

Nursine S. Jackson, MSN, RN
58 Gold King Way
Breckenridge, CO 80424

January 30, 2026

Dear Delegates,

Although I am not a Maryland constituent, I am a registered nurse with a longstanding professional focus on patient safety and on the use of **trustworthy, secure electronic health records** to ensure the safe delivery of health care. I write to commend you for House Bill 316 and, in particular, for your thoughtful effort to modernize the statutory definition of *medical record* in a way that reflects contemporary clinical practice and technology.

House Bill 316 proposes to add the following language (shown here in emphasis) to Maryland’s existing definition of “medical record”:

“Medical record” means any oral, written, or other transmission in any form or medium of information that:

- (i) **Is RECORDED BY A HEALTH CARE PROVIDER THROUGH WRITTEN, ELECTRONIC, OR OTHER MEANS, INCLUDING AUDIO OR VIDEO MEANS;**
- (v) **ELECTRONIC MESSAGE SENT OR RECEIVED BY A HEALTH CARE PROVIDER THAT IDENTIFIES OR MAY READILY BE ASSOCIATED WITH THE IDENTITY OF A PATIENT.**

This proposed update is fully aligned with national patient-safety and regulatory developments. In 2024, both **The Joint Commission** and the **Centers for Medicare & Medicaid Services (CMS)** expressly recognized that clinical information and even medical orders are now routinely transmitted through electronic messaging platforms. As a result, messaging and electronic communications are understood to be part of the **Designated Record Set** when they are used to make decisions about a patient’s care.

Your bill is also consistent with the work of leading voluntary standards organizations—including **IEEE** and **HL7**—which are actively updating standards to address electronically stored information generated through medical devices, clinical software, and artificial intelligence. These efforts reflect the reality that modern health care decisions are increasingly informed by data that does not resemble the traditional paper chart.

Updating the statutory definition of a medical record is important for several reasons, but two are especially significant.

First, patients have a right to access their **protected health information**. Under HIPAA, patients are entitled to obtain records—including electronic messages, device data, and

other digital information—when those data are used to make decisions about their care. Explicitly recognizing these formats in the definition of “medical record” helps ensure that patient access rights keep pace with clinical practice.

Second, inclusion of information that is “written, electronic, or other means, including audio or video means” underscores that such data is subject to **medical-record retention requirements**. Despite the availability of inexpensive and virtually unlimited digital storage, health-care organizations and software systems have not consistently retained messaging and device-generated data, even when those data are essential for quality assurance, patient-safety investigations, research, or the review of serious adverse events resulting in injury or death.

In this respect, House Bill 316 is also in step with federal enforcement guidance. In 2024, the **U.S. Department of Justice and the Federal Trade Commission** addressed failures to preserve electronic communications, particularly the use of so-called *ephemeral* messaging—data configured to disappear after a short period and thus be unavailable for later investigation or review. Federal guidance emphasized that organizations have a legal obligation to preserve relevant records and that the deletion of such data may have serious legal consequences.

In conclusion, your proposed amendments will benefit Maryland patients by ensuring that the definition of the medical record reflects how health care is actually delivered today. Medical information now exists in many formats, all of which may influence diagnosis, treatment, and clinical decision-making. Recognizing these data as integral components of the medical record ensures appropriate patient access, supports patient safety, and reinforces existing preservation obligations.

Thank you for your attention to this important matter and for the opportunity to provide comment on House Bill 316.

Respectfully,



Nursine S. Jackson, MSN, RN