Guidance for Working with De-Identified Data

# General Resources

OHSU Policy defines De-Identified Health Information as “OHSU Health Information that does not identify an individual and with respect to which there is no reasonable basis to believe that the information can be used to identify an individual.”

OHSU Information: ​​​​​​​​​​​​​​​​​​​​​

* [OHSU Policy](https://o2.ohsu.edu/policies-and-compliance/ohsu-policy-manual/chapter-1-administration/ohsu-policy-01-05-017.cfm)
* [HIPAA Identifiers](https://o2.ohsu.edu/information-technology-group/information-privacy-security-ips/privacy/hipaa-and-research.cfm#_deide)

# Methodology

# The OHSU IRB does not require any specific method.  The [DHHS methods guide](http://www.hhs.gov/hipaa/for-professionals/privacy/special-topics/de-identification/index.html) outlines:

# expert determination

# and

# the safe harbor method

# The DHHS methods guide also states that scholarly articles on methods to re-identify data do not constitute “actual knowledge” of the ability to re-identify information.

# Where to find resources?

Internal Resources, specific to OHSU can be found at the Research Data Website [here](https://ohsuitg.sharepoint.com/sites/CT.Research-Data2/SitePages/De-Identified-Data.aspx). If you have questions about synthetic data or statistical methods to de-identify data, please reach out to [researchdata@ohsu.edu](mailto:researchdata@ohsu.edu) to be connected to groups doing this work at OHSU.