

State of California—Health and Human Services Agency California Department of Public Health



SCREENING INFORMATION SYSTEM (SIS) NEW HEALTH CARE PROVIDER ACCOUNT

User Informa	ation				
Facility Code:	Facility Name:				
First Name:	Date:				
Last Name:					
Title:					
Work No:					
Work email address	SS:				
Department:					
Supervisor Name:	isor Name: Phone No.				
Facility Locar	tion				
Address: (Number, Street)	Apt/Suite#:				
City:	Zip Code:				
Department use on	ly				
Security Group	GDB NBS-Health Care Provider Entity Type Person				
Assigned Logon ID):				



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CONFIDENTIAL OATH FOR NEW SIS USERS

To be given access to SIS (Screening Information System), you must read the Oath of Confidentiality below, sign and return it.

SIS Oath of Confidentiality

I have been informed and understand that I will be handling documents and data provided by the California Department of Public Health under assurance of confidentiality to the clients to which the documents and data pertain, and to their health care providers as expressed in the privacy policies published by the Genetic Disease Screening Program.

I agree that I shall not discuss, share or otherwise communicate to any unauthorized person any confidential information including the individual case records or reports without the prior specific written permission of the Chief of the Genetic Disease Screening Program and shall be bound by the privacy policies of the Genetic Disease Screening Program, and applicable state and federal law.

I will keep all confidential material in my possession in a secure manner. I will not discard any confidential material, but will dispose of it by shredding.

I have read the information provided in the following documents:

California Government Code Section 6250, et. Seq., (California Public Records Act) – http://www.leginfo.ca.gov/cgi-bin/displaycode?section=gov&group=06001-07000&file=6250-6270

California Civil Code, Division 3, Part 4, Title 1.8, Sections 1798-1798.65. (Information Practices Act of 1977) – http://www.dwt.com/files/Uploads/Documents/Publications/California%20Security%20Breach.pdf

California Health and Safety Code, Division 104, Part 5, Chapter 1. (Hereditary Disorder Act) – http://www.leginfo.ca.gov/cgi-bin/displaycode?section=hsc&group=109001-110000&file=109875-110040

Genetic Disease Screening Program Privacy Policy – http://cdphinternet/programs/GDSP/Documents/Privacy%20Policy.pdf

Name	Phone No	
Facility	Department	
Signature	Date	