

Wk3 CER: Bioethics: imaging and privacy

Your goal: Debate whether a patient's medical images and anatomy maps should be shared for teaching, then post a CER.

One product: One-paragraph CER on whether patient imaging data should be shared for teaching without renewed consent.

Question: When should a hospital ask again before using patient images for teaching?

Start the work

A location statement needs a shared frame and a named reference.

1. Read the definitions and complete W1 using only five category names.
2. Read E1-E4 and S1; list two proposed benefits and two possible risks.
3. Use the worked argument and an actual counterpoint or C1 to plan your position.
4. Write a CER using E1, E4 and a concrete S1 benefit.
5. Post to the teacher's class board and save a screenshot of your own post for the evidence packet. If access fails, keep your file and tell the teacher.

If the board or assignment is unavailable, save the CER and tell the teacher what is blocking access. When access works, post the CER, save a screenshot of your own post and check that Schoology shows Submitted. Use C1 for the independent argument work; still follow the posting requirement.

Words you will use

de-identification

Meeting the applicable standard for information that does not identify a person.

identifier

A detail that can point to a person, alone or with other information.

Safe Harbor

One HIPAA de-identification method described in E4.

Expert Determination

The other HIPAA de-identification method described in E4.

re-identification

Linking information back to a person.

rare anatomy

An uncommon body feature; uncommon does not automatically mean identifying.

medical image

A picture made to examine structures inside the body.

anatomy

Body structure and the study of that structure.

privacy

Control and protection of personal information.

identifiable

Able to be linked to a particular person.

consent

Agreement; its meaning depends on the situation.

authorization

A specific permission document required for some uses of protected health information.

HIPAA

A United States law with rules that protect certain health information.

covered entity

An organization or provider to which the relevant HIPAA rules apply.

health care operations

Activities that support care, including some supervised professional training.

safeguard

A measure intended to reduce a risk.

CER

Claim, evidence, and reasoning.

counterargument

A serious reason against your claim.

W1: five-item identification warmup

Use only these category names, never your actual items: report card, selfie, fingerprint, name tag, X-ray. Sort each into “could identify me” or “could not,” and give a reason. State what you assume each item shows, then decide. This is an identification-risk exercise, not a finding that every item is covered by HIPAA.

E1: what an image can contribute

MedlinePlus explains that X-rays create pictures of bones and organs. Different tissues appear differently because they absorb radiation differently. Providers use these images to investigate problems and check treatment.

This supports a possible teaching use: examining how structure appears in an image. It does not prove that a particular class learns more from a real image.

E2: supervised training has a specific context

HHS explains that certain supervised training of health professionals can count as health care operations. Covered entities can set policies allowing trainees access under the applicable rules.

This guidance concerns that training context. It does not automatically authorize a public website, a high-school classroom, or every use called teaching.

E3: consent and authorization differ

HHS distinguishes voluntary consent for certain permitted uses from authorization required for uses not otherwise allowed by the Privacy Rule. The purpose and recipient matter.

Do not turn this into “fresh consent is always required” or “teaching is always allowed.” This lesson does not determine whether a real disclosure is legal.

E4: HIPAA de-identification rule

HHS describes two HIPAA methods. Safe Harbor removes all specified identifier categories and requires no actual knowledge that remaining information can identify someone. Expert Determination uses a qualified expert’s documented finding of very small identification risk with reasonably available information. Removing a name alone is insufficient. De-identified information falls outside the Privacy Rule’s restrictions, but identification risk is not zero. This summary does not certify an image.

S1: fictional hospital teaching proposal

A fictional hospital proposes reusing a set of patient images in supervised training for its own health-care trainees. Its privacy staff would review the permitted use before any access. There would be no public posting.

The training goals are to compare how structures appear and to discuss why a single image may leave questions unanswered. These are proposed benefits, not measured learning gains.

The proposal includes a risk: a trainee might copy material beyond the approved group. Another concern is that a patient may not expect a later teaching use. These are possible harms, not reports of events.

The hospital proposes access controls, a no-copy rule and discussion of patient expectations. It has not supplied an evaluation showing how well those safeguards work.

Should this program ask patients again before each teaching reuse? Recommend a policy for S1, explaining your conditions. You may support asking each time, support bounded reuse, or request specific missing information.

C1: independent opposing points

If you support reuse, consider this objection: review and rules may not prevent copying or address a patient's expectations.

If you oppose reuse, consider this objection: requiring new permission for every session could restrict a carefully controlled teaching use.

If you would wait, consider this objection: a policy must eventually identify what evidence is enough to decide.

Choose the challenge that fits your claim. Use these supplied points if working alone. No patient story, scan, partner, visitor, or public statement is required.

Official work remains separate

This original task completes the supplied imaging-and-privacy argument practice. It does not complete Activity 1.1.3 Held Together by a Thread. Your teacher will give the official tissue task separately.

Do not upload a real scan or try to remove identifying details from one for this lesson. All required information is in the source cards and fictional proposal.

Optional extension: rare anatomy

Suppose an otherwise de-identified scan has a rare feature that someone could connect to a known person. Propose an additional review rule that preserves teaching value. E4 shows why deleting a name cannot settle every identification concern. This is hypothetical; do not find or identify a real person.

Worked example: sharing a fictional practice diagram

A tutor made an original diagram with no personal information. The learning task asks which plane divides left and right. The tutor proposes showing the diagram to a study group.

Claim: Show this diagram to the group. Evidence: It is an original diagram with no personal information, and it represents the task's structure. Reasoning: It can support the stated practice without exposing a person's record.

Counterargument: A simplified diagram may omit detail. Response: Name that limit and use it only for the plane question.

This example supplies an argument pattern. S1 has different privacy facts, so its conclusion must be defended separately.

Try the decision

E2 describes certain supervised professional training. S1 has a proposed restricted training use but no measured safeguard results. Which statement stays within the evidence?

- The purpose and audience matter; S1 needs a bounded policy and review of its safeguards.
- Every teaching use is permitted, including public posting and any classroom.
- Proposing a no-copy rule proves that this safeguard prevents all disclosure.

Explain your choice using the reading. Discuss it or say it to yourself. This practice does not add another submission.

Your 80-minute flow

0–5 minutes	Sort the five named item categories and note the uncertain X-ray context.
5–20 minutes	Read the definitions and E1-E4; distinguish de-identification from permission.
20–35 minutes	Locate claim, evidence, reasoning and objection.
35–48 minutes	Write two benefits and two risks.
48–60 minutes	Write the opposing point and response.
60–75 minutes	Write and revise the CER using E1, E4 and one proposed benefit; post if the board is confirmed.
75–80 minutes	Capture your own post for the evidence packet. If access fails, save the work and tell the teacher.

Your response record

Use these labels on paper or in your document. The space below also works when this page is printed.

Five-item identification sort

Complete W1 for all five category names, with one reason for each. For the X-ray, name information that would affect your judgment.

Do not upload, draw or describe a real personal item. “Could identify” concerns possibility; it does not mean every instance identifies someone.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.

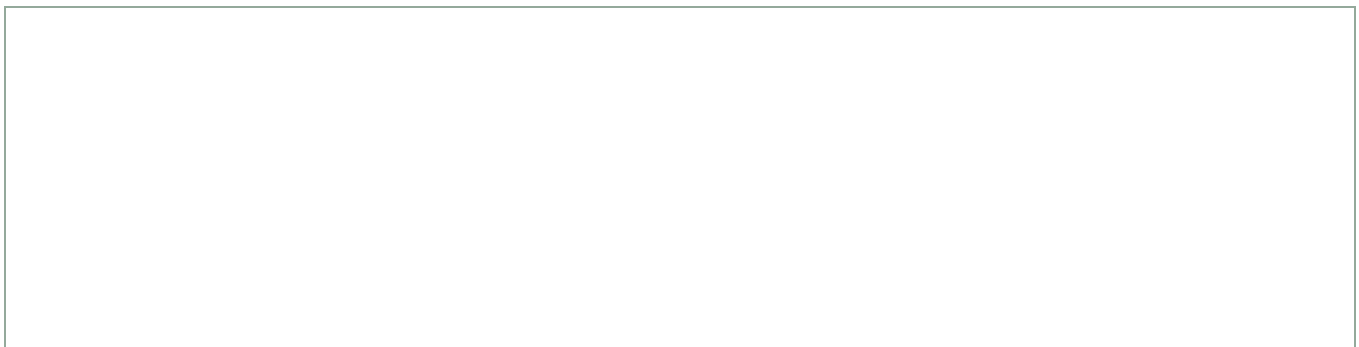


Two benefits and two risks

List two proposed teaching benefits and two possible privacy harms from S1. Mark each as a proposal or risk, not a measured result.

Use four separate lines. E1 explains how images can carry anatomical information.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.



Policy claim and evidence

State whether S1 should ask again for each reuse, use a bounded policy, or wait for named information. Use E1's MedlinePlus fact, E4's HIPAA rule and one concrete proposed teaching benefit from S1.

Explain the purpose, audience and conditions. Do not infer permission for a public or high-school use from E2.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.

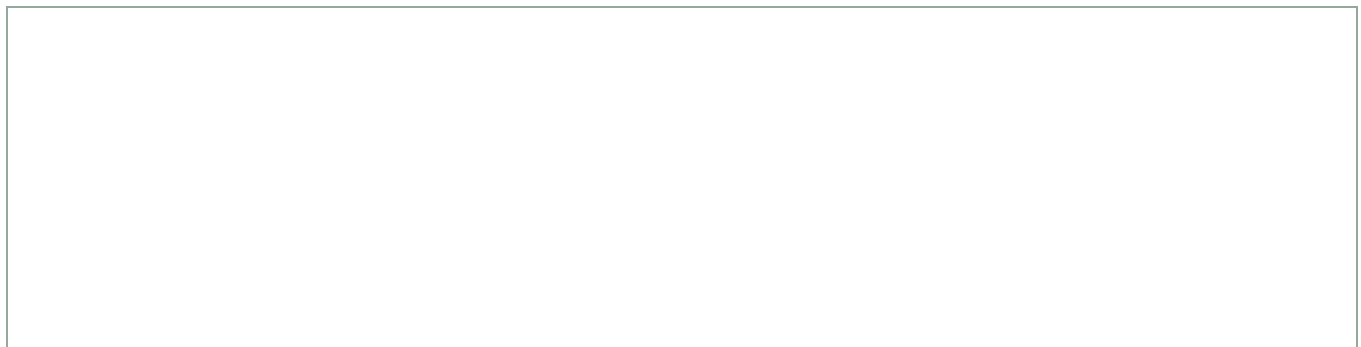


Opposing point and response

Record a strong objection and answer it fairly.

Use the strongest actual group point if available. Otherwise label a supplied C1 objection as an independent counterpoint; do not invent attendance or peer speech.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.



One CER paragraph

Write one CER paragraph on teaching reuse without renewed consent. Include E1, E4, a concrete proposed benefit, reasoning, and your strongest opposing point with a response.

State remaining uncertainty. Post to the teacher-confirmed board and capture your own post for the evidence packet. If access is unavailable, save the paragraph and ask the teacher for help. Capture your own post after you can open the board.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.

Check your product

- Identify two benefits and two risks from the proposal.
- Use E1's MedlinePlus fact, E4's HIPAA rule and a concrete S1 benefit accurately.
- Explain a bounded policy rather than a universal consent rule.
- Answer an opposing point and acknowledge missing evidence.
- Complete all five W1 items without providing personal records.
- Post the CER and save a screenshot of your own post when the board is available; otherwise save the CER and tell the teacher.

Keep the limit: Recommend a policy for the fictional proposal. This discussion cannot grant legal permission, establish measured outcomes, authorize disclosure of real records, or complete an official PLTW task.

Turn in your work

Post the CER to the class board identified by Mr. Mendoza and capture a screenshot of your own post for the evidence packet. Use Wk3 CER: Bioethics: imaging and privacy in your HBS section as directed; do not create another submission.

If the board or assignment is unavailable, save the CER and tell the teacher what is blocking access. When access works, post the CER, save a screenshot of your own post and check that Schoology shows Submitted. Use C1 for the independent argument work; still follow the posting requirement.

[Section 1292: Wk3 CER: Bioethics: imaging and privacy](#)

[Section 6792: Wk3 CER: Bioethics: imaging and privacy](#)

Carry forward

Name the teaching purpose, the audience, and the privacy conditions before defending reuse.

Use precise plane and cavity terms to describe what an image shows without claiming more than it supports. Which plane and cavity terms describe the structures shown in an image?

Sources and resources

[Open today's page](#)

medlineplus-xray · X-Rays

MedlinePlus, National Library of Medicine

<https://medlineplus.gov/xrays.html>

hhs-training · Medical trainees and access to patient information

HHS

<https://www.hhs.gov/hipaa/for-professionals/faq/does-minimum-necessary-allow-students-to-access-patient-information/index.html>

hhs-authorization · Difference between consent and authorization

HHS

<https://www.hhs.gov/hipaa/for-professionals/faq/what-is-the-difference-between-consent-and-authorization/index.html>

hhs-deidentification · Guidance Regarding Methods for De-identification of Protected Health Information

HHS Office for Civil Rights

<https://www.hhs.gov/hipaa/for-professionals/special-topics/de-identification/index.html>