

## **Observer Confidentiality Agreement**

Cincinnati Children's Hospital Medical Center (CCHMC) has a legal and ethical responsibility to safeguard the privacy of all patients and protect the confidentiality of their protected health information ("PHI"). In the course of my observation at CCHMC, I may see, overhear, access or temporarily possess PHI of a patient.

I understand that such PHI must be maintained in the strictest confidence. As a condition of my observation or visit, I hereby agree that I will not at any time during or after my observation at CCHMC use, disclose or give PHI to any person whatsoever for any purpose. I will not attempt to access PHI under the ownership or control of CCHMC.

I understand that a violation of this agreement may result in civil and/or criminal penalties under federal and state law.

By my signature below, I confirm my commitment to the above.

Printed Name of Observer

Signature of Observer

Date