index issues. The project will be invoiced by the actual image and record counts.