



Security Administrator Designation Form (Facility)

To access the Online Registry, each health care facility or private practice needs to designate a **Security Administrator**. CIR staff will assign a User ID and Password to the Security Administrator, who can then set up User IDs and Passwords for additional practice staff members. If the Security Administrator is not a doctor, he/she needs to register under the license number of a supervising physician.

1. Complete the fields below; including the facility code you were given when you registered with CIR. (If you do not have a code or have forgotten your code, please contact the CIR at (212) 676-2323)
2. Complete and sign the *Security Administrator Confidentiality Statement for Online Access*.
3. Fax or mail both forms along with a copy of your facility letterhead to the above address. *Letterhead is required to process your request.*
4. Upon receipt of these forms, CIR staff will assign a new User ID/Password and will call the site to provide the Security administrator with this information.

Please Print

I hereby designate (Name) _____

(Title) _____ as Security Administrator for the following facility:

Facility Name _____ Facility Code _____

Address _____

Number and Street Name

Borough

State

Zip

Phone (____) _____ Fax (____) _____ Email _____

Name and title of person authorizing Security Administrator:

(Name) _____

(Title) _____

Signature of person authorizing Security Administrator _____

Signature of Security Administrator Designee _____

Supervising Physician's Name _____ License Number _____

Supervising Physician's Signature _____

For Official Use:

Security Administrator User ID _____ **Password** _____