REQUEST FOR APPROVAL OF RECORDS RETENTION AND DISPOSITION SCHEDULE

TO: STATE RECORDS ADMINISTRATOR
STATE OF NEBRASKA

SCHEDULE 108
AGENCY, BOARD OR COMMISSION
Douglas County Health Department
DIVISION, BUREAU OR OTHER UNIT
Supersedes Edition of November 19, 1992

PART I -- AGENCY STATEMENT

In accordance with Section 84-1212.01, R.R.S. 1943, approval of the attached records retention and disposition schedule by the State Records Administrator is hereby requested. Retention periods and dispositions have been recommended by this agency after a careful evaluation of all factors listed in Section 84-1212.01, R.R.S. 1943.

SIGNATURE

TITLE Health Director

DATE 1/12/06

PART II - ARCHIVAL APPROVAL

The attached schedule has been analyzed, all archival and historical material has been properly identified, no disposition except by transfer to the State Archives has been recommended for such material, and this schedule is approved as submitted.

SIGNATURE

TITLE STATE ARCHIVIST

DATE Jan. 25, 2006

PART III -- APPROVAL BY STATE RECORDS ADMINISTRATOR

The attached schedule has been reviewed in accordance with Section 84-1212.01, R.R.S. 1943, and is approved as submitted.

SIGNATURE

DATE 1/25/06

RMA 01005D
INSTRUCTIONS FOR USING THIS SCHEDULE

Records retention and disposition schedules are designed to serve as your records management guidelines for storing and disposing of records, regardless of the media on which they reside, including paper, microfilm, diskettes, optical disks, CDs, DVDs, servers, computer hard drives, etc. Local Agencies General Records Schedule #24 contains those records common to most local government agencies. This schedule, along with the unique schedule written specifically for records unique to your office, approved by the State Records Administrator, provide your only ongoing authority to dispose of records. Listed below are some basic procedures to follow when applying your schedule.

DISPOSING OF RECORDS

1. Check your schedules to see what the retention period is. Note: Your agency's unique schedule will take precedence over General Records Schedule #24 for any items which have differences in retention requirements.

2. Dispose of records that have met their retention periods.

3. Complete a Records Disposition Report for the records you dispose. The Records Disposition Report form is the last page of this schedule. Remove the form, photocopy it, complete the form, make a photocopy for your records, and send the completed form to the Records Management Division at the address below. This report establishes that the destruction was performed in your normal course of business.

Please remember to retain the blank form for future use.

NON-SCHEDULED RECORDS

Contact a Records Management Consultant in Records Management to see whether the records will fit under an item already on the schedule. If they do not, they must be retained until they are added to the next revision of your schedule.

SCHEDULE UPDATE

It is the responsibility of each agency to periodically update their schedule. A Records Management Consultant in Records Management can assist you with the schedule update, which involves adding new records and making revisions to existing items. Keeping your schedule current will ensure that you have the ongoing authority to discard records when their useful life has ended.

QUESTIONS

If you have any questions about these procedures, please contact your agency Records Officer or your Records Management Consultant in Records Management. We will help you with any questions the schedule may present, including: transferring records to the State Records Center or State Archives, microfilming records, scanning records, etc.

Records Management Division
440 South 8th Street, Suite 210
Lincoln, NE  68508-2294
402-471-2559
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DOUGLAS COUNTY HEALTH DEPARTMENT

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SCHEDULE 108 – DOUGLAS COUNTY HEALTH DEPARTMENT

108-1  SEXUALLY TRANSMITTED DISEASE CLINIC

108-1-1  OUTPATIENT MEDICAL RECORDS
Confidential medical records of every patient admitted for examination and treatment at the Douglas County Health Department’s Sexually Transmitted Disease Clinics. Medical Records will contain, when applicable, the following information:
Case reports which include:
- Laboratory reports
- Patient demographics
- Patients consent forms
- Physician’s exam findings
- Prior STD’s if known
- Provisional diagnosis
- Reason for attending clinic
- Report of laboratory tests
- Treatments given

May contain, on occasion, other records not specifically listed here.
Dispose of 10 years after patient’s last visit to clinic OR 2 years after the patient reaches the age of 21 years, whichever is later.

108-1-2  PATIENT LOGS
List containing identifying and locating information regarding patients admitted for examination and treatment at the Douglas County Health Department Sexually Transmitted Disease Clinics.
Dispose of 1 year after date of the clinic session for which the log was created.

108-1-3  PATIENT APPOINTMENT SCHEDULES
List containing the names and telephone number of patients making appointments to be examined and treated at the Douglas County health Department Sexually Transmitted Disease Clinic-Woolworth location.
Dispose of 1 year after date of the clinic session for which the schedule was created.

108-1-4  PATIENT CHART AUDITS
Description of findings of the audit of Douglas County Health Department Sexually Transmitted Disease Clinic patient charts.
Dispose of after 5 years, provided audit has been completed.
108-2  TRAVELERS CLINIC

108-2-1  PATIENT CHARTS

Confidential medical records of every patient admitted for evaluation, administration of vaccines, and provision of prescriptions at the Douglas County Health Department’s Travelers Clinic. Medical records will contain, when applicable the following information:

- Patient Questionnaire
- Physician Assessment/Plan
- Planned Immunization Schedule
- Clinical Services Receipt
- Vaccine Administration/Authorization of Release of Information

May, on occasion, contain some records not specifically listed here. **Dispose of 10 years after patient’s last visit to clinic OR 2 years after the patient reaches the age of 21 years, whichever is later.**

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108-3  DENTAL CLINIC

108-3-1  PATIENT CHARTS

Confidential dental records of every patient admitted for examination and treatment at the Douglas County Health Department’s Dental Clinic. Dental records will contain, when applicable, the following:

- Patient demographics
- Reason for attending clinic.
- Patient consent forms
- Dentist’s exam findings
- X-rays
- Reports of laboratory tests
- Treatments given
- Referrals/follow-ups/results/recommendations

May, on occasion, contain some records not specifically listed here. **Dispose of 10 years after the patient's last visit to clinic OR 2 years after the patient reaches the age of 21 years, whichever is later.**

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108-3-2  MEDICAID TREATMENT PLAN AND PAYMENT REPORTS

Confidential records of dentist’s treatment plan for individual patients submitted to the Nebraska Medicaid Office and report of payment made to the Douglas County Health Department by the Nebraska Medicaid Office for services provided. **Dispose of 5 years after payment is received.**
108-3-3  EMPLOYEE X-RAY BADGE REPORTS
Records of test results on employee x-ray badges indicating amount of exposure to x-rays during their taking of dental x-rays.
Retain permanently.

108-4  CHILD HEALTH CLINICS

108-4-1  PATIENT MEDICAL RECORDS
Confidential outpatient medical records of every patient admitted to the Douglas County Health Department’s Child Health Clinics for examination and treatment. The records will contain, when applicable, the following information:
- Patient demographics
- Patient (parent) consent forms
- Presenting problems/conditions
- Physical exam findings
- Diagnoses and treatment
- Referrals-follow-up, results/recommendations
- Laboratory Reports
May, on occasion, contain some records not specifically listed here.
Dispose of 10 years after patient’s last visit to clinic or 2 years after the patient reaches the age of 21 years, whichever is later.

108-5  IMMUNIZATION CLINICS

108-5-1  IMMUNIZATION RECORDS
Confidential outpatient immunization record for every patient admitted to the Douglas County Health Department Immunization Clinics for evaluation and administration of vaccines. The immunization record will contain, when applicable, the following information:
- Patient demographics
- Patient (parent) consent forms
- Immunizations administered
- Vaccine lot numbers
- Authorization to release immunization information to other entities
May, on occasion, contain some records not specifically listed here.
Dispose of 10 years after patient’s last visit to the clinic OR 10 years after the patient reaches the age of 21 years, whichever is later.

108-5-2  IMMUNIZATION RECORD CARDS
File card containing patient demographic information, immunization(s) received, and date(s) of administration.
Dispose of 10 years after patient’s last visit to the clinic OR 10 years after the patient reaches the age of 21 years, whichever is later.
108-5-3  AUTHORIZATION OF RELEASE OF INFORMATION FORMS
Form completed by patient or parent authorizing the Douglas County Health Department
to obtain immunization records of the patient from other health care providers.
Dispose of 1 year after the immunization information is received.

108-6  EMERGENCY RESPONSE COORDINATION

108-6-1  SMALLPOX VACCINATION RECORDS
Confidential records for every Douglas County Health Department employee and
community volunteer admitted to the Douglas County Health Department Smallpox
Vaccination Clinic. The records will contain, when applicable, the following information:
- Patient demographics
- Patient consent forms
- Medical history
- Immunization administered
- Physician consultation-if needed
- Recommendations
- May, on occasion, contain some records not specifically listed here.
Retain permanently

108-6-2  LETTERS OF AGREEMENT
Letters and signed agreements from local businesses, agencies, and institutions
confirming that these entities will allow the Douglas County Health Department (or its
designee) to utilize their facilities, equipment, and/or other resources, as needed, when
the Health Department is responding to a major public health emergency or other
disaster situation.
Dispose of 1 year after the business, agency, or institution cancels the agreement.

108-7  OFFICE OF THE DIRECTOR

108-7-1  DISCIPLINARY REPORTS
Confidential records of employee disciplinary hearings and disciplinary actions taken, if
any.
Retain permanently.

108-7-2  BOARD OF HEALTH RESOLUTIONS
Resolutions approved by the Douglas County Board of Health at regular or special
meetings of the Board.
Retain permanently.

108-7-3  LICENSES
All original documents pertaining to licenses issued to the Douglas County Health
Department.
Dispose of 2 years after the expiration of the license.
108-8  **VITAL STATISTICS**

108-8-1 **NEWBORN (HOMEBIRTH) WORKSHEETS**
Demographic and medical/behavioral/lifestyle information of an infant born in a home setting and parents. The document will contain, when applicable, the following information:
- Demographics of the mother
- Demographics of the father
- Prenatal medical history of the mother
- Labor and Delivery information
- Medical information of the newborn

Dispose of 5 years after the date of birth.

108-8-2 **PERMITS FOR TRANSIT OR CREMATION**
Forms for the authorizing of transit or cremation of the remains of a person who died in Douglas County. The document contains the following information:
- Decedent demographics
- Signature of person authorizing the transit or cremation of the remains
- Disposition of the remains

Dispose of 1 year after issuance of the permit.

108-8-3 **WEEKLY MORTALITY REPORTS**
Weekly report to the Centers for Disease Control and Prevention regarding the number of deaths, by age group, in the City of Omaha reported to the Douglas County Health Department during the previous week.
Dispose of 5 years after the date of the report.

108-8-4 **APPLICATIONS FOR BIRTH AND DEATH CERTIFICATES**
Completed applications for certified copies of birth and death certificates Retained by the Douglas County Health Department. The document contains the following information:
- Demographic information regarding the person whose certificate is being requested
- Signature and demographic information of the requesting person
- Documentation of payment of required fees

Dispose of 3 years after date of application.

108-8-5 **BIRTH CERTIFICATES**
The form is the official record of the birth of a person occurring in Douglas County. The record will include the following information:
- Name of person for whom the record is generated
- Parent’s demographics
- Name and signature of medical professional in attendance at the birth
- Name and signature of the registrar

Retain permanently
108-8-6 DEATH CERTIFICATES
The form is the official record of the death of a person occurring in Douglas County. The record will include the following information:
- Decedent demographics
- Cause(s) of death
- Names and signature of medical professional certifying the death
- Name and signature of registrar

Retain permanently

108-9 EPIDEMIOLOGY AND DISEASE CONTROL

108-9-1 TUBERCULOSIS CASE REPORTS/MEDICAL RECORDS
Confidential records of all active Tuberculosis patients reported to the Douglas County Health Department and children less than four years of age receiving directly observed preventive therapy. The report will contain, when applicable the following information:
- Patient demographics
- Sign and Symptoms experienced by the patient
- Date of onset and duration of the illness
- Laboratory results
- Possible sources of infection
- Other persons known to the patient with similar symptoms or diagnosis
- Family members and close contacts
- Treatment
- Directly observed therapy information
- Nurses notes
- Physician’s order forms
- Tuberculosis test results on contacts

Dispose of 10 years after the closing of the case report OR 2 years after the patient reaches the age of 21 years, whichever is later.

108-9-2 TUBERCULOSIS SKIN TESTING PERMISSION/RESULTS FORMS
Patient consent form authorizing Douglas County Health Department personnel to administer a Tuberculosis skin test.
Dispose of 10 years after the date of the test OR 2 years after the person tested reaches the age of 21 years, whichever is later.
108-9-3 DISEASE CASE REPORT/INVESTIGATION FORMS (PAPER)
Confidential individual disease case report and investigation forms for reportable communicable diseases. The documents will include, when applicable, the following information:
Patient demographics
Sign and symptoms experienced by the patient
Date of onset and duration of illness
Possible sources of infection
Laboratory results
Others person known to the patient with similar symptoms or diagnosis
Family members and close contacts
Treatment
May, on occasion, contain other information or records.
Retain permanently all forms generated prior to the year 1993. Records generated in years 1993 and later, dispose of 10 years after the investigation is completed.

108-9-4 LABORATORY REPORTS
Weekly reports from medical laboratories listing reactive tests for reportable communicable diseases. The reports will contain the following information:
Name of laboratory and contact information
Patient demographics
Date of specimen collection
Name of test and test results
Name of physician ordering the test and contact information
May, on occasion, contain other information
Dispose of 10 years after the receipt of the report from the laboratory.

108-9-5 HIV TEST SITE CLIENT INTAKE FORMS
Client data form for persons presenting for services at the Douglas County Health Department HIV Counseling and Testing Sites. The information will include, when applicable, the following information:
Client demographics
Risk information
Dispose of 2 years after the date of the service.

108-9-6 HIV TEST SITE CLIENT CONSENT FORMS
Form signed by client agreeing to be tested for exposure to the HIV. The form will contain the following:
Client demographics
Client signature
Dispose of 2 years after the date of the signing of the form.

108-9-7 HIV RAPID TEST RESULTS
Form containing the result of the rapid test for exposure to the HIV for an individual client presenting at the Douglas County Health Department HIV counseling and testing site. The form will contain the following information:
Client demographics
Test results
Dispose of 10 years after the date of the test.
108-9-8 HIV TEST SITE CLIENT INFORMATION FORMS (SCANNING)
Copy of computer scanning form containing information on clients who have been provided services at the Douglas County Health Department HIV Counseling and Testing sites. The form contains the following information:
Client demographics
Test results
Client risk information
Dispose of 6 months after the date of the service provided to the client.

108-9-9 HIV TEST SITE HIV POSITIVE CLIENT LOGS
Line listing of clients who have tested positive for HIV at the Douglas County Health Department HIV Counseling and Testing Site. The listing will contain the following information:
Client demographics
Test results
Dispose of 1 year after the date of service provided to the client.

108-9-10 HIV COUNSELING TESTING SITE LOG OF TESTS
Line listing of all persons who have been tested for exposure to the HIV at the Douglas County Health Department HIV Counseling and testing Site and the results of the test(s) performed.
Dispose of 1 year after the date of the service provided to the client.

108-9-11 STD MORBIDITY DATABASE
Computer based listing of all cases of sexually transmitted diseases in Douglas County. The database will contain the following information:
Patient demographics
Laboratory results
Treatment information
Investigation results
Retain permanently.

108-9-12 HIV PARTNER/SPOUSAL NOTIFICATION FORMS
Form containing the information regarding contact or attempted contact with a person reported to the Douglas County Health Department as being HIV positive or having AIDS. The form will contain, when applicable, the following information:
Patient demographics
Laboratory testing (patient reported)
Risk behavior
Medical/case management information
May, on occasion, contain other information
Dispose of 10 years after the date of the interview or last attempted contact.
108-9-13 HIV/AIDS FOLLOW UP FORMS
Form for physician reporting of a patient’s HIV/AIDS status. The form will contain, when applicable the following information:
- Patient demographics
- Laboratory results
- Patient HIV/AIDS status
- Name of physician
May, on occasion, contain other information
Retain permanently.

108-9-14 DISEASE CASE REPORTS/INVESTIGATION INFORMATION - (NETSS, NEDSS, HARS)
Confidential individual disease case report and investigation information for reportable communicable diseases. When applicable, the following information is found:
- Patient demographics
- Signs and symptoms experienced by the patient
- Date of onset and duration of the illness
- Possible sources of infection
- Laboratory results
- Other persons known to the patient with similar symptoms or diagnosis
- Family members and close contacts
- Treatment
May, on occasion, contain other information
Retain permanently.

108-10 FOOD AND DRINK
108-10-1 FOOD ESTABLISHMENT INSPECTION REPORTS
Results of the inspection by Douglas County health Department registered sanitarians of establishments serving food. The reports contain, when applicable, the following information:
- Name and address of the establishment
- Owner of the establishment
- Violations found, if any
- Code Reference
- Signature of inspector
- Signature of establishment representative
Dispose of 5 years after the date of the inspection.

108-10-2 COMPLAINT FORMS
Citizen complaints regarding food establishments. The complaint form will contain, when applicable the following information:
- Name and address of the establishment
- Nature of the complaint
- Any illness experienced or noted
- Date of visiting the establishment
May, on occasion, contain other information
Dispose of 5 years after the date of the complaint.
108-10-3  LABORATORY REPORTS-FOOD
Test results of food samples submitted to various laboratories for examination for adulteration or contamination.
Dispose of 3 years after the date of the laboratory report to the Department.

108-10-4  FOODBORNE ILLNESS INVESTIGATION REPORTS
Results of the investigation of suspected food-borne illnesses. The report will contain, when applicable, the following information:
Demographics of person(s) ill
Signs and symptoms of illness
Date of onset and duration of illness
Possible source(s) of illness, including foods consumed
Laboratory results
Other persons known to ill person(s) with similar illness
Treatment
May, on occasion, contain other information or records.
Dispose of 3 years after the completion of the investigation.

108-10-5  FOOD PERMIT APPLICATION FORMS
Application form completed by an individual or corporation to operate a food establishment. The form will contain the following information:
Name and address of person or corporation requesting the permit
Address of the food establishment(s) to be operated
Type and number of facilities to be operated
Fees due
May, on occasion, contain other information
Dispose of 5 years after the date of the application.

108-10-6  FOOD SAFETY CLASS CARDS
Certificate of attendance for individuals successfully completing the Douglas County Health Department food safety class.
Dispose of 5 years after the date of issuance of the certificate.

108-9-7  FOOD AND DRINK PERMITS
Official permit issued allowing a person or corporation to serve food and drink to the public. The permit contains the following information:
Name of person/corporation to whom the permit is issued
Location of the premises for which the permit is issued
Signature of the supervisor of the Food and Drink Section
Dispose of 5 years after issuance of the permit.
108-11  SANITARY ENGINEERING

108-11-1  SWIMMING POOL INSPECTION REPORTS
Reports of inspections of local public/residential swimming pools conducted by registered sanitarians. The reports will contain, when applicable, the following information:
Name and address of the swimming pool
Name of owner
Name of operator
Water quality assessment
Facility assessment
Name of inspecting sanitarian
Pool status
May, on occasion, contain other information
Dispose of 5 years after the date of inspection.

108-11-2  ENVIRONMENTAL HEALTH ASSESSMENT REPORTS
Reports of various environmental health assessments conducted by registered sanitarians. The assessments include the following: general environmental, indoor air quality-residential, indoor air quality-commercial, private water supplies, inorganic or pH water samples, U.S.D.A. water samples, and plan reviews. The reports will include, when applicable, the following:
Name of property owner/ person requesting assessment
Address of the property
Contact person
Results of the assessment
Laboratory Results
Letter to appropriate person(s) reporting results/recommendations
Dispose of 5 years after the date of the assessment.

108-11-3  SANITARY SURVEYS
Report of the inspection and approval sewage disposal systems (septic systems) by registered sanitarians. The report will include, when applicable, the following:
Property address
Name of owner of property
Description of septic tank and disposal field
Sketch of septic tank and disposal field layout
Copy of permit issued
Results of percolation test
May, on occasion, contain other information
Retain permanently.
108-11-4  APPLICATIONS FOR PERMIT FOR PRIVATE WATER SUPPLY SYSTEM
Application form for the installation of water well on private property. The application will include the following information:
Property location
Owner of the property
Name of well driller
Location of the well
Materials used to contract well
List of uses of the water from the well
Approval and permit number
May, on occasion, contain other information.
Retain permanently.

108-11-5  LANDFILL EVALUATION REPORTS
Report of inspection of landfills by registered sanitarians. The report will include, when applicable, the following information:
Owner/operator of the landfill
Location of the landfill
Inspector
Remarks
Items to be corrected
Retain permanently.

108-11-6  INFECTIOUS WASTE TRANSPORT VEHICLE CHECK LISTS
Report of inspection of vehicles transporting infectious waste. Report will include the following:
Results of review of manifest document
Results of inspection of vehicle and safety equipment.
Dispose of 5 years after date of inspection.

108-11-7  ENVIRONMENTAL COMPLAINT CARDS
Card contains information regarding condition or situation that is a possible environmental hazard. The card will contain, if applicable, the following information:
Location of the possible hazard
Name and contact information of person filing the complaint
Nature of the complaint
Condition found and action taken
May, on occasion, contain other information or records.
Dispose of 5 years after the date of investigation.
108-12 SANITATION CONTROL AND LEAD POISONING PREVENTION

108-12-1 CASE MANAGEMENT RECORDS-LEAD POISONING
Records of persons tested for lead poisoning and managed in the Lead Poisoning Prevention Program. The records will contain, when applicable, the following information:
- Patient demographics
- Patient history and environmental information
- Laboratory results
- Exposure information
- Case management activity
May, on occasion, contain other information or records.
Dispose of 20 years after release from the Program.

108-12-2 ENVIRONMENTAL ASSESSMENTS-LEAD POISONING
Reports of environmental assessments for lead contamination. The reports will include, when applicable, the following information:
- Lead dust wipe analyses
- Chain of custody documentation-laboratory samples
- Risk assessments
- Inspection results
- XRF results
- Clearance reports
- Sampling data
May, on occasion, other information or records.
Dispose of 20 years following patient release from program OR date of last assessment, whichever is later.

108-12-3 SANITATION COMPLAINT CARDS
Card contains information regarding a condition or situation that is a possible sanitary hazard. The card will contain, if applicable, the following information:
- Location of the possible hazard
- Name and contact information of person filing the complaint
- Nature of the complaint
- Condition found and action taken
May, on occasion, contain other information or records.
Dispose of 5 years after date of investigation.

108-12-4 SANITATION NOTICES OF VIOLATION
Letter to responsible party informing the party that they are in violation of a sanitation code or regulation. The letter will contain, when applicable, the following information:
- Nature of the violation
- Code or regulation violated
- Correction required
- Timeframe in which the correction must be accomplished
- Consequences of non-compliance
May, on occasion, contain other information or records.
Dispose of 5 years after correction is completed.
108-12-5  DEMOLITION REVIEW FORMS
Memo to the City of Omaha-Permits and Inspection stating that a premise is free of rodents, pigeons, and/or vermin infestation.
Dispose of 5 years after date of the memo.

108-12-6  APPLICATIONS FOR DOMESTIC ANIMAL PERMIT
Application form completed by an individual wishing to maintain selected animals or bees on their property. The form will contain, when applicable, the following information:
Name of applicant
Location of the property
Species and number of animals/bees
Action taken by the Health Department
Dispose of 5 years after the date of the application.

108-12-7  ANIMAL/BEE PERMITS
Official permit issued allowing for the Retaining of selected animals/bees at a specific location. The permit contains the following information:
Name of the person to whom the permit is issued
Location for which the permit is issued
Signature of the supervisor of Sanitation Control
Retain permanently.

108-12-8  WEST NILE VIRUS SURVEILLANCE DATA
Aggregate data regarding results of sampling for mosquito larvae by location of sampling. The spreadsheet contains the following information:
Location of the sampling
Date of the sampling
Results of the sampling
Retain permanently.

108-12-9  MOSQUITO LARVAE SURVEILLANCE FORMS
Report form containing the results of sampling for mosquito larvae at a specific location. The form contains the following information:
Location of the sampling
Date and time of the sampling
Results of the sampling
Abatement Action taken
Dispose of 2 years after the date of the sampling.
108-13  LABORATORY

108-13-1  C.L.I.A. CERTIFICATIONS
Documentation that the Douglas County health Department Laboratory is certified to perform selected laboratory tests under the Clinical Laboratory Improvement Act rules and regulations.
Dispose of 3 years after the issuance of the certification.

108-13-2  WATER TESTING CERTIFICATIONS
Documentation that the Douglas County Health Department Laboratory is certified by the Nebraska Health and Human Services System to perform selected laboratory tests on water.
Dispose of 5 years after the issuance of the certification.

108-13-3  RESULTS OF AIR MONITORING
Reports of the results of tests for air pollutants performed on samples collected at various sites in Douglas County. The results will contain the following information:
Site of the air sampling
Test results
Dispose of 5 years after the date of the test.

108-13-4  ALCOHOL LICENSES (NON-BEVERAGE)
Permit issued by the Nebraska Liquor Control Commission to the Douglas County Health Department to maintain a supply of ethyl alcohol for use by the Douglas County Health Department Laboratory.
Dispose of 5 years after the expiration of the permit.

108-13-5  ATF ALCOHOL PERMITS
Documentation of fee payment to the Federal Alcohol-Tobacco-Firearms Agency for permission to maintain a supply of ethyl alcohol for use by the Douglas County Health Department Laboratory.
Dispose of 5 years after receipt of fee payment document.

108-13-6  WATER TEST RESULTS
Results of tests performed on water samples submitted to the Douglas County Health Department Laboratory. The results will contain, when applicable, the following information:
Site of collection of the sample
Test results
Dispose of 5 years after the date of the test.
108-13-7    EPA/NDEQ AUDIT REPORTS
Performance audit reports from the Federal Environmental Protection Agency and the Nebraska Department of Environmental Quality regarding the air monitoring testing procedures of the Douglas County Health Department Laboratory. 
Dispose of 5 years after the date of the report.

NOTE
1. These records may be disposed of after the required retention period provided the audit has been completed with the audit report released and all related audit comments resolved. Check with the organization that performed the audit, and, if applicable, the Federal cognizant agency if there is a question whether resolution is complete. For records retention purposes only, the issuance of an audit waiver (or an Unaudited Financial Statement for villages) by the Auditor of Public Accounts shall take the place of an actual audit.
RECORDS DISPOSITION REPORT

TO: SECRETARY OF STATE
RECORDS MANAGEMENT DIVISION
440 S. 8TH STREET SUITE 210
LINCOLN, NE 68508-2294

REQUIRED INFORMATION:
In accordance with the Records Management Act, records of this agency have been disposed of under the authorization granted by the following schedule(s):

<table>
<thead>
<tr>
<th>SCHEDULE NUMBER(S) ONLY (DO NOT INCLUDE SECTION AND ITEM NUMBERS)</th>
<th>TOTAL VOLUME DISPOSED (SEE REVERSE)</th>
</tr>
</thead>
<tbody>
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</table>

OPTIONAL INFORMATION (FOR YOUR USE ONLY):
You may include detailed information which will be useful to you in recording exactly what records were disposed of and under what authority. This might include such things as schedule section and item numbers, title of records, inclusive dates of records, etc. This information is not required to be filed with Records Management.

DATE

SIGNATURE

SEND ORIGINAL TO RECORDS MANAGEMENT. MAKE A PHOTOCOPY FOR YOUR RECORDS.

RMA 03006D
VOLUME ESTIMATING GUIDE

(PLEASE NOTE THAT FOR REPORTING PURPOSES, A BALLPARK ESTIMATE OF THE TOTAL VOLUME OF MATERIAL DISPOSED IS ADEQUATE.)

Vertical File Cabinet, 4 drawer letter-size ................................................................. 6 cubic feet
Vertical File Cabinet, 4 drawer legal-size ................................................................. 8 cubic feet
Lateral File, 4 drawer/shelf letter-size ........................................................................ 9 cubic feet
Lateral File, 4 drawer/shelf legal-size ......................................................................... 12 cubic feet
Records center carton ................................................................................................ 1 cubic foot
About a pickup load .................................................................................................... 50 cubic feet