



## PRIVACY IMPACT ASSESSMENT (PIA)

For the

Mobile Fluoroscopy System (Hologic® Insight C-Arm)

US Army Medical Command - Defense Health Program (DHP) Funded Application

### **SECTION 1: IS A PIA REQUIRED?**

**a. Will this Department of Defense (DoD) information system or electronic collection of information (referred to as an "electronic collection" for the purpose of this form) collect, maintain, use, and/or disseminate PII about members of the public, Federal personnel, contractors or foreign nationals employed at U.S. military facilities internationally? Choose one option from the choices below. (Choose (3) for foreign nationals).**

- (1) Yes, from members of the general public.
- (2) Yes, from Federal personnel\* and/or Federal contractors.
- (3) Yes, from both members of the general public and Federal personnel and/or Federal contractors.
- (4) No

\* "Federal personnel" are referred to in the DoD IT Portfolio Repository (DITPR) as "Federal employees."

**b. If "No," ensure that DITPR or the authoritative database that updates DITPR is annotated for the reason(s) why a PIA is not required. If the DoD information system or electronic collection is not in DITPR, ensure that the reason(s) are recorded in appropriate documentation.**

**c. If "Yes," then a PIA is required. Proceed to Section 2.**

**SECTION 2: PIA SUMMARY INFORMATION**

**a. Why is this PIA being created or updated? Choose one:**

- New DoD Information System
- New Electronic Collection
- Existing DoD Information System
- Existing Electronic Collection
- Significantly Modified DoD Information System

**b. Is this DoD information system registered in the DITPR or the DoD Secret Internet Protocol Router Network (SIPRNET) IT Registry?**

- Yes, DITPR      Enter DITPR System Identification Number
- Yes, SIPRNET      Enter SIPRNET Identification Number
- No

**c. Does this DoD information system have an IT investment Unique Project Identifier (UPI), required by section 53 of Office of Management and Budget (OMB) Circular A-11?**

- Yes
- No

If "Yes," enter UPI

If unsure, consult the Component IT Budget Point of Contact to obtain the UPI.

**d. Does this DoD information system or electronic collection require a Privacy Act System of Records Notice (SORN)?**

A Privacy Act SORN is required if the information system or electronic collection contains information about U.S. citizens or lawful permanent U.S. residents that is retrieved by name or other unique identifier. PIA and Privacy Act SORN information should be consistent.

- Yes
- No

If "Yes," enter Privacy Act SORN Identifier

DoD Component-assigned designator, not the Federal Register number.  
Consult the Component Privacy Office for additional information or  
access DoD Privacy Act SORNs at: <http://www.defenselink.mil/privacy/notices/>

or

**Date of submission for approval to Defense Privacy Office**

Consult the Component Privacy Office for this date.

**e. Does this DoD information system or electronic collection have an OMB Control Number?**

Contact the Component Information Management Control Officer or DoD Clearance Officer for this information.

This number indicates OMB approval to collect data from 10 or more members of the public in a 12-month period regardless of form or format.

**Yes**

**Enter OMB Control Number**

**Enter Expiration Date**

**No**

**f. Authority to collect information. A Federal law, Executive Order of the President (EO), or DoD requirement must authorize the collection and maintenance of a system of records.**

(1) If this system has a Privacy Act SORN, the authorities in this PIA and the existing Privacy Act SORN should be the same.

(2) Cite the authority for this DoD information system or electronic collection to collect, use, maintain and/or disseminate PII. (If multiple authorities are cited, provide all that apply.)

(a) Whenever possible, cite the specific provisions of the statute and/or EO that authorizes the operation of the system and the collection of PII.

(b) If a specific statute or EO does not exist, determine if an indirect statutory authority can be cited. An indirect authority may be cited if the authority requires the operation or administration of a program, the execution of which will require the collection and maintenance of a system of records.

(c) DoD Components can use their general statutory grants of authority ("internal housekeeping") as the primary authority. The requirement, directive, or instruction implementing the statute within the DoD Component should be identified.

10 U.S.C. 3013, Secretary of the Army; 10 U.S.C. 1071-1085, Medical and Dental Care; 50 U.S.C. Supplement IV, Appendix 454, as amended, Persons liable for training and service; 42 U.S.C. Chapter 117, Sections 11131-11152, Reporting of Information; 10 U.S.C. 1097a and 1097b TRICARE Prime and TRICARE Program; 10 U.S.C. 1079, Contracts for Medical Care for Spouses and Children; 10 U.S.C. 1079a. CHAMPUS; 10 U.S.C. 1086, Contracts for Health Benefits for Certain Members, Former Members. and Their Dependents; E.O. 9397 (SSN): DoD instruction 6015.23, Delivery of Health care at Military Treatment Facilities (MTFs); DoD Directive 6040.37, Confidentiality of Medical Quality Assurance (QA) Records; DoD 6010.8-R, Civilian Health and Medical Program of the Uniformed Services (CHAMPUS); Army Regulation 40-66, Medical Record Administration and Health Care Documentation. The PII is transferred to Picture Archiving and Communication System (PACS) prior to its deletion.

**g. Summary of DoD information system or electronic collection. Answers to these questions should be consistent with security guidelines for release of information to the public.**

(1) Describe the purpose of this DoD information system or electronic collection and briefly describe the types of personal information about individuals collected in the system.

The Hologic® Insight C-Arm is a powerful mobile fluoroscopy system used for specialized minimally invasive procedures and routine surgical interventions. The medical images will be digitally transferred to the local processing system and become a permanent part of the patient's record.

The types of PII collected include patient demographic and medical information.

(2) Briefly describe the privacy risks associated with the PII collected and how these risks are addressed to safeguard privacy.

The risks associated with the collection, use, and storage of PII are unauthorized access and unauthorized disclosure. Loss or compromise could occur through insecure or misdirected digital transmission, unauthorized access to or unauthorized viewing of a DoD information system or insecure storage (data-at-rest). Appropriate security safeguards are in place to minimize these risks. The security safeguards are outlined in Section 3d and 3f below.

**h. With whom will the PII be shared through data exchange, both within your DoD Component and outside your Component (e.g., other DoD Components, Federal Agencies)? Indicate all that apply.**

**Within the DoD Component.**

Specify.

The PII is shared with health care providers in the US Army medical treatment facility using this application.

**Other DoD Components.**

Specify.

**Other Federal Agencies.**

Specify.

**State and Local Agencies.**

Specify.

**Contractor** (Enter name and describe the language in the contract that safeguards PII.)

Specify.

-Hologic Inc. The contract includes standard US Army Medical Command Business Associate Agreement language which requires compliance with the Privacy Act and Health Insurance Portability and Accountability Act (HIPAA) provisions to protect the confidentiality of the personal information.  
- Some of the health care personnel are contractors. There are also provisions in their contracts requiring compliance with Privacy Act and Health Insurance Portability and

Accountability Act requirements to protect the confidentiality of personal information.

**Other** (e.g., commercial providers, colleges).

Specify.

**i. Do individuals have the opportunity to object to the collection of their PII?**

**Yes**  **No**

(1) If "Yes," describe method by which individuals can object to the collection of PII.

(2) If "No," state the reason why individuals cannot object.

The patient does not directly participate in the PII collection process for this database. The PII is obtained from existing DoD information systems.

**j. Do individuals have the opportunity to consent to the specific uses of their PII?**

**Yes**  **No**

(1) If "Yes," describe the method by which individuals can give or withhold their consent.

(2) If "No," state the reason why individuals cannot give or withhold their consent.

The patient does not directly participate in the PII collection process for this database. The PII is obtained from existing DoD information systems.

**k. What information is provided to an individual when asked to provide PII data?** Indicate all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> <b>Privacy Act Statement</b> | <input type="checkbox"/> <b>Privacy Advisory</b> |
| <input type="checkbox"/> <b>Other</b>                 | <input checked="" type="checkbox"/> <b>None</b>  |

Describe each applicable format.

The patient does not directly participate in the PII collection process for this database. The PII is obtained from existing DoD information systems.

**NOTE:**

**Sections 1 and 2 above are to be posted to the Component's Web site. Posting of these Sections indicates that the PIA has been reviewed to ensure that appropriate safeguards are in place to protect privacy.**

**A Component may restrict the publication of Sections 1 and/or 2 if they contain information that would reveal sensitive information or raise security concerns.**