(A) Policy Statement

Like the use of any other computing resource, the use of electronic devices at the University of Toledo Medical Center (“UTMC”) is subject to the requirements of appropriate, legal and ethical behavior within and around the clinical care areas of UTMC keeping in mind that patients come first. Users of electronic devices in clinical areas are required to comply with the “Responsible Use Standards” identified in this policy.

(B) Purpose of Policy

This policy establishes standards for the responsible use of Electronic Devices.

(C) Scope and Definitions

This policy applies to all users of electronic devices (“Users”) including University employees, residents, students and fellows, medical staff members, contractors and volunteers performing services for the University where such Users are in the clinical inpatient or outpatient areas of UTMC, or in or near medical office space of UTMC or its affiliates or where patients or their families may be located or traversing to receive care at UTMC. This policy also pertains to University employees of the Health Science Campus who work in facilities, mailroom and environmental services. Additional policies apply to specific use of University computers, computer systems and networks provided or operated by the University. Electronic Devices, for purposes of this policy includes cell phones (including smart phones), pagers, tablets, PDAs or hand-held computers, whether owned or provided by the University or a person’s own device. Electronic Devices may also be subject to University computing policies 3364-65-(1 through 18, as amended) located at http://www.utoledo.edu/policies/administration/info_tech/index.html.
(D) Procedure

1. Personal use of Electronic Devices by Users for other purposes than for work or clinical clerkship related duties is permitted in the areas noted in Article (C) above when it does not consume a significant amount of time or resources, does not interfere with the performance of the User's job, studies or other University responsibilities, and is otherwise in compliance with this and other University policies. Users should make and receive personal calls or text messages, to the extent able to control, during breaks and lunch periods out of the patient care or work area. In the event of a family emergencies, Users may be notified through their supervisor.

2. Use of Electronic Devices in the areas noted in Article (C) above must comply with all applicable federal, state and local laws, University rules and policies, and applicable contracts and license, including but not limited to the Health Insurance Portability and Accountability Act (“HIPAA”) policies, especially with respect to use of Electronic Devices storing or transferring PHI, as defined by those policies 3364-90-(1 through 16, as amended). These rules require adequate security and transfer of information containing PHI. Users must ensure compliance with applicable photographic and videotaping University policies, including but not limited to 3364-90-14, as amended.

3. Users who engage in electronic communications with persons in other states or countries or on other systems or networks should be aware that they may also be subject to the laws of those other states and countries and the rules and policies of those other systems and networks. Users are responsible for ascertaining, understanding and complying with the laws, rules, policies, contracts and licenses applicable to their particular uses.

4. Further limits may be imposed upon personal use in accordance with normal supervisory policy or directives.

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<td>/s/ Richard P. Swaine, CPA</td>
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<td>Chief Executive Officer</td>
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Review/Revision Completed By:
Hospital Administrative Staff
Privacy & Security Officers
Office of Legal Affairs
Office of the Dean

Next Review Date: 5/1/2023

Policies Superseded by This Policy: 7-60-11