

Department of Children's Services
INSTRUCTIONS FOR USE OF FORM
CS-0757

HIPAA Request for Restriction of Uses and Disclosures

Section A:

Clients are required to complete Section A if they are requesting restriction/limitation of the use and disclosure their PHI (Personal Health Information). Clients must specifically note the information they do not wish to be disclosed.

Section B

DCS employees must complete this section if they are approving or denying the request. If denying the request, the employee must provide a written explanation to the requestor. The DCS employee can both approve and deny requests in this section.

Additional Instructions

If a client's PHI restriction request is denied, DCS personnel must send a copy of the completed form to the requestor.