**POLICY & PROCEDURES**

***Defining the Overall Approach toward Meeting a Requirement***

### **Disposal §164.310(d)(2)(i)**

**Media Re-Use §164.310(d)(2)(ii)**

### **Effective Date:** <Month Day, Year>

### **Policy Number:** <If applicable> **Rev.** 0

**Policy:** All of our information systems and electronic media containing ePHI must be disposed of properly when no longer needed for legitimate use. Disposal of all of our electronic media and information systems containing ePHI must be documented. If an information system or electronic medium containing ePHI is to be reused within our office, its previous data must be completely removed.

**Procedures:** Our Security Official will ensure proper disposal of all of our information systems and electronic media when no longer needed for legitimate use. This disposal will include the ePHI that is received or created by us. If it is to be reused within our office, the information system or electronic media will be erased with a method approved by our Security Official such as degaussing.

**Details:** the disposal and media re-useprocedures include but are not limited to:

* All information systems and electronic media containing ePHI will be disposed of properly when no longer needed for legitimate use.
* Methods of disposal may include:
* Purging (degaussing or exposing the media to a strong magnetic field in order to disrupt the recorded magnetic domains).
* Destroying the media (e.g. shredding).
* If destruction is not possible, it will be damaged to the point of being completely unreadable.
* Disposal of all electronic media and information systems containing ePHI will be approved by the Security Official and documented.
* If information systems and electronic media containing ePHI will be re-used, all ePHI will be securely removed before such media can be reused.
* Methods of removal may include:
* Using software or hardware products to overwrite media with non-sensitive data.
* Purging (degaussing).
* Documentation (e.g. vendor disposal certificate, disposal log) of the practices in place will be retained as evidence of compliance.

**Location of supporting documentation:** If so, identify the document and location it is stored here.

## REVISION HISTORY

| Revision | Date | Initiator | Nature of Change |
| --- | --- | --- | --- |
| 0 |  |  | Initial draft |
| 1 |  |  |  |