

Communications via SMS Text Message

The Medical Council's Guide to Professional Conduct and Ethics for Registered Medical Practitioners, 9th Edition, 2024¹ (available on the Medical Council website) provides clear guidelines in relation to maintaining patient confidentiality. This guidance should always be adhered to when communicating with patients. A doctor should protect a patient's privacy and ensure that patient information in their control is protected against improper disclosure, access or loss.

Paragraph 31.4 of the Medical Council guide also advises that

"You should be aware of security when sharing information by electronic means, including text, other electronic messaging or emailing, and you should take all reasonable measures to protect confidentiality."

Under Data Protection legislation, persons are required to register details with the Data Protection Commissioner if they process data relating to the physical or mental health of identifiable individuals. Doctors are data controllers in relation to their patients' medical records. Registration can be completed online on the website of the Office of the Data Protection Commissioner. Further guidance on data protection is available from the ICGP website.

Patient confidentiality

Doctors are responsible for processing data about their patients and must ensure adequate security measures are in place before sensitive personal information is processed. While sending text messages to patients may seem like an efficient and convenient means of communication, difficulties may arise if the message is read by anyone other than the intended recipient or if the patient's telephone number has changed.

Many practices utilise text messaging for non-clinical purposes, such as appointment reminders or billing notifications to patients. Clinical staff may decide to use text messaging to inform patients that their test results have been returned to the practice. Sensitive clinical information however should never be communicated via text message. Clinical judgement is required to assess the risk of text messages being sent to a patient and the impact it would have on the patient if such information were misused. It is also advisable not to give the patient's full name or identifiers in the body of the text message; if the message is delivered to the incorrect phone number, the person receiving it does not know who the message was intended for. However, you may consider using the patient's first name to personalise the message.

As with all patient communications, it is strongly recommended that you include details of all text messages in the patient's clinical file. Most GP IT software systems facilitate the direct sending of text messages from the patient file, thereby incorporating the text message as part of the medical record. It is not recommended to send a text message to a patient from a GP's personal or practice mobile phone.

Patient consent

Patients have a right to decide how, to what extent and to whom their health information is disclosed. It is therefore essential to obtain patient consent prior to sending any communication via text message. Consent should be explicit, verbal, and/or written. The consent process should include a discussion regarding the purpose of text messaging and what the content of the text message is likely to include.

The provision of a mobile phone number should not be seen as consent from the patient to receive text messages. The patient's consent or refusal to receive text messages should be clearly recorded in the patient's clinical file. It may be convenient to obtain such consent as part of the registration process when a patient first registers at the practice.

Texting should only occur when patients understand the potential benefits and risks of text messaging. They will then have the opportunity to make a decision, based on their personal circumstances, as to whether they wish to receive such messages. Consent to text messages does not require renewal unless the purpose of texting changes. If a patient gives consent, they should be advised to inform the practice of any changes to their telephone contact details.

Considerations when sending text messages to patients:

The need to obtain consent and protect confidentiality are foremost when texting patients.

The ICGP, *Text Messaging in Irish General Practice: Quick Reference Guide (2018)*² sets out four key challenges of text messaging, referred to as the four Cs:

1. Consent

Has consent been obtained to communicate by text message? As noted above, consent should be explicit, verbal and/or written, and obtained prior to sending a text message. It is not acceptable to have an 'opt out' policy. As stated in the ICGP Guide, the Data Protection Commissioner advised that consent for texting, once obtained, does not require renewal, unless the purpose of texting changes. Clinicians should occasionally check that patients remain willing to receive text messages, and that the patient's mobile number is correct. Consent should include a discussion of the likely content of text messages. The patient's consent or refusal should be clearly recorded on their file.

2. Confidentiality

Text messaging is inherently insecure: texts are transmitted on a public network and may be read by others, even on a locked smartphone. Clinicians should always be mindful that third parties may read the text message and that messages left on answering machines may be heard by others. The ICGP Guide advises that you should never use both a patient's first and surname in a text message, and that clinicians should double-check contact numbers for patients on every occasion it is anticipated that information may be texted to the patient.

3. Children and Young Adults

Children have the right to confidentiality, (although not absolute) and for example, a 16-year-old may not want his / her parents to know that he/she has an appointment at the practice.

The ICGP guidance states: *"In general, text messages should not be sent to children under 16 years of age. Young people, aged 16 and 17 years of age, may consent to receive text messages. It is especially important to verify their phone number, as young people may frequently change mobile, or use a parent's number. Carefully consider the content of text messages to young people, with whom inadvertent breach of confidentiality may easily arise, if friends or parents access their phone."*

4. Content

As mentioned above, you should discuss with your patient what information may be transmitted by text message, for example, appointment reminders, normal test results; 'Appointment Reminder' text messages

should be sent a few days in advance of the appointment.

Text messages to patients should be of limited length and contain a minimal amount of detail to avoid disclosing too much information to a third party, who may see the text message. For example, you may identify yourself, or the practice, e.g. “*Good morning Joe, your recent test results are normal, Dr Mary, Main Street Practice.*” provided that this does not give clues as to the patient’s clinical condition.

The ICGP Guide also states that text messages should not contain sensitive information. It is unsafe to rely solely on text messages to communicate urgent or important clinical information. There is no guarantee the text message has arrived. For the avoidance of doubt: texting alone is potentially unsafe for urgent or important matters but may be a useful adjunct to contact a patient.

Remember that text messaging in this context is a professional communication, hence ‘text-speak’ should be avoided; text messages are an important part of the clinical record, and should be embedded in it and consequently, you should avoid sending text messages to patients from your personal mobile phone.

Other considerations include:

- **Has the message been sent to the patient’s correct mobile number?**

Patient details should regularly be checked and updated. When ordering patient investigations, it is an ideal opportunity to confirm that the patient’s contact details are correct, particularly when proposing to contact the patient about the results via text message.

You may also consider advising patients to keep their contact details up to date by displaying a poster in your waiting room. An example of such a poster is available on the [Medisec website](#) or by contacting Medisec directly.

- **No confirmation of receipt.**

It is also worth remembering that on occasion text messages may not be sent or may not deliver; you should check whether your IT provider provides such notification in respect of unsent/undelivered messages.

Practice policy

Doctors should discuss, agree and implement a robust practice policy for communicating with patients by text message. Any policy should address the four key challenges of text messaging as set out in the ICGP Guidance Document mentioned above. A helpful template “*Text Messaging Policy*” is attached in the ‘Appendix’ of the ICGP guidance document.

Please do not hesitate to contact Medisec if you have any queries regarding the above.

References

1. Irish Medical Council, *Guide to Professional Conduct and Ethics* 9th Edition (2024):[guide-to-professional-conduct-and-ethics-for-registered-medical-practitioners-2024.pdf](#)
2. Irish College of General Practitioners, Quinlan, D. *Text Messaging in Irish General Practice* (2018): Available on the ICGP website

The contents of this publication are indicative of current developments and contain guidance on general medico legal queries. It does not constitute and should not be relied upon as definitive legal, clinical or other advice and if you have any specific queries, please contact Medisec for advice.

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