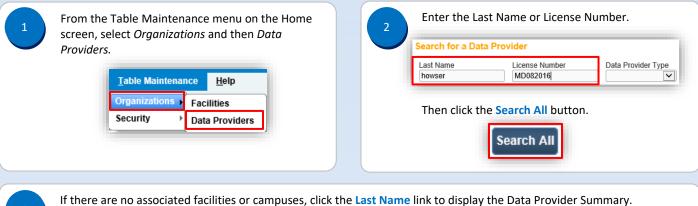


## **Providing User Access for an Existing Data Provider**

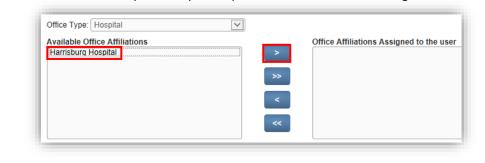


Last Name howser	License Number MD082016	Data Provider	Type			
Last Name ↓	First Name	Facility		Start Date	End Date	Data Provider Type
Howser	Doogie			1/1/1900		Medical Certifier

Note: If the search results show a facility name or campus association in the Facility column, reference QRS-2027-MC, Associating Your Facility with an Active or Terminated User or Data Provider Account instead of proceeding here.

associating your facility or campus with this data provider.	Start Date: 01/01/1900 End Date:	Name: Doogle Howser Title: MD User Address: 111 S Front Street Harribburg, Pennsylvania 17111 User Mailling Address: 111 S Front Steet Harribburg, Pennsylvania 17111	Work Number: Cell Number: Home Number: Fax Number: E-mail: Preferred Contact:	Medical License: MD082016 NPI Number: Funeral Director License:
	End Date Data Provider			
e: If any information for this account	Create User for Data Provider	Update Data Provider Information	Update Contact Information	Update Licenses
correct or missing, you must finish	Doogie Howser is authorized to sign for the following events: Death			
process of providing access to E <sup>™</sup> before you can update the punt information.		Add/Rem-	ove Offices	Retu

The Update User screen displays. Select your facility or campus name from the **Available Office Affiliations** field and click the **Add Arrow** button to add your facility or campus to the **Office Affiliations Assigned to the user** field.



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6	Your facility or campus has been added to the <b>Office Affiliations</b> <b>Assigned to the user</b> field. Click the <b>Next</b> button.	Office Type: Hospital
		Cancel << Back Next >>

**Note:** If you are the facility account manager for multiple facilities or campuses, you will only see the facility or campus you selected at login. If the data provider requires access to your other facilities or campuses, after you create this account, log out. Then login again and select the office affiliation link for the facility or campus you need to add. Repeat Steps #1 – #3. Click the Update Offices/Roles/Business Functions link and complete Steps #5 – #7 to add that facility or campus to the data provider's account.

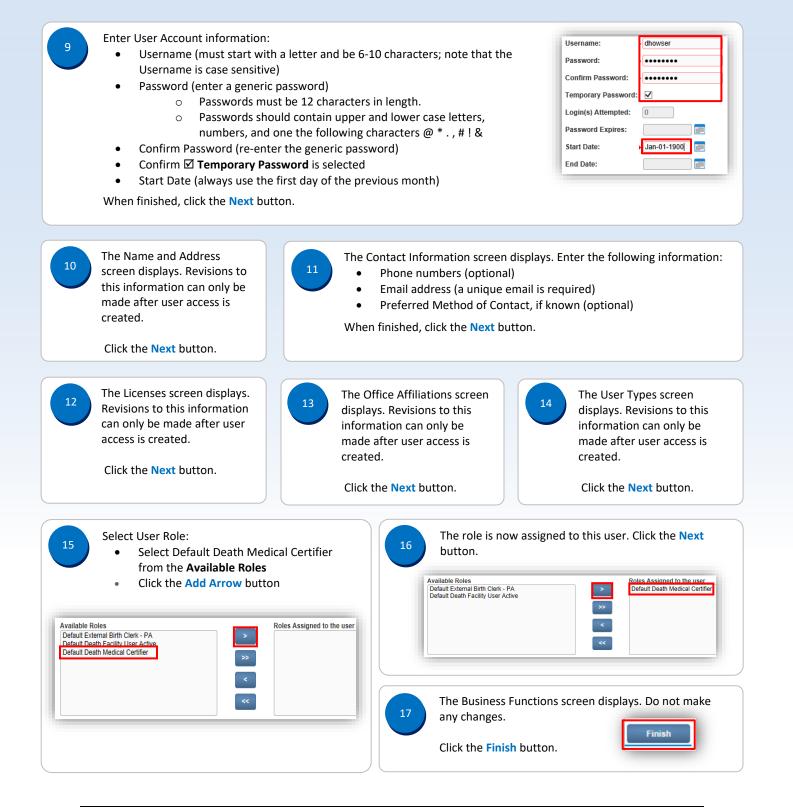
Select Data Provider Type: Please select Data Provider type for each Office Affiliation: Data Provider Types Medical Certifier 🗸 Select Medical Certifier . Offices: Harrisburg Hospital Click the Add button • Add After clicking the Add button, a dialog box will display showing the User Type and Office Affiliation. Under User is authorized to sign for the following events: that are checkboxes for the type of events the data Birth 🖌 Death provider is authorized to sign. Click the 🗹 Death checkbox. Click the Finish button.

Data Provider Summary			
Start Date: 01/01/1900	Name: Doogie Howser	Work Number: - Ext	Medical License: MD082016
End Date:	Title: MD User Address:	Cell Number:	NPI Number:
	111 S Front Street Harrisburg, Pennsylvania 17111	- Home Number:	Funeral Director License
	User Mailing Address: 111 S Front Street	- Ext Fax Number: - Ext	
	Harrisburg, Pennsylvania 17111	E-mail:	
End Date Data Provider		howser@hospital.com	
		Preferred Contact:E-Mail	
Create User for Data Provider	Update Data Provider Information	Update Contact Information	Update License
		rg Hospital ign for the following events: Death	

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The User Summary displays. Review and verify that all of the data provider's information is correct and matches the DAVE™ User Account Request form. If any information needs corrected, click the link to display the applicable screen for editing.

User Name: alexkarev Password Expiration: 11/24/2018 Start Date: 01/01/1900 End Date: Logon Attempts: 0	Name: Alex Karev Title: MD User Address: 100 Front Street Harrisburg, Pennsylvania 17110 User Mailing Address: 100 Front Street Harrisburg, Pennsylvania 17110	Work Number: - Ext Cell Number: - Home Number: - Ext Fax Number: - Ext E-mail: Akaver@hospital.com Preferred Contact:	Medical License: MD123456 NPI Number: Funeral Director License:
Update Login Information		Update Contact Information	Update Licenses
	Alex Karev is authorized to sig	n for the following events: Death	
	Office	Roles	Additional Business Function
User Type			
User Type Medical Certifier	Harrisburg Hospital	Default Death Medical Certifier	
	Harrisburg Hospital Total Records : 1	Default Death Medical Certifier Total Records : 1	No data found.

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Notify the data provider of their user name and temporary password. Explain the following regarding passwords:

- The user will be prompted to create their own (new) password when they login.
- The new password must be 12 characters in length.
- The new password should contain upper and lower case letters, numbers, and one of the following characters @ \* . , # ! &
- The new password will be valid for sixty days.