

**Johns Hopkins Medicine Computer Access Agreement
Eclipsys SCC Point of Care System**

I understand that any patient medical or non-medical information belongs to the patient and that JHM only permits me to access such information to the extent that providing or supporting the provision of patient care in the performance of my duties is necessary. I also understand that all medical and personal information regarding patients is confidential and, unless directly related to the care of patients and authorized by JHM policy, I will not reveal it or discuss it with other patients, friends, relatives or anyone else within or outside JHM.

I understand that if issued Eclipsys Point of Care access security code, I must keep the security code confidential and safeguard it from disclosure to any unauthorized person. I understand that my access security code is only to be used in carrying out my duties. I therefore certify that I will not disclose the code assigned to me to any other individual nor will I allow any other person to use my codes to access the Eclipsys Point of Care system. I likewise agree not to use another employee's assigned security code to obtain access to the Eclipsys Point of Care system even if for the express purpose of performing my duties. I further understand that JHM considers access security codes to be confidential and that any unauthorized disclosure or use of the codes constitutes a breach of that confidentiality.

Since my access security code constitutes the electronic version of my signature, I understand that I will be held accountable for all work performed under my security code. As a result, I affirm that I will not permit any other employee to obtain information from the Eclipsys Point of Care system through the use of my access codes and will not leave the computer logged on and unattended and/ or otherwise available for unauthorized use under my security access code. In the event I believe that the use or confidentiality of my access security code has been compromised, I will immediately change my security access code on-line and inform my supervisor as well as the JHMCIS Security Manager.

I understand if I violate the provisions of this Computer Access Agreement I will be subject to disciplinary action up to and including termination or revocation of employment privileges by JHM on the first or any subsequent violation. Passwords will expire every 90 days. It is your responsibility to maintain your password.

USERNAME REQUESTS WILL BE PROCESSED WITHIN A 48 HOUR PERIOD.

Please **PRINT** your name as you want it to appear as your signature (including credentials) in the Eclipsys signature area, and sign on the line below:

First Name: _____ MI: _____ Last Name: _____

RN _____ MD _____ RT _____ MS IV _____ JHU SON _____ Other _____ READ ONLY ACCESS? _____

Signature: _____

The last four digits of the Social Security #: _____

JHH Badge ID Number: _____

Contact Phone Number or pager: _____

Department Manager or Designee Signature: _____

User Id (JHED id): _____

Whenever possible, use JHED id as your user id (JHED id is usually comprised of the first initial of your first name, the first few characters of your last name and a number. For instance, Thomas Johnson might have JHED id "tjohns3". User Id's are not case sensitive and must be unique).

Your Password will be assigned by the Eclipsys Administrator on-call or designee and MUST be changed by you on-line the first time you log onto the system. Passwords must be a minimum of 6 alphanumeric characters, are entered in lower case letters initially and are case sensitive.

JHMCIS ADMINISTRATIVE USE ONLY:

User entered by: _____ Date/Time: _____ User Class: _____

User Name Assigned: _____

Email _____ Could not be contacted _____ Text Pager _____ VM _____ Contacted User via: Phone _____