

Request for Access to Pathways

If you would like to have access to Pathways please complete the information below. Please note that access keys are individual and you should request one for each GP and MOA who will have access to Pathways. Please complete the following information and return to us as shown below.

Clinic Name: _____

User's name (GP or MOA)	Role within the clinic	Email address to send key

When your user key has been verified, you will receive an email with a link to the Pathways site, a unique user key and instructions for how to create your account.

Return this form to the Rural and Remote Division Pathways
 Administrator Email: ruralandremote@divisionsbc.ca

IMPORTANT INFORMATION:

If a user leaves an office with a login and password that has been shared the office is required to change the password. If a user leaves an office and has his or her own unique login and password, the office is required to contact Pathways administration to deactivate that account. Please contact us at ruralandremote@divisionsbc.ca.