eHealth Saskatchewan

REPORTING ACCESS REQUEST FORM

Use this form to request access to existing reports produced & published by eHealth Information & Analytic Services.

Call the Service Desk 1-888-316-7446 (local 306-337-0600) if you are unclear about any fields below.
The Service Desk will complete the request within five business days from receiving the request.
Return to: Fax Number: 306-781-8480 or **Email:** servicedesk@ehealthsask.ca

User Information

Type of Request (check one): ☐ New User   ☐ Change in User Access   ☐ Remove

User's Full Name Printed:		Work Phone #:
Working Title:		Email Address:
Facility Name:		Health Region:
Organization:		

Reporting Access Information (This section should be completed by the reporting program's authorized approver)

Does user have an existing myeHealth (IDM/LDAP) account?   ☐ Yes   ☐ No   ☐ I'm not sure

If Yes, please specify the user name assigned: _____

If No, please register at myeHealth for your account.

What report/project does the user require access to (i.e. SCI, CDM-QIP, MDS-LTC): _____

Delivery Platform: ☐ MicroStrategy   ☐ SharePoint

☐ Other _____   ☐ I'm not sure

Type of Access: ☐ View Reports   ☐ Create/Modify Reports*   ☐ UAT Testing*

Note: licensing costs may be incurred

Additional Notes (Please indicate any specific details to ensure your request can be completed in a timely manner)

Service Authorization (IMPORTANT: Obtain authorization prior to submitting requests to the Service Desk)

If you need the name of an authorized approver, please call the Service Desk 1-888-316-7446 (local 306-337-0600)

Authorized Approver's Information:

Name: _____   _____
(Please Print)   Work Phone Number:

Signature: _____   _____
Date (YY/MM/DD)

The most recent version of this form can be downloaded at: http://www.ehealthsask.ca/forms

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