## **EAST CAROLINA UNIVERSITY HEALTH CARE COMPONENTS**

## ACCOUNTING OF DISCLOSURES LOG

(This log shall be maintained in the patient's medical record and, in the case of research, the Principle Investigator shall maintain a copy of this log.)  ECU Health Care Component:					
Patient Name:					
Medical Record N	Number:				
Date of Birth:					
Date	Name of recipient of information	Address of recipient (if known)	Information disclosed	Purpose of Disclosure	If periodic, note frequency and expected date of periodic disclosures
				1	

Note: You must account for the following disclosures when conducting research:

1. If you have obtained a waiver for authorization from UMCIRB

- 2. Disclosures preparatory to research efforts
- 3. Research when using decedent information