



MDS LONG TERM CARE UAT TRAINING ACCOUNT REQUEST FORM

- ▶ Call the Service Desk 1-888-316-7446 (local 337-0600) if you are unclear about any fields below.
- ▶ Please fax completed form to the Service Desk at the fax number provided below.

Return to: Fax Number: 306-781-8480

Email: servicedesk@ehealthsask.ca

User Information

User's Full Name printed:		Work Phone #:	
Facility Name:		Health Region:	
Email Address:		Fax Number:	

Training Session Information

If you are planning training sessions with multiple groups of users, please use a separate cover page for each group.

Date & Time

Training Starts:		Training Ends:	
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Training Account Requests:

Please indicate how many user accounts are required for each security role for this training session. A generic UAT training account (Example: MDSTrain1) will then be created for each user. Please note that generic accounts are only created in the UAT training environment.

All users will be granted permissions based on the role selected. Some roles have optional permissions; to grant a user access to these permissions select the appropriate check box under the "specify optional permission(s)" section below.

Select Access (check off the permission(s) the user is to have)		QTY	Specify Optional Permission(s) (check off the optional permission(s) the user is to have in addition to the basic permissions of the role)
Roles with optional permissions	<input type="checkbox"/> Regular User		<input type="checkbox"/> Error Check Warning Ignored <input type="checkbox"/> Convert Resident ID
	<input type="checkbox"/> Super User		<input type="checkbox"/> Unlock MDS <input type="checkbox"/> Create Multiple Open MDS Records

All users will be granted access to Facilities selected below:

Train Facility – Auto HRN 1 Train Facility – Auto HRN 2 Train Facility – Manual HRN

Service Authorization

Requestor (Training Coordinator)

Signature: _____

_____ Date (YY/MM/DD)

If you need the name of an authorized approver, please call the Service Desk 1-888-316-7446 (local 337-0600)
Please submit this account form to the Service Desk a minimum of 1 week prior to the training date.

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