

## MEDICAL IMAGING ACCOUNT REQUEST FORM (RIS - PACS - PS360)

If you are unclear about any fields below, call the Service Desk at 1-888-316-7446 or 306-337-0600.  
The Service Desk will complete the request within five business days from receiving the request.

Email form to: [servicedesk@ehealthsask.ca](mailto:servicedesk@ehealthsask.ca)

For Medical Imaging Professionals of the Saskatchewan Health Authority (SHA), the Saskatchewan Cancer Agency, or Private Practices that require access to Radiology Information System (RIS), Picture Archiving and Communications System (PACS), and Powerscribe 360 (PS360). **A network account is required if not already provisioned.**

### End User Information

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

Environment: ☐ Production ☐ EFQ ☐ R1Q Date Access Required: (MM/DD/YY) \_\_\_\_\_

User's FIRST name LAST name: \_\_\_\_\_ CPSS#: \_\_\_\_\_

Email Address: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Network Account Username: \_\_\_\_\_ ☐ Network Account Required

### Work Place Information

Primary SHA Facility Name and Location: \_\_\_\_\_

Private Practice Name and Location: \_\_\_\_\_

#### ☐ PACS Access Required (select only one)

<input type="checkbox"/> Technologist	<input type="checkbox"/> Radiologist	<input type="checkbox"/> Surgeon
<input type="checkbox"/> Technologist Super User	<input type="checkbox"/> Point of Care Provider	<input type="checkbox"/> Specialist / ER Physician
<input type="checkbox"/> Film Librarian	<input type="checkbox"/> Point of Care Provider (iExport)	<input type="checkbox"/> SHA System Admin
<input type="checkbox"/> Health Privacy Analyst	<input type="checkbox"/> Health Data Management	
VPN ACCESS: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Health PACS Administrator (BA and Apps Only)		

#### ☐ PS360 Access Required (select only one)

☐ Site Admin ☐ Radiologist / Attending ☐ Resident / Fellow

☐ Transcription / Editor

☐ Other (please specify): \_\_\_\_\_

#### ☐ RIS Access Required (select only one)

**DBC:** ☐ Discern Charge Services\* ☐ Charge Services\* ☐ Health Records ☐ RadNet\*

☐ Scheduling Management ☐ SHA DBC Charge Services (w/Discern) ☐ SHA DBC Charge Services

**RadNet:** ☐ Clerk ☐ Health Records Clerk ☐ Film Librarian ☐ Read Only Office

☐ Nurse ☐ Transcription ☐ Transporter

☐ Hybrid Tech Plus\* ☐ Mammography Technologist\* ☐ Radiology Technologist\*

☐ Obstetrician\* ☐ Supervisor\* ☐ Radiologist\*\*

**Hybrid:** ☐ Office ☐ Office Plus ☐ Porter ☐ Tech\* ☐ Tech Plus\*

**eHealth:** ☐ Data Management ☐ Service Desk

Other Access Type (please specify): \_\_\_\_\_

\* need to add to Radiology Technologist usergroup \*\* need to add to Radiologist usergroup

RIS Facility Access (check Add or Remove for all applicable facilities) <input type="checkbox"/> Add Scheduling Books for Selected Facilities			
<b>Cypress</b>			
<small>Add Remove</small>	<input type="checkbox"/> Cypress Regional Hospital - Swift Current	<small>Add Remove</small>	<input type="checkbox"/> Shaunavon Hospital & Care Centre
	<input type="checkbox"/> Herbert & District Integrated Facility		<input type="checkbox"/> Southwest IHC Facility - Maple Creek
	<input type="checkbox"/> Leader Integrated Facility		
<b>Five Hills</b>			
<small>Add Remove</small>	<input type="checkbox"/> Dr. F.H. Wigmore Regional Hospital - Moose Jaw	<small>Add Remove</small>	<input type="checkbox"/> St. Joseph's Hospital - Gravelbourg
	<input type="checkbox"/> Assiniboia Union Hospital		
<b>Heartland</b>			
<small>Add Remove</small>	<input type="checkbox"/> Kindersley Hospital and District Health Centre	<small>Add Remove</small>	<input type="checkbox"/> Outlook and District Health Cent
	<input type="checkbox"/> Biggar Hospital and District Health Centre		<input type="checkbox"/> Rosetown Health Centre
	<input type="checkbox"/> Davidson Health Centre		<input type="checkbox"/> Unity and District Health Centre
	<input type="checkbox"/> Kerrobert Integrated Health Centre		<input type="checkbox"/> Wilkie and District Health Centre
<b>Kelsey Trail</b>			
<small>Add Remove</small>	<input type="checkbox"/> Athabasca Health Facility - Black Lake	<small>Add Remove</small>	<input type="checkbox"/> Kelvington and Area Hospital
	<input type="checkbox"/> Melfort Hospital		<input type="checkbox"/> Nipawin Hospital
	<input type="checkbox"/> Carrot River Health Centre		<input type="checkbox"/> Porcupine Carragana Hospital
	<input type="checkbox"/> Hudson Bay Health Care Facility		<input type="checkbox"/> Tisdale Hospital
<b>Keewatin Yatthé</b>			
<small>Add Remove</small>	<input type="checkbox"/> La Loche Health Centre	<small>Add Remove</small>	<input type="checkbox"/> St. Joseph's Health Centre - Ile a la Crosse
<b>Mamawetan Churchill River</b>			
<small>Add Remove</small>	<input type="checkbox"/> La Ronge Health Centre		
<b>Prince Albert Parkland</b>			
<small>Add Remove</small>	<input type="checkbox"/> Victoria Hospital - Prince Albert	<small>Add Remove</small>	<input type="checkbox"/> Spiritwood & Distract Health Centre
	<input type="checkbox"/> Parkland Integrated Health Centre - Shellbrook		
<b>Prairie North</b>			
<small>Add Remove</small>	<input type="checkbox"/> Battlefords Union Hospital - North Battleford	<small>Add Remove</small>	<input type="checkbox"/> Meadow Lake Hospital
	<input type="checkbox"/> Lloydminster Hospital		<input type="checkbox"/> Riverside Health Complex - Turtleford
	<input type="checkbox"/> Maidstone Health Complex		<input type="checkbox"/> Saskatchewan Hospital - North Battleford
<b>Regina Qu'Appelle</b>			
<small>Add Remove</small>	<input type="checkbox"/> General Hospital - Regina	<small>Add Remove</small>	<input type="checkbox"/> Broadview Union Hospital
	<input type="checkbox"/> Pasqua Hospital - Regina		<input type="checkbox"/> Indian Head Union Hospital
	<input type="checkbox"/> Wascana Rehabilitation Centre - Regina		<input type="checkbox"/> Southeast Integrated Care Centre - Moosomin
	<input type="checkbox"/> All Nations Healing Hospital - Fort Qu'Appelle		<input type="checkbox"/> St. Joseph's Integrated Care Centre - Lestock
	<input type="checkbox"/> Balcarres Integrated Care Centre		<input type="checkbox"/> Wolseley Memorial Union
	<input type="checkbox"/> Grenfell Health Centre		<input type="checkbox"/> Montmartre Health Centre
	<input type="checkbox"/> Long Lake Integrated Facility - Imperial		<input type="checkbox"/> Whitewood Community Health Centre
<b>Saskatchewan Cancer Agency</b>			
<small>Add Remove</small>	<input type="checkbox"/> SCA SPBC Regina	<small>Add Remove</small>	<input type="checkbox"/> SCA SPBC Mobile Bus
	<input type="checkbox"/> SCA SPBC Saskatoon		
<b>Saskatoon</b>			
<small>Add Remove</small>	<input type="checkbox"/> Royal University Hospital - Saskatoon	<small>Add Remove</small>	<input type="checkbox"/> Rosthern Hospital
	<input type="checkbox"/> Saskatoon City Hospital		<input type="checkbox"/> Wadena Hospital
	<input type="checkbox"/> St. Paul's Hospital - Saskatoon		<input type="checkbox"/> Watrous Hospital
	<input type="checkbox"/> Humboldt District Health Complex		<input type="checkbox"/> Wynyard Integrated Hospital
	<input type="checkbox"/> Lanigan Hospital		<input type="checkbox"/> Saskatoon Health Region - Community

**Sun Country**

Add Remove

- ☐ Weyburn General Hospital  
☐ St. Joseph's Hospital - Estevan  
☐ Arcola Health Centre  
☐ Galloway Health Centre - Oxbow

Add Remove

- ☐ Redvers Health Centre  
☐ Kipling Integrated Health Centre  
☐ Radville Marion Health Centre

**Sunrise**

Add Remove

- ☐ Yorkton Regional Health Centre  
☐ St. Peter's Hospital - Melville  
☐ St. Anthony's Hospital - Esterhazy

Add Remove

- ☐ Canora Hospital  
☐ Kamsack Hospital & Nursing Home  
☐ Preeceville Hospital

**RIS Proxy Information**

- ☐ Radiologist ☐ Resident ☐ Remote Radiologist (does not use eHS PS360)  
☐ Radiologists to allow proxy for: (attach list if needed) ☐ Radiologists to allow proxy by: (attach list if needed)

**Private Practice Only: PACS Users MUST SIGN this Joint Services / Access Policy Confirmation**

I acknowledge I have access to the following. (Please confirm by placing a checkmark in the appropriate boxes):

- ☐ PACS Joint Services / Access Policy.  
☐ Preparing Your Medical Practice for HIPA and PIPEDA.  
☐ eHealth Security Policy.

**AVAILABLE AT:** <https://www.ehealthsask.ca/services/PACS/Pages/Register-Pacs-Account.aspx>

I acknowledge that I understand that I am legally bound by, and agree to comply with, the PACS Joint Services/ Access Policy.

**Name (print):** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_ (MM/DD/YY)

**Approval Section****Manager/Supervisor/Licensed Practitioner (if applicable)**

**Name (print):** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_ (MM/DD/YY)

**Authorized Approver (required)**

I acknowledge that the User is permitted access to the selected services. **If PACS is selected, I acknowledge that the User has read the PACS Joint Services / Access Policy and understands their responsibilities and the appropriate use of PACS as described in the Joint Services / Access Policy as well as their obligations under HIPA.** I further acknowledge that I understand my obligations under HIPA.

**Name (print):** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_ (MM/DD/YY)

**NOTE:** All SHA requests must be sent from the Approver's SHA email account to [servicedesk@ehealthsask.ca](mailto:servicedesk@ehealthsask.ca).

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