



## Account Management Form

### Instructions for Completion

1. Applicant to complete section 1 and 2
3. Applicant to forward completed application to Registration Authority for approval and posting to ENITS Help Desk as a pdf file
4. Registration Authority to forward approved request form as a pdf to : [enits@lhsc.on.ca](mailto:enits@lhsc.on.ca)

### Section 1

**New requestor- select one of the account options:**

- New Physician account- Telestroke
- New Physician account- Neurosurgeon/ Spinal Surgeon
- New Physician account- Adult/ Pediatric Intensivist
- New Physician account- Neurosurgery Resident/ Fellow
- New Physician account- Neuroradiologist/ Neurologist
- New Physician account- Vascular/ Cardiac
- New End user account- CritiCall Medical Director
- New End User account - Paediatric Cardiologist
- New CritiCall account
- Modification to Existing account
- Deletion of Existing account

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- Last Name of Applicant \*
- CPSO # \***
- Primary Hospital or Organization
- Primary Email address \*
- Primary contact phone \*
- Administrative staff e-mail (if applicable)

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|  | First Name* |  |
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\* denotes Mandatory Field

Use of this system is limited to authorized users to provide or facilitate patient care. Other use is strictly prohibited. Users are responsible to maintain the system's security, including logging off after completing tasks, not leaving an open access unattended and maintaining the security of unique access codes.

### Section 2

**Medical Specialty**

- Telestroke
- Neurosurgeon/ Spinal Surgeon
- Adult/ Pediatric Intensivist
- Neurosurgery Resident/ Fellow
- Neuroradiologist/ Neurologist
- Vascular Surgeon
- Cardiac Surgeon
- CritiCall Ontario
- Paediatric Cardiologist

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**For completion by ENITS Support Staff**

Help Desk Personnel to create work ticket in SDE logging account creation details