Dragon Medical One (DMO) Request Form

Please forward to ITSS Service Centre by scanning / emailing completed form to SERVICECENTRE@gov.pe.ca or by fax at 902-368-4716. If you have questions, please contact the Service Center at 902-620-3600

GENERAL USER INFORMATION (* Fields are mandatory)				
First Name: *		Facility/Site: *		
Last Name: *		Dept/Unit: *		
Middle Initial:		Position:		
Phone: *		Email: *		
Windows Username: *		Date Account Needed: *		
Is this for a Locum: *	□ Yes □ No	If Yes, Locum End Date:		
Install of Dragon Medical One Software Required? *	☐ Yes ☐ No	If yes, Government Issued Computer #:		
Approving Manager / Director Name (printed): *		Approving Manager / Director Signature: *		
DICTATION USAGE (* Fields are mandatory)				
Will the user be dictating into the CIS? * if yes, please indicate if access to any of the following Cerner applications are required:			□ Yes	□ No
	CIS PowerChart DMO User:		☐ Yes	□ No
	CIS FirstNet DMO User:		☐ Yes	□ No
	CIS Pathnet App Bar DMO User:		□ Yes	□ No
Will the user be dictating into the Telus EMR / CHR? *			□ Yes	□ No
Will the user be using PowerMic Mobile? * PowerMic Mo an app that allows the user to use their cell phone as a mice Otherwise, the user may order a PowerMic 3 below.			□ Yes	□ No
NEW MICROPHONE: For Purchase				
☐ Yes - Funds have been approved for PowerMic 3 (handheld microphone)		Costs (subject to change): Nuance PowerMic 3 Microphone (if required): \$360.00 (one-time cost)		
Manager / Director signature approving purchase:				