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Health informatics - Audit trails for electronic health records (ISO 27789:2021)

Táto norma obsahuje anglickú verziu európskej normy.  
This standard includes the English version of the European Standard.

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**Health informatics - Audit trails for electronic health  
records (ISO 27789:2021)**

Informatique de santé - Historique d'expertise des  
dossiers de santé informatisés (ISO 27789:2021)

Medizinische Informatik - Audit-Trails für  
elektronische Gesundheitsakten (ISO 27789:2021)

This European Standard was approved by CEN on 15 August 2021.

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**CEN-CENELEC Management Centre: Rue de la Science 23, B-1040 Brussels**

**EN ISO 27789:2021 (E)**

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## **European foreword**

This document (EN ISO 27789:2021) has been prepared by Technical Committee ISO/TC 215 "Health informatics" in collaboration with Technical Committee CEN/TC 251 "Health informatics" the secretariat of which is held by NEN.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by April 2022, and conflicting national standards shall be withdrawn at the latest by April 2022.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN shall not be held responsible for identifying any or all such patent rights.

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## Health informatics — Audit trails for electronic health records

*Informatique de santé — Historique d'expertise des dossiers de santé  
informatisés*



Reference number  
ISO 27789:2021(E)

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## Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see [www.iso.org/directives](http://www.iso.org/directives)).

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see [www.iso.org/patents](http://www.iso.org/patents)).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation of the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT), see [www.iso.org/iso/foreword.html](http://www.iso.org/iso/foreword.html).

This document was prepared by Technical Committee ISO/TC 215, *Health informatics*, in collaboration with the European Committee for Standardization (CEN) Technical Committee CEN/TC 251, *Health informatics*, in accordance with the Agreement on technical cooperation between ISO and CEN (Vienna Agreement).

This second edition cancels and replaces the first edition (ISO 27789: 2013), which has been technically revised.

The main changes are as follows:

- harmonization between audit record format and DICOM format;
- review of the content in [Annex A](#);
- review of the chart in [Annex B](#);
- bibliography update.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at [www.iso.org/members.html](http://www.iso.org/members.html).

# ISO 27789:2021(E)

## Introduction

### 0.1 General

Personal health information is regarded by many as among the most confidential of all types of personal information and protecting its confidentiality is essential to maintain the privacy of subjects of care. In order to protect the consistency of health information, it is also important that its entire life cycle be fully auditable. Health records should be created, processed and managed in ways that guarantee the integrity and confidentiality of their contents and that support legitimate control by subjects of care in how the records are created, used and maintained.

Trust in electronic health records requires physical and technical security elements along with data integrity elements. Among the most important of all security requirements to protect personal health information and the integrity of records are those relating to audit and logging. These help to ensure accountability for subjects of care who entrust their information to electronic health record (EHR) systems. They also help to protect record integrity, as they provide a strong incentive to users of such systems to conform to organizational policies on the use of these systems.

Effective audit and logging can help to uncover misuse of EHR systems or EHR data and can help organisations and subjects of care obtain redress against users abusing their access privileges. For auditing to be effective, it is necessary that audit trails contain sufficient information to address a wide variety of circumstances (see [Annex A](#)).

Audit logs are complementary to access controls. The audit logs provide a means to assess conformity with organizational access policy and can contribute to improving and refining the policy itself. But as such a policy needs to anticipate the occurrence of unforeseen or emergency cases, analysis of the audit logs becomes the primary means of ensuring access control for those cases.

This document is strictly limited in scope to logging of events. Changes to data values in fields of an EHR are presumed to be recorded in the EHR database system itself and not in the audit log. It is presumed that the EHR system itself contains both the previous and updated values of every field. This is consistent with contemporary point-in-time database architectures. The audit log itself is presumed to contain no personal health information other than identifiers and links to the record.

Electronic health records on an individual person can reside in many different information systems within and across organisational or even jurisdictional boundaries. To keep track of all actions that involve records on a particular subject of care, a common framework is a prerequisite. This document provides such a framework. To support audit trails across distinct domains, it is essential to include references in this framework to the policies that specify the requirements within the domain, such as access control rules and retention periods. Domain policies may be referenced implicitly by identification of the audit log source.

### 0.2 Benefits of using this document

Standardization of audit trails on access to electronic health records aims at two goals:

- ensuring that information captured in an audit log is sufficient to clearly reconstruct a detailed chronology of the events that have shaped the content of an electronic health record;
- ensuring that an audit trail of actions relating to a subject of care's record can be reliably followed, even across organizational domains.

This document is intended for those responsible for overseeing health information security or privacy and for healthcare organizations and other custodians of health information seeking guidance on audit trails, together with their security advisors, consultants, auditors, vendors and third-party service providers.

### 0.3 Related standards on electronic health record audit trails

This document builds upon, and is consistent with, the work begun in RFC 3881 with respect to access to the EHR. This document also builds upon and is consistent with the content in ISO/TS 21089:2018.

# Health informatics — Audit trails for electronic health records

## 1 Scope

This document specifies a common framework for audit trails for electronic health records (EHR), in terms of audit trigger events and audit data, to keep the complete set of personal health information auditable across information systems and domains.

It is applicable to systems processing personal health information that create a secure audit record each time a user reads, creates, updates, or archives personal health information via the system.

**NOTE** Such audit records at a minimum uniquely identify the user, uniquely identify the subject of care, identify the function performed by the user (record creation, read, update, etc.), and record the date and time at which the function was performed.

This document covers only actions performed on the EHR, which are governed by the access policy for the domain where the electronic health record resides. It does not deal with any personal health information from the electronic health record, other than identifiers, the audit record only containing links to EHR segments as defined by the governing access policy.

It does not cover the specification and use of audit logs for system management and system security purposes, such as the detection of performance problems, application flaw, or support for a reconstruction of data, which are dealt with by general computer security standards such as ISO/IEC 15408 (all parts)<sup>[9]</sup>.

[Annex A](#) gives examples of audit scenarios. [Annex B](#) gives an overview of audit log services.

## 2 Normative references

The following documents are referred to in the text in such a way that some or all of their content constitutes requirements of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO 27799:2016, *Health informatics — Information security management in health using ISO/IEC 27002*

ISO 8601-1, *Date and time — Representations for information interchange — Part 1: Basic rules*

ISO/TS 21089:2018, *Health informatics — Trusted end-to-end information flows*

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