

TELEHEALTH SERVICES ACCESS REQUEST FORM

- Call the Service Desk 1-888-316-7446 (local 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.

Email completed form to: TelehealthSupport@eHealthsask.ca

Request Type: New User Change User Remove User

User Information

Full Name (printed):	Work Phone #:
Job Title:	Email Address:
Organization (Health Service Partner):	Domain\Username:

Telehealth SK Clinical Booking Form (CBF) Access

Access Type:	Submit booking forms	Receive & process submitted booking forms	Unsure
	Existing CBF Landing Page	New CBF Landing Page	
Landing Page Title:			
Consultant(s)/Consultant Group:			
Specialty:			

TelePresence Management Suite (TMS) Access

Access Type:	Read & edit	Read-only	Not required
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Organization Authorized Approver

I acknowledge that the subscriber is permitted to access the selected services.

If you need the name of an authorized approver, call the Service Desk 1-888-316-7446.

Full Name (printed):	Work Phone #:
Job Title:	Email Address:
Signature:	Date: