Website User Access Form

If you have questions, please email Pam Benci at plf@med.umich.edu

<u>Instructions:</u> Please **download this form** and complete it. Scan in the form, or send a picture of the form, via email to Pam Benci (plf@med.umich.edu)



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Desired Username (Recommend first initial and last name; i.e. JSmith) E-mail Address Hospital Name (Hospital you are requesting access for) Role Structural Heart Coordinator Structural Heart Coordinator/Data Abstractor (TVT Registry Site Manager) Data Abstractor/Coordinator (TVT Registry Site Manager) Do you have MISHC access at other hospitals? Yes (if yes, see below) No If yes, please list all Hospitals and corresponding Usernames First/Last Name _____ Position/Title **Hospital Address** Office Phone Mobile / Cell Phone