

**PURDUE UNIVERSITY
HIPAA PROTECTED HEALTH INFORMATION
DISPOSAL VERIFICATION
DISCLOSURE TO OUTSIDE ENTITY**

When protected health information, received by an entity outside of Purdue University, is to be destroyed (e.g. paper) or removed from University equipment (e.g. servers and other electronic storage media), the destruction or deletion will be completed according to University data handling guidelines. Please use the instructions below for “restricted” information.

The method for removing electronic data is found at: <https://www.purdue.edu/securepurdue/data-handling/electronically-stored-information.php>.

The appropriate disposal method for paper documents is found at: <https://www.purdue.edu/securepurdue/data-handling/handling-of-printed-information.php#Disposal>

The documentation, confirming the destruction and method used, should be completed below and send to:

**The Office of Legal Counsel
610 Purdue Mall, West Lafayette, IN 47907-2052
FAX 765 496-0340**

Protected health information includes individually identifiable health information as defined by HIPAA, limited data sets included. This does not include de-identified data, as defined by HIPAA.

For electronic or paper documents:

Brief description of data:	
Date of destruction:	
Destroyed by: (print name and sign)	
Telephone:	

Electronic Media Wipe Information:

From what device (e.g. name of server or device type/owner):	
Cleansing method (e.g. Multiple pass overwrite according to Media Disposal Guidelines or physical destruction):	

Paper Information:

Disposal method (e.g. shredded or confidential destruction)	
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