



# User Request Form

Name of User:

Co# (s):

Office:

Access Needed—Check all that apply

## Tiger

Scheduler      Registration      Inquiry      Charges      Transaction Posting

ID Card Scanning      Insurance Processing      Administrative      Other:

**OR**

Same as user:

## PM (Medic)

Level:

Other:

**OR**

Same as user:

## Query

### EMR/Allscripts Pro

Front Desk      Billing      Dr/Nurse      Medical Records      Other:

Faxing      Document Manager

**OR**

Same as user:

## PayerPath

Company#'s:

Like User:

Please call to set-up training

Name:

Phone:

## Requestor Information

Name:

Title:

Phone