## eHealth Saskatchewan

## AMBULANCE UPLOAD (AMUP) ACCOUNT 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 two days from receiving the request. Return to: Fax Number: 306-781-8480

Email: servicedesk@ehealthsask.ca

Elliali. Selvicedesk@el	lealuisask.ca	
User Information		
Type of request (check one):	New user	Change in user type Remove
User's Full Name printed:		Work Phone #:
Working Title:		Email Address:
Organization Name:		Fax Number:
Environment Producti	on	
Access Requested		
User Level (check one): Ambular	nce Service / Data-Entry Cool	rdinator 🗌 Sask Health Administrator
Ambulance Service Provider Name:		
User's Agreement		
General Agreement	Workst	tation Security
<ul> <li>As a user of the system, I recognize of securing personal health inform.</li> <li>I agree to utilize the information in system for the purposes authorized Executive Director or their designa</li> <li>I recognize that the use of this data or unlawful purposes is strictly pro subject to prosecution by the Gove Saskatchewan or its agents.</li> </ul>	ation. syst Included in the info Id by my Regional I wi te. syst In for unauthorized I ha hibited and is pas	gree to keep secure all data available to me in the stem. I will not allow unauthorized users to access this ormation. iill keep private all passwords associated with the stem. ave secured my workstation with a screen-saver ssword to assure security should I leave my machine an extended period of time.
Service Authorization		
User's signature:		
		Date (YY/MM/DD)
I acknowledge that the subscriber is pe	rmitted access to the Dat	te access is required:
selected services.		Date (YY/MM/DD)
Manager's Information		
Name:		
	(please print)	Work Phone Number
Signature:		
		Date (YY/MM/DD)
Authorized Approver's Information Name:		
	(please print)	Work Phone Number
Signature:		
		Date (YY/MM/DD)
If you need the name of an authorized The most recent version of this form c		rvice Desk 1-888-316-7446 (local 337-0600) //www.ehealthsask.ca/forms