

ELECTRONIC HEALTH RECORDS UNLIKELY TO BE AS PRIVATE AS NOW

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This is the original letter that the author submitted to the Straits Times and the edited version was published on 15 December 2017 in the Straits Times Forum.

In Christina Tan's letter "Electronic health records key to better and safer care" (Forum, 13 December)¹ the reader is assured that with the implementation of the National Electronic Health Record (NEHR), patient confidentiality and personal data protection will continue to be upheld "no different from today". As a doctor, may I point out two important aspects where this may not be possible in practice.

First, a patient presently has the right not to mention prior illnesses when he consults his doctor. For example, a patient seeing me for conjunctivitis may not want to bring up previous treatment for drug addiction or psychiatric disease. Whether this decision disadvantages him or not is irrelevant. Under the principle of medical ethics called Autonomy, the patient retains the right to control what information he shares with his doctor.

Second, he rightfully expects me to keep private all details he tells me in medical confidence. These are entered into and remain in the clinic's records. Without his expressed permission, I cannot mention them to others – not even other doctors. This privacy is his right under the principle of Confidentiality. Exceptions exist (eg, when there is risk to public health from specific infectious diseases), but these are clearly identified by law and regulations.

Can this possibly remain unchanged when the NEHR is implemented? Once entered into the computer record, his

entire medical past will be visible to any doctor he consults in the future, even details he considers sensitive or irrelevant. Moreover, if he cannot stop his doctor uploading embarrassing personal data (eg, a positive test result for a sexually transmitted disease) onto his NEHR record, he will have lost privacy control over information or data arising from this consultation. Things will clearly not be the same as they are today.

I have no doubt that the NEHR has potential for enormous good. But regarding matters of control over personal privacy and confidentiality, it would be simplistic to say that "this will be no different from today". It would be preferable to educate the public both on the benefit and on what every individual will have to sacrifice for this. Finally we must allow any patient to refuse having his details keyed into a permanent computerised record if he so wishes, whether or not we agree with his reason. ◆

Editor's note: Following this and other letters, the Ministry of Health presented changes during the public consultation on the draft Healthcare Services Bill (starting 5 January 2018). In essence, patients will be allowed to opt-out in one of two ways: (1) no information is uploaded into the NEHR or (2) information is uploaded into the NEHR but with access by healthcare providers blocked till the patients opt-in at a later date.

Reference

1. Tan C. Electronic health records key to better and safer care. *The Straits Times Forum* 13 December 2017. Available at: <https://goo.gl/6gVvi6>.

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