



City and County of San Francisco  
 Daniel Lurie Mayor  
 San Francisco Department of Public Health  
 Daniel Tsai, Director of Health

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## Specification Deviation Exception Request Form

Version: April 15, 2026

Use this form when requesting product, software, access to a non standard website, disabling equipment encryption, or any system that is not part of the SFDPH standard. There may be cases where your request increases the risk to SFDPH's Information Technology Security and/or patient's protected health information (PHI) so please complete this form in it's entirety and provide as much concise detail to aid the decision for approval.

### Section 1: Requestor Information

Name: \_\_\_\_\_ Division/Program: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Last Privacy Training Completion Date: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Supervisor Email Address: \_\_\_\_\_

### Section 2: Protected Health Information (PHI) Attestation

By signing this document, I attest that I will comply with all DPH Privacy and Data Security policies in relation to this request. I understand that it is against DPH policy to upload PHI to unapproved online storage services ("clouds"), and doing so will subject me to disciplinary action consistent with the severity of the action, which may include loss of privileges, termination of employment, and other actions as deemed appropriate by the joint determination of the Human Resources Department, the Information Security Office, or the CIO. If my job role or responsibilities change in a way that results in this spec deviation request no longer being needed, I will contact the IT Service Desk to cancel this request within five working days.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Section 3: Protected Health Information (PHI) Handling

Does this product, software or system involve handling PHI?    Yes, Please describe.    No, Go to Section 4

How will you minimize the risk associated with handling Protected Health Information?

**Section 4: Specification Deviation Product/Software/System Access**

Product/Software/System Access: \_\_\_\_\_

What does or will this Product/Software/System Access do?

What are you proposing that differs from SFDPH's standard methods?

**Section 5: Business Justification for Specification Deviation**

Please provide your business justification and why SFDPH's standard products, software, systems are not sufficient?

**Additional Remarks**

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**Section 6: Approvals (INTERNAL ONLY)**

The following approvals are required prior to purchase of product, software, system access or any specification deviation as applicable. Dates below are when the approval was granted:

Product / Equipment Approval

Customer Services Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Software / System Access Approval

Chief Information Security Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Data Sharing Officer: Signature: \_\_\_\_\_ Date: \_\_\_\_\_