

**REGIONAL TRAUMA AUDIT COMMITTEE REVIEW ACTIVITY
CONFIDENTIALITY AGREEMENT**

As a participant of the Regional Trauma Audit Committee involved in the evaluation and improvement of the quality of trauma care rendered in the community through the EMS Trauma Care System, I recognize that confidentiality is vital to the free and candid discussions necessary to effective Trauma Audit Committee review activities. Therefore, I agree to respect and maintain the confidentiality of all discussions, deliberations, records, and other information generated in connection with these activities, and to make no voluntary disclosures of such information except to persons authorized to receive it in the conduct of the Trauma Audit Committee affairs.

Furthermore, my participation in the Trauma Audit Committee review and quality assurance activities is in reliance on my belief that the confidentiality of these activities will be similarly preserved by every other participant of the Trauma Audit Committee or other individual involved. I understand the Trauma Audit Committee participants and the Counties of Fresno, Kings, Madera and Tulare are entitled to undertake such action as is deemed appropriate to ensure that this confidentiality is maintained, including action necessitated by any breach or threatened breach of this agreement.

Dated: _____ Signed: _____

Print Name: _____

Hospital/Agency: _____

Email Address: _____