



Enterprise EHR Add/Remove User(s) Request Form

Please fill out this form when requesting new users or to disable existing users. Indicate user's name and a title/role. For consistency, we will construct the user name using the first two initials of the first name and then the last name. If applicable, specify an existing user profile to model new user after. Also indicate if Rx prescribing rights, note ownership, CQS access, scan login and ability to unlock notes is required. List any users whose Enterprise EHR access needs to be disabled in the lower section.

Practice/Group Name: _____

Name (Last, First): (Please call to request new provider setup. Additional information is required.)	Title/Role	Specify Existing Username to Copy Favorites from	Rx Rights	Note Owner	CQS Access	Scan Login	Unlock Notes	Comment

Users to be disabled:

Fax to TeamPraxis at (808) 949-0483 ATTN: TW SUPPORT



1585 Kapiolani Blvd. Suite 1800
Honolulu, Hawaii 96814
(808) 941-3363 (main)

Authorized by: _____

Date: _____

Print Name: _____

Contact Ph#: _____

Please allow up to 48 hours for your request to be completed.