



# Private Hospital Application Form

FOR OFFICIAL USE ONLY

Reference Number:

Date Received:

This is an application form for the High Tech Ordering and Management Hub for Consultants that require access from a private room. This allows consultants to have one log in for multiple hospital sites.

## Prescribing Consultant

First Name	<input type="text"/>	Surname	<input type="text"/>
Telephone	<input type="text"/>	Medical Council No.	<input type="text"/>
Address	<input type="text"/>		
	<input type="text"/>	Eircode	<input type="text"/>
Email	<input type="text"/>		
Prescribing Specialty	<input type="text"/>		
Existing High Tech Hub User Name (if applicable)	<input type="text"/>		

## Private Hospital Details (Note: Details as displayed on Prescription)

Hospital Name	<input type="text"/>
Telephone	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	Eircode <input type="text"/>

## Conditions of Application

- Must be completed by those requesting consultant or prescriber roles.
- Only fully completed request forms will be processed. All fields are mandatory unless otherwise stated. **Incomplete forms will be returned to sender by post.**
- This email will be used for all high tech hub system correspondence.
- Completed and signed forms should be scanned, attached and emailed to the Primary Care Reimbursement Service at [PCRS.HiTech@HSE.ie](mailto:PCRS.HiTech@HSE.ie). Alternatively, they can be posted to the High Tech Co-Ordination Unit, Primary Care Reimbursement Service, J5 Plaza, North Park Business Park, Exit 5 M50, North Road, Finglas, Dublin 11. **Forms will not be accepted by fax.**
- **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 disclosed to other bodies in accordance with the laws relating to proper treatment of personal data.

## Completed forms should be returned to:

### High Tech Co-Ordination Unit

Primary Care Reimbursement Service  
J5 Plaza, North Park Business Park  
Exit 5 M50, North Road, Finglas, Dublin 11.

Phone: 01-864 7135

Email: [PCRS.HiTech@hse.ie](mailto:PCRS.HiTech@hse.ie)

## Authorisation of Request

I understand that the details of usernames and passwords must be kept securely and according to the standards which apply to the system access. I am fully aware of data protection issues and my responsibilities regarding the correct use and access of client data.

Date