**ARTICLE V. CONFIDENTIALITY, IMMUNITY, AND RELEASE**

**5.1 Confidentiality of Information**

5.1.1 General

Confidentiality shall be accorded to the fullest extent permitted by law to all activities of the Medical Staff that occur pursuant to the Bylaws, Medical Staff Policies and Procedures, Rules and Regulations, and Hospital policies and procedures.

5.1.2 Breach of Confidentiality

Any breach of the confidentiality is outside appropriate standards of conduct of this Medical Staff and will be deemed as undermining the reasonably expected functioning of the Medical Staff or the Hospital. If it is determined that such a breach has occurred, the Medical Executive Committee (MEC) may undertake such corrective action as it deems appropriate, and such conduct shall be considered in the granting or removal of clinical privileges or prerogatives of Medical Staff membership. Any action taken shall be considered administrative in nature and shall not entitle the Member to a hearing.

**5.2 Immunity from Liability**

5.2.1 For Action Taken

Each representative of the Medical Staff and Hospital shall be exempt, to the fullest extent permitted by law, from liability to a Practitioner or member for damages or other relief for any action taken or statements or recommendations made within the scope of duties exercised as a representative of the Medical Staff or Hospital.

5.2.2 From Providing Information

Each representative of the Medical Staff and Hospital and all third parties shall be exempt, to the fullest extent permitted by law, from liability to a Practitioner or member for damages or other relief by reason of providing information to a representative of the Medical Staff or Hospital concerning such person who is, or has been, an applicant for membership of the Medical Staff or who did, or does, exercise clinical privileges or provides services at this Hospital.

**5.3 Activities and Information Covered**

The confidentiality and immunity provided by this Article shall apply to all acts, communications, investigations, reports, recommendations, or disclosures performed or made in connection with this or any other health care facility or organization’s activities concerning, but not limited to:

5.3.1 Application for appointment, reappointment, or clinical privileges;

5.3.2 Corrective action;

5.3.3 Hearings and appellate reviews;

5.3.4 Utilization reviews;

5.3.5 Other department, section, committee, or Medical Staff activities related to monitoring and maintaining quality patient care and appropriate professional conduct; and

5.3.6 Peer review organizations.

**5.4 Release**

Each Practitioner or member shall, upon request of the Medical Staff or Hospital, execute general and specific releases in accordance with the express provisions and general intent of this article. Execution of such releases shall not be deemed a prerequisite to the effectiveness of this article.