I have been informed that Vanderbilt University Medical Center (VUMC) has legal and ethical responsibilities to safeguard the privacy of patients and their families and to protect the confidentiality of protected health information. I understand that I am expected to uphold these legal and ethical responsibilities as a condition of being allowed to engage in photographing, filming, or other media-related activities at VUMC.

This confidentiality agreement applies to all patient and family encounters and to confidential and/or proprietary VUMC information.

As a condition of being granted access to VUMC for any photographing, recording, filming or interviewing activities:

- I agree not to access VUMC facilities or premises for photographing, recording, filming or interviewing activities without first contacting the Medical Center News and Public Affairs office.
- I agree to be accompanied at all times by a member of the Medical Center News and Public Affairs office.
- I agree not to photograph, film, or record any patient or other individual without first obtaining the individual’s consent to do so.
- I agree to maintain and safeguard the privacy and identity of any patients, the confidentiality of any and all protected health information, and the confidentiality of any confidential and proprietary institutional information that I may encounter at VUMC.
- I will not access, use or disclose protected health information except as specifically authorized by a patient (18 years or older), legal guardian or authorized hospital representative for release to the public.
- I will not access, use or disclose any confidential or proprietary information of VUMC.

I understand and agree that if I fail to comply with the conditions listed above my ability to be involved in any future photographing, recording, filming or interviewing activities at VUMC will be revoked.

Signature of Representative: ___________________________ Date: ___________________________

Printed Name: _______________________________________

Organization: _______________________________________

Contact Phone Number: _______________________________

E-Mail Address: _______________________________________

Return this completed form to: Medical Center News and Public Affairs
CCC-3312 Medical Center North
Vanderbilt University Medical Center
Nashville, TN 37232-2390
Phone No.: (615) 322-4747