



Use Caution When E-mailing Patients

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[CAPsules Archive](#)

[CAP Risk Management
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[Contact Us](#)



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Q: What topics should physicians discuss with patients via e-mail, and what topics should they avoid?

A: E-mailing patients is an individual decision made by each physician, however we discourage physicians from giving their e-mail address to every patient. The patient who calls every day is probably going to fill his or her physician's Inbox in the same way. We suggest a printed information sheet be given to a patient with whom the physician is agreeing to communicate. The information sheet should lay out the following ground rules:

- The topics that may be covered.
- The topics that should not be discussed in an e-mail (e.g., "Do not e-mail about chest pain, vomiting blood, or significant changes in mental status). Instruct the patient to call the office or 911 immediately.

Additionally, the information sheet should note who reads the physician's e-mail, when and how often. It should remind the patient that if they share a computer or e-mail account with another individual, that the doctors e-mail response may be accessed by that person.

Q: What are the recordkeeping requirements when physicians e-

mail patients? Should everything be printed and included in paper records? How should this information be recorded in an electronic medical record?

A: All e-mails should be printed and kept in the patient's paper medical record. If you have an Electronic Health Record (EHR), also known as Electronic Medical Record (EMR), e-mail communications should be saved or scanned into the EHR/EMR. This includes all e-mail coming **In** from patients and those going **Out**. Keeping copies of every e-mail is vital as they may be needed for defense purposes.

Authored by
Ann Whitehead, RN, JD
CAP Risk Management & Patient Safety Department

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