



High Tech Ordering and Management System (Hub)

USER REGISTRATION FORM

Please read notes below before completing the form.

1. All fields are mandatory.
2. Please use BLOCK CAPITALS when completing the form. Forms which cannot be processed will be returned to sender.
3. HCP = Health Care Professional Registration Number e.g. MCN, NMBI etc. A number must be entered here by all health care professionals.
4. Please provide one email address only. This email address will be used for all high tech hub system correspondence. Please note we cannot accept gmail/yahoo or group mail.
5. A consultant is responsible for the prescription. A prescriber is the individual who will complete this activity on behalf of the consultant. Consultant access automatically has prescriber rights.

Each Hospital Consultant will be set up as a "team" on the high tech hub and Consultant prescribers, Nurse prescribers and Nurse/Clinical Support will be added as team members.

6. Authorisation Section: Authorised signatory grades for the purpose of this form are at a minimum:
 - a. Hospital /Supplier CEO (or designated officer)
 - b. General Manager or Equivalent.
7. **Data Protection Notice:** Personal data collected by the HSE is used for the purpose of providing a health service. It is required, stored, processed and only disclosed to other bodies in accordance with the laws relating to proper treatment of personal data.

