

SIU HealthCare / SIU SOM

External User Request

Instructions

Please send completed form to Director of Patient Safety & Privacy

Phone: (217) 545-5071 or Fax: (217)545-4410

NOTE: Requires approval from SIU's External User Access committee, which meets monthly.

If user request is urgent please call the above number.

User Information

	New access request <input type="checkbox"/>	Renewal of current access <input type="checkbox"/>
Last Name		
First Name		
Credentials(RN,MD etc)		
Job Title		
Role		
DOB		Last 4 of SSN
Start Date		Stop Date
Email		
Employer		
SIU Sponsoring Department		Phone #
SIU Sponsoring Dept Supervisor Name		

Requester Information

Requesters Name
Requesters Phone #
Requesters Employer
Requesters email
Requesters Signature

User Last Name

Explicit business case reason is required for access to ANY SIU system.

Reason for access

Systems Access -Please check all that apply

Non-Clinical Systems

Off-Campus Access

SIUMED Campus Wireless
(other than guest network)

Calendar & Email

Academic Systems
(please specify which systems in 'reason for access' box)

Network Drive Access

Clinical Systems

Approximate # of records to be accessed

Centricity EHR (CEMR) historical patient Med Record

FCM Quincy EHR

FCM Carbondale EHR

Allscripts TouchWorks EHR

TouchWorks account information will be released after training is complete.

View Only

Read/Write

Centricity Business Practice Management System (CB)

CB account information will be released after training is complete and the system competency test is passed.

General Inquiry (View Only)

Charge Entry Coding/

Basic Appt Scheduling

Clinic Billing

Referral Management

Coding Manager

Front Desk Reception

For SIU Use Only

BAA on File

Confidentiality Statement Received

Approved

Denied

Denial Reason

Signature

Date

SIU Sponsoring Department Designee		
Committee Member		

Access will expire one year from the date of approval if no Stop Date noted.