APPROVED 11/2/2006

6. Records Series Title

State of Texas Records Retention Schedule

Total

8. Archival 9. Remarks

Agency Storage

Automated Facsimile of SLR-105

2. AGENCY CODE: 537

3. AGENCY: TEXAS DEPARTMENT OF STATE HEALTH SERVICES

4. Records
Series Item # 5. Agency
Item #

7. RETENTION PERIOD

___ ORIGINAL SUBMISSION
_X__ RECERTIFICATION
___ REPLACEMENT PAGE
___ ADDENDUM PAGE
10. 106 No.

VITAL Record (Include in Field 9)

11/8/2006

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| | 080 - HEALTH SERVICE REGION - HIV/STD PROGRAM | | | | |
|------|---|------|---|------|--|
| | HIV SERONEGATIVE CONFIDENTIAL TEST RESULTS, INCLUDING SEROLOGY, COUNSELING NOTES, AND RISK REDUCTION PLAN. | AC | | AC | AC=7 YEARS PAST THE LAST DATE OF SERVICE OR UNTIL PATIENT'S 21ST BIRTHDAY, WHICHEVER COMES LATER. |
| 3720 | HIV-POSITIVE CONFIDENTIAL TEST RESULTS, INCLUDING SEROLOGY AND MEDICAL RECORDS. | AC+7 | | AC+7 | AC=PATIENT'S DEATH, IF KNOWN, OR 18 YEARS FROM LAST DATE OF SERVICE. |
| | PREVENTION COUNSELING NOTES, RISK REDUCTION PLANS, AND CASE MANAGEMENT RECORDS COMPILED ON HIV-POSITIVE CLIENTS | AC | | AC | AC=FOR ADULTS: 7 YEARS AFTER LAST DATE OF SERVICE OR PATIENT'S DEATH, IF KNOWN. AC=FOR CHILDREN: 3 YEARS AFTER 21ST BIRTHDAY, EVEN IN DEATH, OR 7 YEARS; WHICHEVER COMES LATER. |
| | HIV NEGATIVE ANONYMOUS TEST RESULTS, INCLUDING SEROLOGY, COUNSELING NOTES, AND RISK REDUCTION PLAN. | AC | | AC | AC=GIVEN TO CLIENT OR RETAINED FOR 90 DAYS AFTER TEST DATE; WHICHEVER COMES FIRST. |
| | HIV POSITIVE ANONYMOUS TEST RESULTS (INCLUDES SEROLOGY, COUNSELING NOTES, RISK REDUCTION PLAN, AND PREVENTION CASE MANAGEMENT RECORDS) | AC+1 | | AC+1 | AC=TEST DATE OR LAST DATE OF SERVICE; WHICHEVER COMES LATER. |
| | SEXUALLY TRANSMITTED DISEASE MEDICAL RECORDS OTHER THAN POSITIVE SYPHILIS TESTS. | AC+7 | | AC+7 | AC=LAST DATE OF SERVICE OR PATIENT'S 21ST BIRTHDAY, WHICHEVER COMES LATER. |
| | SEXUALLY TRANSMITTED DISEASE MEDICAL RECORDS CONTAINING POSITIVE SYPHILIS TESTS INCLUDING CONGENITAL SYPHILIS | AC+7 | | AC+7 | AC=PATIENT'S DEATH, IF KNOWN, OR 18 YEARS FROM THE LAST DATE OF SERVICE. |
| | ALL SEXUALLY TRANSMITTED DISEASE INTERVENTION RECORDS, AND HIV/AIDS DISEASE INTERVENTION RECORDS, INCLUDING INVESTIGATIONS, INTERVIEWS, AND DISEASE INTERVENTION CASE MANAGEMENT NOTES. | AC+3 | | AC+3 | AC=LAST DATE OF SERVICE OR PATIENT'S 21ST BIRTHDAY, WHICHEVER COMES LATER. |
| 5276 | CONTRACT MONITORING REPORTS - HIV | AC | 5 | AC+5 | Vital Record. AC=END OF CONTRACT |

RETENTION CODES (Field 7)

ARCHIVAL CODES (Field 8)

5.1