The Royal Australian and New Zealand College of Ophthalmologists

RANZCO Guidelines on Use of Clinical Photographs

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We acknowledge the Aboriginal and Torres Strait Islander Peoples, the Traditional Owners of Country throughout Australia and recognise their continuing connection to land, waters and community. We pay our respects to them and their cultures; and to their Elders past, present and emerging.
In recognition that we are a bi-national College, we also acknowledge the Rangatiratanga of Māori as Tangata Whenua and Treaty of Waitangi partners in Aotearoa New Zealand.

1 Purpose and scope

This position statement was developed by The Royal Australian and New Zealand College of Ophthalmologists (RANZCO). The purpose of this position statement is to provide guidance to ophthalmologists on the ethical and legal issues presented by the collection, storage, use and disclosure of clinical photographs.

This guidance extends to all RANZCO Fellows who take clinical photographs within or outside Australia and New Zealand for the purposes of patient assessment, investigation, or management; clinical education or assessment; research; development activities and/or other health related uses.
The suggested consent form for RANZCO teaching activities (international or domestic) is included as **Attachment A** to assist Fellows in gaining patient consent for use of their clinical photographs. A more general consent form is provided at **Attachment B**.
For information on international standards with regard to use of clinical photographs in publications, please review Wiley's policies on human studies, animal studies, clinical trial registration, biosecurity, and research reporting guidelines here.

2 Background

Photography of part or all of a patient with a visible condition using smartphones, tablets and digital cameras has become easier and increasingly popular in clinical practice.

Australian and New Zealand Government support for electronic healthcare record systems and telehealth programs has also legitimised the role of clinical photography in contemporary medical practice.

The increasing availability of such technology has also benefited international ophthalmology development activities. Developing world clinicians (and their patients), often working in limited resource isolated environments, benefit from clinical photography to obtain remote expert opinions and support. Ocular abnormalities observed overseas can be quite different to those observed in Australia and New Zealand, and as such, images of these conditions can have unique educational and research value. It is therefore imperative that consideration is given to these Guidelines, in addition to any overriding national laws, hospital policies, local traditions and restrictions regarding taking photographs. In addition, decisions about consent, collection and use of clinical photographs should be made with reference to cultural safety which refers to 'community and individual empowerment to manage one's own health and wellbeing'.[1]

3 Consent

3.1 Consent to take photographs is not always implicit in the consent given by patients for investigation or treatment of their condition.

3.2 There is no template method for obtaining consent for clinical photography particularly given that privacy legislation can differ between states/territories and countries.

3.3 However, consent to take clinical photographs must be informed consent. It should be specific as to what the photograph will be used for and to whom it is likely to be shown. For instance, a patient might be happy for a copy of the

photographs to be kept in his or her clinical notes, but may not agree to them being used for secondary purposes such as teaching.[2] Attachment A.

3.4 Specific consent is not required to make recordings such as angiograms and other images of the internal eye since patients' consent will be implicit in their consent to the investigation or treatment. If such images could be used for secondary purposes such as research, teaching or training, patients should be advised of this when seeking their consent to the procedure, explaining that they will be used in de-identified form.

3.5 The person requesting the photograph is the best person to explain to the patient what the images will be used for. The use of an interpreter may be required.

3.6 Consent should be sought even if a patient cannot be identified in a photograph. Sometimes a patient may be identifiable by virtue of their condition.

3.7 Consent can be withdrawn at any time.

3.8 If the patient consents to photographs being taken, this should be clearly documented, and the scope of consent recorded.

3.9 Before photographing a child, consent should be gained from the child, parent or guardian.[3]

3.10 Where possible, gain mutual agreement between patient and family member,[4] especially given in some cultures family members make decisions and speak on behalf of patients[5].

3.11 If you are concerned a photograph is being taken of a patient or part of a patient without consent, it is appropriate to ask the photographer if the patient has agreed to the photo being taken.[6]

4 Collection

4.1 Photographs should be deemed to have clinical value.[7]

4.2 When taking the photograph, the minimum possible area of the body required should be photographed and all steps should be taken to de-identify the patient.

4.3 Ensure all relevant information is noted, such as the identity of the patient, the date of the photo and the eye photographed. There must be appropriate cross-referencing in the patient's record if the photograph is stored elsewhere.

4.4 Photos of children, people with special needs and vulnerable subjects are to be taken with particular care, compassion and protection of privacy.[3] Photos of children must adhere to standards arising from RANZCO's Child Protection Policy.

4.5 Be mindful of cultural sensitivities about the taking of personal images. This may be of particular significance for patients from overseas and/or from an 'Aboriginal, Torres Strait Islander, Māori and other First Nations and/or Indigenous peoples'?[3]

4.6 Draw on interpersonal skills and moral values to act lawfully and respectfully with patients, to best meet their needs while obtaining best quality documentation of the patient's condition [8]

5 Use and disclosure

5.1 Photographs may only be used and disclosed for purposes within the scope of the original consent. For purposes outside the original scope, further consent may need to be obtained (unless disclosure is authorised or required by law).

5.2 Where copies of clinical photographs have been provided by other members of a treatment team, for instance when included in a referral from another health practitioner, use should fall within the original patient consent. Use for other purposes, for example teaching or publication, may therefore require further consent.[2]

5.3 Care should be taken with respect to appropriate electronic security to ensure confidential transmission of photographs to the intended recipients.

6 Storage and ownership

6.1 Photographs should be managed as securely as any other patient information and stored as part of the patient's health record in accordance with usual requirements for retaining health records. Fellows should be aware of the relevant health record legislation in their state/territory, and if relevant, overriding national laws, policies, local traditions and restrictions regarding taking photographs

6.2 Photographs from personal devices should have strict electronic security (e.g. passwords) and should be deleted from the device and any cloud storage facilities as soon as possible if they are not used for patient records.

6.3 Where a photograph is stored by the practice in a separate location such as a separate hard drive or third-party service provider, the location should be documented in the patient's health record. This is particularly important if the patient later requests a copy of the photograph.

7 Deceased patients

7.1 The duty of confidentiality continues after a patient has died. Fellows should abide by a patient's known scope of consent for use and disclosure of a photograph after the patient's death.[9]

7.2 If the images will be publicly available or the patient is identifiable, legal advice should be sought as to whether the patient's family should be consulted.[9]

8 Related documents

- IMI National Guidelines: A Guide to Good Practice. Cultural Diversity
- RANZCO Professional Code of Conduct
- RANZCO Child Protection Policy

9 Record of amendments to this document

Page	Details of Amendment	Date amended
Entire document	Created	10/06/2014
2, 3	3.4 added and 3.10 amended based on feedback	15/07/2014
Entire document	Reviewed	05/2019
Entire document	Reviewed (Minor changes throughout)	05/2022

10 References

1. NATSIHWA. *Cultural Safety Framework*. 2013. https://www.naatsihwp.org.au/sites/default/files/natsihwa-cultural_safety-framework_summary.pdf
2. Mahar P, Foley, P, Sheed-Finkc, A, Baker, C,. Legal considerations of consent and privacy in the context of clinical photography in Australian medical practice. *Med J Aust 2014;200(9):521-2*. 2013;198(1):48-49.
3. Australian Agency for International Development. AusAID ethical photography guidelines. 2012;
4. Ekmekci P, Arda, B. Interculturalism and informed consent: Respecting cultural differences without breaching human rights. *Cultura*. 2017;14(2):159-172.
5. Henley AaS, J. *Culturer, religion and patient care in a multi-ethnic society: A handbook for professionals*. 2003.
6. Baldwin Y, (MDA National). The peril of the pic. *First Defence* 2010;Spring 4-5
7. Practitioners. RACoG. *Guidelines for interprofessional collaboration between general practitioners and other medical specialists providing video consultations* 2013.
8. Horden J. Religion and Culture. *Medicine*. 2016;44(10):589-592.
9. General Medical Council (UK). *Making and using visual and audio recordings of patients*. 2011.

11 Attachments

- **Attachment A** – Consent form for use of clinical photographs for RANZCO ophthalmology teaching purposes
- **Attachment B** – Consent form for use of clinical photographs 3

Attachment A – Consent form for use of clinical photographs for RANZCO ophthalmology teaching purposes

***I,*_____[Photographer/Ophthalmologist's Name]**

confirm that I have read and understood RANZCO's guidelines titled 'Use of Clinical Photographs'.

I have also explained the concept of the RANZCO teaching activities to the patient and he/she has freely given consent for the use of their clinical photographs to be used for these purposes. He/she is aware that their photographs will be de-identified and has been given information on how they can access the photographs should they wish to at a later stage.

Signature: _____ Date: _____

Contact details: _____

Patient statement

I,_____Patient's Name]

Agree for my clinical photographs to be:

1. *stored electronically for an indefinite period, for the purposes of teaching eye care personnel.*
2. *accessed and viewed by ophthalmology trainees and specialists for the purpose of ophthalmology education (teaching, mentoring, or studying particular eye conditions) in Australia, New Zealand or overseas; and*
3. *included in presentations and publications for the purpose of education, assessment and/or research.*

This request has been explained to me and I fully understand what it entails.

Patient/parent/guardian (*Must have parental responsibility for the child*)

Signature: _____ Date: _____

Relationship to child: _____

Interpreter's statement (if applicable)

Name: _____

I have interpreted the above information to the patient to the best of my ability and in a way which I believe he/she can understand.

Interpreter's Signature:_____Date: _____

Attachment B – Consent form for use of clinical photographs

I, **_____[Photographer/Ophthalmologist's Name]**

confirm that I have read and understood RANZCO's guidelines titled 'Use of Clinical Photographs'. I have explained to the patient how the photographs will be used, disclosed, and stored and he/she has freely given consent for their photographs to be handled in this way. The patient has been given information on how they can access the photographs should they wish to at a later stage.

Signature: _____ Date: _____

Contact details: _____

Patient statement

I, **_____[Patient's Name]**

agree for my clinical photographs to be:

1. *stored in the following way (indicate duration also e.g. dates or 'for an indefinite period of time'):*

_____

_____

2. *used for the following purposes:*

_____

_____

_____

3. *accessed by and disclosed to:*

_____

_____

(Continues next page)

The above individual has explained this request to me, and I fully understand what it entails.

Patient/parent/guardian (*Must have parental responsibility for the child*)
Signature: _____ Date: _____

Relationship to child: _____

Name: _____

I have interpreted the above information to the patient to the best of my ability and in a way which I believe he/she can understand.

Interpreter's Signature:_____Date: _____