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AGFA AGENT Health Care

FOREWORD

This document consists of the Manufacturer Disclosure Statement for Device Security (MDS² form). The intent of the MDS² form is to supply healthcare providers with important information to assist them in assessing the VULNERABILITY and risks associated with protecting Electronic Protected Health Information (ePHI) transmitted or maintained by devices. Because security risk assessment spans an entire organization, this document focuses on only those elements of the security risk assessment process associated with devices and systems that maintain or transmit ePHI.

The MDS² form should:

- (1) Be useful to healthcare provider organizations worldwide. While the form does supply information important to providers who must comply with HIPAA privacy and security rules, the information presented may be useful for any healthcare provider who aspires to have an effective information security RISK MANAGEMENT program. Outside the US, providers would therefore find the MDS² form an effective tool to address regional regulations such as EU 95/46 (Europe), Act on the Protection of Personal Information (Act No. 57 of 2003, Japan), and PIPEDA (Canada).
- (2) Include device specific information addressing the technical security-related attributes of the individual device model.
- (3) Provide a simple, flexible way of collecting the technical, device-specific elements of the common/typical information needed by provider organizations (device users/operators) to begin device information security (i.e., confidentiality, integrity, availability) risk assessments.
- (4) HIMSS and NEMA grant permission to make copies and use this form.

Using the information in the MDS² form together with information collected about the care delivery environment (e.g., through tools like ACCE / ECRl's Guide for Information Security for Biomedical Technology), the provider's multidisciplinary risk assessment team can review assembled information and make informed decisions on implementing a local security management plan.

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Section 1 INSTRUCTIONS FOR OBTAINING AND USING THE MDS² FORM

1.1 USING THE MDS² FORM (HEALTHCARE PROVIDERS)

1.1.1 Section 1 – Questions 1-19

Section 1 of the MDS² form contains information on the type of data maintained / transmitted by the device, how the data is maintained / transmitted, and other security-related features incorporated in the device, as appropriate. The field "Other Security Considerations" allows the manufacturer to add some general security considerations.

PLEASE BE ADVISED—An indication of a device's ability to perform any listed function (i.e., a "Yes" answer) is not an implicit or explicit endorsement or authorization by the manufacturer to configure the device or cause the device to perform those listed functions.

It is important to distinguish between capability and permission. The questions contained on the MDS² form refer to device capability. Permission is a contractual matter separate from the MDS² form and is not covered by the MDS² form. Making changes to a device without explicit manufacturer authorization may have significant contractual, regulatory and liability issues.

1.1.2 Section 2 – Explanatory notes

The optional section 2 of the MDS² form contains space for explanatory notes if the manufacturer needs more space to explain specific details to the answers on questions 1-19.

NOTE—Agfa HealthCare may elect to attach supplementary material if additional space for recommended practices or explanatory notes is necessary.

1.2 THE ROLE OF HEALTHCARE PROVIDERS IN THE SECURITY MANAGEMENT PROCESS

It is the obligation of the users of the MDS² form (e.g., the healthcare provider) to employ all necessary and appropriate safeguards to meet their regulatory and organizational requirements. The MDS² document is intended to assist healthcare providers in meeting their regulatory obligations regarding device security. The healthcare provider organization (e.g., a hospital) has the ultimate responsibility for providing effective security management. Agfa HealthCare can assist providers in their security management programs by offering information describing:

- the type of data maintained / transmitted by the manufacturer's product;
- how data is maintained / transmitted by the manufacturer's product;
- any security-related features incorporated in the manufacturer's product.

In order to effectively manage medical information security and comply with relevant regulations, healthcare providers must employ ADMINISTRATIVE, PHYSICAL and TECHNICAL SAFEGUARDS—most of which are extrinsic to the actual device

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1.3 DEFINITIONS

Administrative Safeguards: Administrative actions, policies, and procedures to manage the selection, development, implementation, and maintenance of security measures to protect electronic Protected Health Information and to manage the conduct of the covered entity's workforce in relation to the protection of that information. [45 CFR Part 164]

Anti-Virus Software: See VIRUS SCANNER

Audit trail: Data collected and potentially used to facilitate a security audit [45 CFR Part 142]

Biometric ID: A biometric identification system identifies a human from a measurement of a physical feature or repeatable action of the individual (e.g., hand geometry, retinal scan, iris scan, fingerprint patterns, facial characteristics, DNA sequence characteristics, voice prints, handwritten signature). [45 CFR Part 142]

Electronic Media: (1) Electronic storage media, including memory devices in computers (hard drives) and any removable/transportable digital memory media, such as magnetic tapes or disks, optical disks, or digital memory cards. (2) Transmission media used to exchange information already in electronic storage media, including, for example, the Internet (wide open), extranet (using Internet technology to link a business with information accessible only to collaborating parties), leased lines, dial-up lines, and private networks, and the physical movement of removable/transportable electronic storage media. Certain transmissions, including of paper via facsimile and of voice via telephone, are not considered to be transmissions via electronic media because the information being exchanged did not exist in electronic form before the transmission. [45 CFR Part 160.103]

Electronic Protected Health Information (ePHI): individually identifiable health information (IIHI) that is (1) transmitted by or (2) maintained in electronic media. [45 CFR Part 160.103]

Individually Identifiable Health Information (IIHI): Individually identifiable health information is information that is a subset of health information, including demographic information collected from an individual, and: (1) Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and (2) Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and (i) That identifies the individual; or (ii) With respect to which there is a reasonable basis to believe the information can be used to identify the individual. [45 CFR Part 160.103].

Personal Identification Number (PIN): A number or code assigned to an individual and used to provide verification of identity. [45 CFR Part 142]

Physical Safeguards: The physical measures, policies, and procedures to protect a covered entity's electronic information systems and related buildings and equipment from natural and environmental hazards and unauthorized intrusion. [45 CFR Part 164]

Remote Service: A support service (e.g., testing, diagnostics, software upgrades) while not physically or directly connected to the device (e.g., remote access via modem, network, Internet).

Removable Media: See ELECTRONIC MEDIA



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Security Risk Analysis: Conducting an accurate and thorough assessment of the potential risks and vulnerabilities to the integrity, availability, and confidentiality of electronic protected health information. [45 CFR Part 164]

Security Risk Management: (1) The ongoing process of assessing risk, taking steps to reduce risk to an acceptable level, and maintaining that level of risk. [NIST SP 800-26] (2) Security measures sufficient to reduce risks and vulnerabilities to a reasonable and appropriate level. [45 CFR Part 164]

Technical Safeguards: The technology, policies, and procedures to protect electronic Protected Health Information and control access to it. [45 CFR Part 164]

Token: A physical authentication device that the user carries (e.g., smartcard, SecureIDtm, etc.). Often combined with a PIN to provide a two-factor authentication method that is generally thought of as superior to simple password authentication.

Virus: In general, computer code that is either:

- (1) A type of programmed threat—a code fragment (not an independent program) that reproduces by attaching to another program. It may damage data directly, or it may degrade system performance by taking over system resources, which are then not available to authorized users.
- (2) Code embedded within a program that causes a copy of itself to be inserted in one or more other programs; in addition to propagation, the virus usually performs some unwanted function. [45 CFR Part 164]

Virus scanner: A computer program ("ANTI-VIRUS SOFTWARE") that detects a VIRUS computer program, or other kind of malware (e.g., worms and Trojans), warns of its presence, and attempts to prevent it from affecting the protected computer. Malware often results in undesired side effects generally unanticipated by the user.)

Vulnerability: A flaw or weakness in system procedures, design, implementation, or internal controls that could be exercised (accidentally triggered or intentionally exploited) and result in a security breach or a violation of the system's security policy. [NIST SP 800-30]

ARCRONYMS

CD: Compact Disk

CF: Compact Flash

DVD: Digital Versatile Disk

IP: Internet Protocol

LAN: Local Area Network

ROM: Read Only Memory



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SD: Secure Digital

USB: Universal Serial Bus

VPN: Virtual Private Network

WAN: Wide Area Network

WiFi: Wireless Fidelity



Section 2 MDS² FORM



Manufacturer Disclosure Statement for Medical Device Security - MDS ²							
Device Category [†] Non Medical device software		Manufacturer [†] Agfa HealthCare		Document ID 8433746		Document Release Date April 2010	
Device Model IMPAX		Software Revision 5.2		Software Release Date:		ecember 2004	
Manufacturer or Representative	Name Alex Reis		Title Product Architecture Site Lead		Departm	Department R&D	
Contact Information:	Company Name Agfa HealthCare		Telephone # 519 746 6210 x2369		e-mail alex.reis@agfa.com		
MANAGEMENT OF ELECTRONIC PROTECTED HEALTH INFORMATION (e 1. Can this device transmit or maintain electronic Protected Health In 2. Types of ePHI data elements that can be maintained by the device a. Demographic (e.g., name, address, location, unique identifica b. Medical record (e.g., medical record #, account #, test or tre c. Diagnostic/therapeutic (e.g., photo/radiograph, test results, of d. Open, unstructured text entered by device user/operator? 3. Maintaining ePHI: Can the device a. Maintain ePHI temporarily in volatile memory (i.e., until clear b. Store ePHI persistently on local media?			formation (ePHI) tion number)? atment date, dev or physiologic data ed on by power-o : Can the device disk, DVD, CD-ROI onnection (e.g., IE	ice identification a with identifying off or reset)? M, tape, CF/SD ca EE 1073, serial por tt, Internet)?	number) g characte g characte		
ADMINISTRATIVE SAFEGUARDS 5. Does manufacturer offer operator and technical support training or documentation on device security features?Yes 6. What underlying operating system(s) (including version number) are used by the device? Windows/Solaris							
Client: Window	s XP, IMPAX Server:	Windows 2000/2003, Solaris 9					
PHYSICAL SAFEGUARDS 7. Are all device components maintaining ePHI (other than removable media) physically secure (i.e., cannot remove without tools)? Yes_ 8. Does the device have an integral data backup capability (i.e., backup onto removable media such as tape, disk)?							
11. Can the device a. Can the d b. Can the d c. Can secur 12. Level of owner, a. Apply dev	r hardware not autho be serviced remotely evice restrict remote evice log provide an a ity patches or other s operator service accorice manufacturer-val	rized by the device manufactur (i.e., maintenance activities performances activities or nead trail of remote-service acts oftware be installed remotely? The session device operating system idated security patches?	med by service persetwork locations (civity?	son via network or re.g., specific IP a	remote cor addresse	nnection)?Yes s)?Yes Yes Yes	

DOCUMENT CONTROL NOTE:



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13.	d. (Update virus definitions on manufacturer-installed antivirus software?	Yes
14.	Are ac Events a. I	ccess sessions terminated after a predetermined length of inactivity (e.g., auto logoff)?s recorded in device audit log (e.g., user, date/time, action taken): Can the audit log record Login and logout by users/operators?	Yes
1.6	c. (d.]	Viewing of ePHI?	Yes Yes
17.	Can th	the device incorporate an emergency access ("break-glass") feature that logs each instance of use? he device maintain ePHI (e.g., by internal battery) during power service interruptions? ols when exchanging ePHI with other devices:	
	b. I c. I	Transmitted only via a physically secure connection (e.g., dedicated cable)? Encrypted prior to transmission via a network or removable media?	No Optional
19.	Does	the device ensure the integrity of the ePHI data with implicit or explicit error detection/correction technology?	Yes



 $^{^\}dagger$ Recommend use of ECRI's Universal Medical Device Nomenclature System (UMDNS).

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2.1.1 RECOMMENDED SECURITY PRACTICES

Performance the following system hardening procedures:

- Verify System Operation Prior to Hardening
- Backup Procedure Prior to Hardening
- Procedure For Back out Purposes Only
- Perform Database Hardening Procedures
- Manually complete remaining lockdown of script tasks
- Perform Operating System Hardening Procedure
- Perform Internet Information Server Hardening Procedure

PASSWORD MANAGEMENT

- Configure password protection on the classes/admin directory

ACCESS CONTROL

- Configure to auto logoff user





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EXPLANATORY NOTES (from questions 1 – 19): IMPORTANT: Refer to <u>Instructions for the Manufacturers Disclosure Statement for Medical Device Security</u> for the proper interpretation of information provided in this form.
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