

Ontario Laboratories Information System (OLIS) Service Enrolment

Use this form to enrol an existing registrant into the OLIS service sponsored by a health care provider.

Form Completion Instructions

Before proceeding with the enrolment request, the user must be registered with an @oneid.on.ca account. If user is not registered, please do so using the LRA online tool.

1. This form must be completed for each existing registrant
2. All fields must be completed as specified.
3. The Local Registration Authority can email the completed form to registration.agents@ehealthontario.on.ca for processing.

Do not submit any personal information via email including: Gender, Date of Birth, and Identity Document Information

Part 1 – Registrant Details

First Name	Last Name
Login ID (firstname.lastname@oneid.on.ca)	

Part 2 – Sponsor Information

Sponsoring Organization Name and Location (e.g. Twin Falls Health Sciences Network – ABC General Hospital)

Sponsor's Full Name

Sponsor's Business Telephone * (incl. Extension)	Sponsor's Business Email
--	--------------------------

This request was authorized by the above sponsor via: Email Memo Other (specify):

OLIS Enrolment Request Please provide the OLIS attributes as designated by MOHLTC.

Please select one or more enrolments

- OLIS Web Application/Patient Lab Result Portlet OLIS Consent Management Application COIL Status Reports

Please select one or more environments

- Client Self-Test/Conformance Testing (CST) Data Validation Testing (DVT) Production (includes Personal Health Information)

OLIS Organization Type	OLIS Organization Identifier
Specify Type: HOS Lab Practitioner Other (Specify):	

Role

Practitioner Other (Specify):

If Practitioner Role was selected, specify the Licence Type from the drop down. If Registrant is a **licensed practitioner, provide the following mandatory information:**

License Type: License Number: License Jurisdiction:

Part 3 – Local Registration Authority Information

First Name	Last Name
Login ID (firstname.lastname@oneid.on.ca)	